

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2016 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>
A	This return/report is for: <div style="display: inline-block; width: 45%;"> ☐ a multiemployer plan </div> <div style="display: inline-block; width: 45%;"> ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) </div>
	<div style="display: inline-block; width: 45%;"> ☒ a single-employer plan </div> <div style="display: inline-block; width: 45%;"> ☐ a DFE (specify) ____ </div>
B	This return/report is: <div style="display: inline-block; width: 45%;"> ☐ the first return/report </div> <div style="display: inline-block; width: 45%;"> ☐ the final return/report </div>
	<div style="display: inline-block; width: 45%;"> ☐ an amended return/report </div> <div style="display: inline-block; width: 45%;"> ☐ a short plan year return/report (less than 12 months) </div>
C	If the plan is a collectively-bargained plan, check here. ☐
D	Check box if filing under: <div style="display: inline-block; width: 33%;"> ☒ Form 5558 </div> <div style="display: inline-block; width: 33%;"> ☐ automatic extension </div> <div style="display: inline-block; width: 33%;"> ☐ the DFVC program </div>
	☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information	
1a	Name of plan <u>HIBU INC. 401(K) PROFIT SHARING PLAN TRUST</u>	1b Three-digit plan number (PN) ► <u>001</u>
		1c Effective date of plan <u>12/01/1958</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>HIBU INC.</u> <u>6300 C STREET S.W.</u> <u>P.O. BOX 3162</u> <u>CEDAR RAPIDS, IA 52406</u>	
	2b Employer Identification Number (EIN) <u>20-0829862</u>	
	2c Plan Sponsor's telephone number <u>319-790-3934</u>	
	2d Business code (see instructions) <u>541800</u>	

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	<u>10/15/2017</u>	<u>KARA KRUEGER</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number)			Preparer's telephone number

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

Form 5500 (2016)
v. 160205

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 4568
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 2464 6a(2) 2051 6b 23 6c 1843 6d 3917 6e 12 6f 3929 6g 3815 6h 134
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: 2F 2G 2J 2K 2T 2E b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

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

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

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

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

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

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

Receipt Confirmation Code _____

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

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

A Name of plan HIBU INC. 401(K) PROFIT SHARING PLAN TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 HIBU INC.	D Employer Identification Number (EIN) 20-0829862

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation FIDELITY INVESTMENTS INSTITUTIONAL
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04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	74001	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	63372	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CAPITAL STRATEGIES INVESTMENT GROU

26-4789150

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	CONSULTANT	43750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

THOMPSON HINE

34-0575300

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	ATTORNEY/LEGAL	15800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GS GROWTH OPPS INST - GOLDMAN, SAC 13-5108880	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GS SM CAP VALUE INST - GOLDMAN, SA 13-5108880	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JPM MIDCAP VALUE L - BOSTON FINANC 330 W. 9TH STREET KANSAS CITY, MO 64105	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE BAL - T. ROWE PRICE SER	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2005 - T. ROWE PRIC	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2010 - T. ROWE PRIC	0.15%	
52-2269240		

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TRP RETIREMENT 2015 - T. ROWE PRIC	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TRP RETIREMENT 2020 - T. ROWE PRIC	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TRP RETIREMENT 2025 - T. ROWE PRIC	0.15%	
52-2269240		

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2030 - T. ROWE PRIC 52-2269240	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2035 - T. ROWE PRIC 52-2269240	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2040 - T. ROWE PRIC 52-2269240	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2045 - T. ROWE PRIC	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2050 - T. ROWE PRIC	0.15%	
52-2269240		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2055 - T. ROWE PRIC	0.15%	
52-2269240		

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIREMENT 2060 - T. ROWE PRIC 52-2269240	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

<div>SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration</div>		<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2016</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016					
A Name of plan HIBU INC. 401(K) PROFIT SHARING PLAN TRUST				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 HIBU INC.				D Employer Identification Number (EIN) 20-0829862	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU CORE CONSERV INT BD FD					
b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST COMPANY					
c EIN-PN 23-6994310-156		d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19956252		
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLINGTON MID CAP					
b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, N.A.					
c EIN-PN 04-6913417-024		d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8312199		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		

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Schedule D (Form 5500) 2016 v.160205

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Internal Revenue Service</small> <small>Department of Labor</small> <small>Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016		
A Name of plan HIBU INC. 401(K) PROFIT SHARING PLAN TRUST	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 HIBU INC.	D Employer Identification Number (EIN) 20-0829862	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	1822535
(2) Participant contributions	1b(2)	0	808166
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	178237	108614
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property).....	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans.....	1c(8)	4691632	4035829
(9) Value of interest in common/collective trusts	1c(9)	16243078	28268451
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	234929064	223940869
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	256042011	258984464

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	256042011	258984464
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	1823242	
(B) Participants	2a(1)(B)	12719714	
(C) Others (including rollovers)	2a(1)(C)	693234	
(2) Noncash contributions	2a(2)	0	15236190
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	50	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	184125	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		184175
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	6569042
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	6569042	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		6569042
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	0
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	0
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		877497
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		328580
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		9594235
c Other income.....	2c		2110392
d Total income. Add all income amounts in column (b) and enter total.....	2d		34900111

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

(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	31741323	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		31741323
f Corrective distributions (see instructions)	2f		1175
g Certain deemed distributions of participant loans (see instructions)	2g		18224
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	63372	
(4) Other	2i(4)	133564	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		196936
j Total expenses. Add all expense amounts in column (b) and enter total	2j		31957658

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2942453
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: PRICEWATERHOUSE COOPERS

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		15000000
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		1914
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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

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

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

Part V Trust Information

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection.
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For calendar plan year 2016 or fiscal plan year beginning 01/01/2016 and ending 12/31/2016

A Name of plan <u>HIBU INC. 401(K) PROFIT SHARING PLAN TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>HIBU INC.</u>	D Employer Identification Number (EIN) <u>20-0829862</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

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

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

Schedule R (Form 5500) 2016
v. 160205

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

hibu Inc. 401(k) Profit Sharing Plan

**Financial Statements and Supplemental Schedule
December 31, 2016 and 2015**

hibu Inc. 401(k) Profit Sharing Plan
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December 31, 2016 and 2015

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Note: Other schedules required by Section 2520.103-10 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended, have been omitted because they are not applicable.	



Report of Independent Auditors

To the Administrator of hibu Inc. 401(k) Profit Sharing Plan

Report on the Financial Statements

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

Management's Responsibility for the Financial Statements

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

Basis for Disclaimer of Opinion

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



Disclaimer of Opinion

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

Other Matter

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

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

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

PriceWaterhouseCoopers LLP

October 13, 2017

hibu Inc. 401(k) Profit Sharing Plan
Statements of Net Assets Available for Benefits
December 31, 2016 and 2015

	2016	2015
Assets		
Investments, at fair value	<u>\$ 252,317,934</u>	<u>\$ 251,350,379</u>
Receivables		
Notes receivable from participants	4,035,829	4,691,632
Employer contributions receivable	1,822,535	1,645,716
Contribution receivable from participants	<u>808,166</u>	<u>464,676</u>
Total receivables	<u>6,666,530</u>	<u>6,802,024</u>
Net assets available for benefits	<u>\$ 258,984,464</u>	<u>\$ 258,152,403</u>

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

hibu Inc. 401(k) Profit Sharing Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2016

Additions

Investment income	
Net appreciation in fair value of investments	\$ 10,791,938
Interest and dividend income	6,761,619
	<u>17,553,557</u>

Contributions

Employer contributions	1,823,242
Participant contributions	12,719,714
Rollover contributions	693,234
Total contributions	<u>15,236,190</u>
Total additions	<u>32,789,747</u>

Deductions

Benefits paid to participants	31,760,749
Administrative expenses	196,937
Total deductions	<u>31,957,686</u>
Net increase	832,061

Net assets available for benefits:

Beginning of year	<u>258,152,403</u>
End of year	<u>\$ 258,984,464</u>

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

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

1. Description of the Plan

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

General

The Plan is sponsored by hibu Inc., (the "Company" or "Plan Sponsor")

The Plan provides deferred retirement and savings benefits to Plan participants based upon (a) amounts contributed to the participant's account by the employee and employer; and (b) investment income or loss. Employee contributions made to the Plan are credited to each participant's account through salary deductions. The Company's matching contribution and discretionary profit sharing contributions, if any, are paid annually to the Plan.

The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). Fidelity Management Trust Company is the Trustee of the Plan (the "Trustee").

Eligibility and Participation

Employees are eligible for participation in the Plan on the first of the month following the date in which employment commences. Employees are eligible to receive employer matching contributions either on January 1 or July 1 following their enrollment date and only if they are employed with the Company on the last day of the Plan year.

Contributions

Participants may contribute up to 60% of their annual eligible pre-tax compensation up to the Internal Revenue Service ("IRS") limit of \$18,000 for 2016. In addition, participants age 50 or over are eligible to make additional "catch-up" contributions to the Plan of up to \$6,000 pre-tax or post-tax in 2016. Annually, at its election, the Company makes a matching contribution. The matching contribution for 2016 was 25% of the first 6% of participant's eligible compensation contributed to the Plan. Contributions under the Plan are generally based on total compensation paid by the Company up to the maximum compensation limit of \$265,000 for 2016. In addition, the Company may make discretionary profit sharing contributions to the Plan on behalf of eligible participants. The Company did not make any discretionary profit sharing contributions to the Plan in 2016.

For purposes of determining contributions, compensation is defined as total wages and salary of an employee, including any overtime pay, bonuses and commissions, and excluding holiday bonus and security grants.

Administrative Expenses

Plan administrative fees may include recordkeeping, legal, accounting, trustee, and other administrative fees and expenses associated with maintaining the Plan. Plan administrative fees and expenses are deducted from participant accounts.

Vesting

Participants are immediately vested in their own contributions and earnings (losses) thereon. Participants become vested in benefits arising from the Company's discretionary matching and profit sharing contributions ratably over three years, vesting approximately 33% a year.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

Forfeitures

If a participant terminates service prior to being fully vested in the employer matching contribution or discretionary profit sharing contribution, unvested amounts are forfeited and will be used to reduce future employer contributions to the Plan. Employer matching contributions of \$142,973 were forfeited in 2016. As of December 31, 2016 and 2015, the Company had a forfeiture balance of approximately \$122,275 and \$190,852, respectively. Employer contributions were reduced by \$131,018 from forfeited nonvested accounts in 2016.

Notes Receivable from Participants

The Plan permits participants who are active employees of the Company to borrow up to 50% of their vested account balance subject to a minimum of \$1,000 and a maximum of \$50,000. The loans are collateralized by the vested balance in the participant's account and bear interest as determined by the Plan administrator based on the prevailing interest rates in the market. Loans must be repaid within a maximum of five years through payroll deductions, unless the loan is used to acquire a dwelling unit which is to be used as the participant's principal residence, in which case it may be repaid over a period not to exceed ten years. Participants in legacy 401(k) Plans which transferred into the hibu Inc. 401(k) Profit Sharing Plan when acquired by hibu Inc. are grandfathered into the provisions existing in such legacy plans and can have loans outstanding that exceed ten years. At December 31, 2016, the interest rate on loans outstanding ranged from 4.00% to 11.50%.

Payment of Benefits

The value of a participant's account, including both the employee and the vested portion of the employer contributions and the earnings thereon, is payable to the participant upon retirement, disability or to the participant's beneficiary if death occurs during employment. Additionally, the value of participant's contributions and earnings thereon plus all vested employer contributions are payable upon termination.

Hardship Withdrawal

In case of serious financial hardship, as defined by the Plan, participants may be eligible to receive an emergency withdrawal of their pre-tax contributions.

Investment Options

All participant and employer contributions are directed by the participant among the available investment options. Participants may elect to reallocate their account balances among the funds at any time during the year. There is no limit on the number of changes participants may make. Investment earnings are automatically reinvested into the fund or portfolio from which they were derived.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

2. Summary of Significant Accounting Policies

The financial statements are prepared on the accrual basis of accounting. The following is a summary of significant accounting policies:

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.

Risks and Uncertainties

The Plan provides for various investment options in any combination of money market and mutual funds. These 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 and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits.

A portion of the underlying assets of the mutual funds in which the Plan has invested may include derivative financial instruments. The Plan does not own any of such instruments directly. Such instruments are used primarily to hedge exposures associated with currency exchange rates, interest rates and other factors which may affect security value.

The Plan is exposed to credit loss in the event of nonperformance by the investment managers of the funds. However, the Plan does not anticipate nonperformance by the investment managers.

Valuation of Investments 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. Investment funds are valued at net asset value as reported by fund managers.

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments, which consists of the realized and unrealized gains or losses on those investments. The net investment income is allocated to participants based upon their percentage of the fund balance at the beginning of the year adjusted for benefit payments made during the year and administrative expenses.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is accrued as earned, and dividend income is recorded as of the ex-dividend date.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits payments to participants are recorded upon distribution.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

Contributions Receivable

Employer contributions receivable represent amounts due to the Plan resulting from a formal commitment, legal or contractual obligation for the Plan Sponsor to make a contribution.

3. Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification 820, "Fair Value Measurement," ("ASC 820"), which defines fair value, establishes the framework and gives guidance regarding the methods used for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described below:

- | | |
|---------|---|
| Level 1 | Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access. |
| Level 2 | Inputs to the valuation methodology include. <ul style="list-style-type: none">• Quoted prices for similar assets or liabilities in active markets;• Quoted prices for identical or similar assets or liabilities in inactive markets.• Inputs other than quoted prices that are observable for the asset or liability;• Inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability. |
| Level 3 | Inputs to the valuation methodology are unobservable and significant to the fair value measurement. |

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

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

hibu Inc. 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2016 and 2015

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

	Fair Value at December 31, 2016				
	Level 1	Level 2	Level 3	NAV	Total
Mutual funds	\$232,253,068	\$ -	\$ -	\$ -	\$232,253,068
Money market funds	-	108,614	-	-	108,614
Common collective trust	-	-	-	19,956,252	19,956,252
	<u>\$232,253,068</u>	<u>\$ 108,614</u>	<u>\$ -</u>	<u>\$ 19,956,252</u>	<u>\$252,317,934</u>

	Fair Value at December 31, 2015				
	Level 1	Level 2	Level 3	NAV	Total
Mutual funds	\$234,929,064	\$ -	\$ -	\$ -	\$234,929,064
Money market funds	-	178,237	-	-	178,237
Common collective trust	-	-	-	16,243,078	16,243,078
	<u>\$234,929,064</u>	<u>\$ 178,237</u>	<u>\$ -</u>	<u>\$ 16,243,078</u>	<u>\$251,350,379</u>

It is the Plan's policy to account for asset transfers between levels at the end of the year. During 2016 there were no transfers between levels.

The following is a description of the asset types and valuation methodologies used, by level, for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016 and 2015.

Assets valued using Level 1 inputs in the table above represent Mutual Funds, which are valued using NAV quoted on active markets. The NAV is typically determined by the fund at the close of regular trading in the active market in which the fund is traded. Investments in mutual funds generally may be redeemed daily.

Assets valued using Level 2 inputs in the table above represent Money Market Funds, which are valued using inputs other than quoted prices included in Level 1 that are observable for the asset either directly or indirectly, including inputs in markets that are not considered to be active.

Assets valued at NAV in the table above represent Common Collective Trusts, which are valued using NAV. The investments are funds formed by the pooling of investments by institutional investors, such as a group of not necessarily affiliated pension or retirement plans, typically with the intention of achieving cost savings over similar investment options, such as mutual funds. Common collective trusts are similar to mutual funds, with a named investment manager and documented investment objective. The value of the investment is measured by the fund administrator and is based on the unit value. These investments are not classified within the hierarchy as they use the NAV as a practical expedient.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

The following table presents additional information regarding the Money Market Funds and Common Collective Trusts.

	Fair / Contract Value	Redemption Frequency	Redemption Notice Period
Fidelity Retirement Government Money Market Portfolio (A)	\$ 108,614	Daily	None
Prudential Stable Value Fund (B)	19,956,252	Daily	None

(A) The fund seeks income commensurate with securities issued by the U.S. Government or its agencies. Other investments include repurchase agreements in respect of these U.S. Government securities. This fund is recorded on the financial statements at fair value.

(B) The fund is primarily comprised of investment contracts issued by financial companies including Guaranteed Investment Contracts (GICs), Separate Account GICs, and Security Backed Investment Contracts. This fund is recorded on the financial statements at NAV, which materially approximates fair value.

The plan held no assets at December 31, 2016 or December 31, 2015 that were valued using Level 3 inputs.

4. Information Certified by the Trustee

In accordance with 29 CFR 2520.103–5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Trustee has certified that the investment information included in the financial statements as of December 31, 2016 and 2015 and for the year ended December 31, 2016 and the related schedule of assets held at December 31, 2016 are complete and accurate.

	2016	2015
Information certified by the Trustee		
Investments, at fair value*	\$ 252,317,934	\$ 251,350,379
Notes receivable from participants	4,035,829	4,691,632

	2016
Net depreciation in fair value of investments	\$ 10,791,938
Interest and dividend income	6,577,494
Total investment gain	<u>\$ 17,369,432</u>
Interest income on notes receivable from participants	\$ 184,125

* Investments include a Common Collective Trust, which is reported at NAV; however NAV approximates fair value.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

5. Guaranteed investment contract

The Plan has a fully benefit-responsive synthetic guaranteed investment contract with The Prudential Insurance Company of America ("Prudential"). Prudential maintains the contributions in the Prudential Stable Value Fund, a common collective trust. The fund is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

Because the guaranteed investment contract is fully benefit-responsive, NAV is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. NAV, as reported to the Plan by Prudential, represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments at NAV.

There are no reserves against NAV for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on a monthly basis for resetting.

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

The guaranteed investment contract permits the insurance company to terminate the agreement prior to the scheduled maturity date with 60 days advance notice. In the event of termination without cause by Prudential, the Plan shall retain the underlying assets in the common collective trust.

The average crediting rate yield for the guaranteed investment contract was 1.86% for the plan year ended December 31, 2016.

6. Party-In-Interest Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company ("FMTTC"), trustee of the Plan, and therefore these transactions qualify as party-in-interest. Fees paid by the Plan to Fidelity Investments Institutional Operations Company, Inc., an affiliate of FMTTC, for record keeping and advisory services were \$196,937 for the year ended December 31, 2016. Loans to participants also qualify as party-in-interest transactions.

7. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of termination, to the extent permitted by law, all participant accounts shall

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

become fully vested and distributed in accordance with the provisions of the Plan. The Company also has the right to amend the Plan at any time.

8. Income Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated May 8, 2012 that the Plan is qualified and the trust established under the Plan is tax exempt, under the appropriate sections of the Internal Revenue Code (the "Code"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code, and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

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

9. Subsequent Events

The Plan has evaluated subsequent events and transactions through October 13, 2017, the date the financial statements were available for issuance, and has determined that there are no material events or transactions that would require disclosure in the financial statements.

hibu Inc. 401(k) Profit Sharing Plan
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value	Cost	Current value
*	Fidelity Retirement Government Money Market Portfolio	Money Market	**	\$ 108,614
***	Prudential Stable Value Fund	Common/Collective Trust	**	19,956,252
	PIMCO Total Return Fund Institutional Class	Mutual Fund	**	12,803,920
	Vanguard Total Intl Stock AD	Mutual Fund	**	1,299,882
	Vanguard Total Stock Mkt IS	Mutual Fund	**	22,700,115
	Vanguard Equity Inc ADM	Mutual Fund	**	9,920,591
	Goldman Sachs Small Cap Value R6	Mutual Fund	**	6,185,001
*	Fidelity Diversified International Fund K	Mutual Fund	**	9,076,663
	Oppenheimer Developing Market I	Mutual Fund	**	1,323,691
*	Fidelity Contrafund K	Mutual Fund	**	28,101,528
*	Fidelity Growth Co. K	Mutual Fund	**	22,101,268
	DFA International Value I	Mutual Fund	**	1,164,024
	JPMorgan Mid Cap Value L	Mutual Fund	**	15,011,645
	Invesco International Growth Fund R6 Class	Mutual Fund	**	1,795,672
	Columbia Acorn International Y	Mutual Fund	**	347,815
	T. Rowe Price Retirement 2005 Fund	Mutual Fund	**	199,683
	T. Rowe Price Retirement 2010 Fund	Mutual Fund	**	759,777
	T. Rowe Price Retirement 2015 Fund	Mutual Fund	**	2,034,714
	T. Rowe Price Retirement 2020 Fund	Mutual Fund	**	10,340,230
	T. Rowe Price Retirement 2025 Fund	Mutual Fund	**	13,849,613
	T. Rowe Price Retirement 2030 Fund	Mutual Fund	**	13,262,881
	T. Rowe Price Retirement 2035 Fund	Mutual Fund	**	13,511,505
	T. Rowe Price Retirement 2040 Fund	Mutual Fund	**	11,516,859
	T. Rowe Price Retirement 2045 Fund	Mutual Fund	**	14,823,050
	T. Rowe Price Retirement 2050 Fund	Mutual Fund	**	8,076,167
	T. Rowe Price Retirement 2055 Fund	Mutual Fund	**	1,405,442
	T. Rowe Price Retirement 2060 Fund	Mutual Fund	**	80,003
	T. Rowe Price Retirement Balanced Fund	Mutual Fund	**	388,968
	HTFD Small Cap GR HLS IA	Mutual Fund	**	726,871
	Loomis Sayles Strategic Income	Mutual Fund	**	1,133,291
	Wellington Mid Cap	Mutual Fund	**	8,312,199
*	Notes Receivable from Participants	Loans, interest rates range from 4.00% to 11.5%, range of maturity: 2017 through 2026, collateralized by participant account balances		4,035,829
				<u>\$ 256,353,763</u>

* Denotes party-in-interest.

** Cost is not required for participant directed investments.

*** Investments are recorded at NAV, which approximates fair value.

The information in this schedule has been certified as to its completeness and accuracy by the Trustee.

hibu Inc. 401(k) Profit Sharing Plan

**Financial Statements and Supplemental Schedule
December 31, 2016 and 2015**

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Note: Other schedules required by Section 2520.103-10 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended, have been omitted because they are not applicable.	



Report of Independent Auditors

To the Administrator of hibu Inc. 401(k) Profit Sharing Plan

Report on the Financial Statements

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

Management's Responsibility for the Financial Statements

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

Basis for Disclaimer of Opinion

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



Disclaimer of Opinion

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

Other Matter

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

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

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

PriceWaterhouseCoopers LLP

October 13, 2017

hibu Inc. 401(k) Profit Sharing Plan
Statements of Net Assets Available for Benefits
December 31, 2016 and 2015

	2016	2015
Assets		
Investments, at fair value	<u>\$ 252,317,934</u>	<u>\$ 251,350,379</u>
Receivables		
Notes receivable from participants	4,035,829	4,691,632
Employer contributions receivable	1,822,535	1,645,716
Contribution receivable from participants	<u>808,166</u>	<u>464,676</u>
Total receivables	<u>6,666,530</u>	<u>6,802,024</u>
Net assets available for benefits	<u>\$ 258,984,464</u>	<u>\$ 258,152,403</u>

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

hibu Inc. 401(k) Profit Sharing Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2016

Additions

Investment income	
Net appreciation in fair value of investments	\$ 10,791,938
Interest and dividend income	6,761,619
	<u>17,553,557</u>

Contributions

Employer contributions	1,823,242
Participant contributions	12,719,714
Rollover contributions	693,234
Total contributions	<u>15,236,190</u>
Total additions	<u>32,789,747</u>

Deductions

Benefits paid to participants	31,760,749
Administrative expenses	196,937
Total deductions	<u>31,957,686</u>
Net increase	832,061

Net assets available for benefits:

Beginning of year	<u>258,152,403</u>
End of year	<u>\$ 258,984,464</u>

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

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

1. Description of the Plan

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

General

The Plan is sponsored by hibu Inc., (the "Company" or "Plan Sponsor")

The Plan provides deferred retirement and savings benefits to Plan participants based upon (a) amounts contributed to the participant's account by the employee and employer; and (b) investment income or loss. Employee contributions made to the Plan are credited to each participant's account through salary deductions. The Company's matching contribution and discretionary profit sharing contributions, if any, are paid annually to the Plan.

The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). Fidelity Management Trust Company is the Trustee of the Plan (the "Trustee").

Eligibility and Participation

Employees are eligible for participation in the Plan on the first of the month following the date in which employment commences. Employees are eligible to receive employer matching contributions either on January 1 or July 1 following their enrollment date and only if they are employed with the Company on the last day of the Plan year.

Contributions

Participants may contribute up to 60% of their annual eligible pre-tax compensation up to the Internal Revenue Service ("IRS") limit of \$18,000 for 2016. In addition, participants age 50 or over are eligible to make additional "catch-up" contributions to the Plan of up to \$6,000 pre-tax or post-tax in 2016. Annually, at its election, the Company makes a matching contribution. The matching contribution for 2016 was 25% of the first 6% of participant's eligible compensation contributed to the Plan. Contributions under the Plan are generally based on total compensation paid by the Company up to the maximum compensation limit of \$265,000 for 2016. In addition, the Company may make discretionary profit sharing contributions to the Plan on behalf of eligible participants. The Company did not make any discretionary profit sharing contributions to the Plan in 2016.

For purposes of determining contributions, compensation is defined as total wages and salary of an employee, including any overtime pay, bonuses and commissions, and excluding holiday bonus and security grants.

Administrative Expenses

Plan administrative fees may include recordkeeping, legal, accounting, trustee, and other administrative fees and expenses associated with maintaining the Plan. Plan administrative fees and expenses are deducted from participant accounts.

Vesting

Participants are immediately vested in their own contributions and earnings (losses) thereon. Participants become vested in benefits arising from the Company's discretionary matching and profit sharing contributions ratably over three years, vesting approximately 33% a year.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

Forfeitures

If a participant terminates service prior to being fully vested in the employer matching contribution or discretionary profit sharing contribution, unvested amounts are forfeited and will be used to reduce future employer contributions to the Plan. Employer matching contributions of \$142,973 were forfeited in 2016. As of December 31, 2016 and 2015, the Company had a forfeiture balance of approximately \$122,275 and \$190,852, respectively. Employer contributions were reduced by \$131,018 from forfeited nonvested accounts in 2016.

Notes Receivable from Participants

The Plan permits participants who are active employees of the Company to borrow up to 50% of their vested account balance subject to a minimum of \$1,000 and a maximum of \$50,000. The loans are collateralized by the vested balance in the participant's account and bear interest as determined by the Plan administrator based on the prevailing interest rates in the market. Loans must be repaid within a maximum of five years through payroll deductions, unless the loan is used to acquire a dwelling unit which is to be used as the participant's principal residence, in which case it may be repaid over a period not to exceed ten years. Participants in legacy 401(k) Plans which transferred into the hibu Inc. 401(k) Profit Sharing Plan when acquired by hibu Inc. are grandfathered into the provisions existing in such legacy plans and can have loans outstanding that exceed ten years. At December 31, 2016, the interest rate on loans outstanding ranged from 4.00% to 11.50%.

Payment of Benefits

The value of a participant's account, including both the employee and the vested portion of the employer contributions and the earnings thereon, is payable to the participant upon retirement, disability or to the participant's beneficiary if death occurs during employment. Additionally, the value of participant's contributions and earnings thereon plus all vested employer contributions are payable upon termination.

Hardship Withdrawal

In case of serious financial hardship, as defined by the Plan, participants may be eligible to receive an emergency withdrawal of their pre-tax contributions.

Investment Options

All participant and employer contributions are directed by the participant among the available investment options. Participants may elect to reallocate their account balances among the funds at any time during the year. There is no limit on the number of changes participants may make. Investment earnings are automatically reinvested into the fund or portfolio from which they were derived.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

2. Summary of Significant Accounting Policies

The financial statements are prepared on the accrual basis of accounting. The following is a summary of significant accounting policies:

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.

Risks and Uncertainties

The Plan provides for various investment options in any combination of money market and mutual funds. These 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 and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statement of Changes in Net Assets Available for Benefits.

A portion of the underlying assets of the mutual funds in which the Plan has invested may include derivative financial instruments. The Plan does not own any of such instruments directly. Such instruments are used primarily to hedge exposures associated with currency exchange rates, interest rates and other factors which may affect security value.

The Plan is exposed to credit loss in the event of nonperformance by the investment managers of the funds. However, the Plan does not anticipate nonperformance by the investment managers.

Valuation of Investments 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. Investment funds are valued at net asset value as reported by fund managers.

The Plan presents in the Statement of Changes in Net Assets Available for Benefits the net appreciation (depreciation) in the fair value of its investments, which consists of the realized and unrealized gains or losses on those investments. The net investment income is allocated to participants based upon their percentage of the fund balance at the beginning of the year adjusted for benefit payments made during the year and administrative expenses.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is accrued as earned, and dividend income is recorded as of the ex-dividend date.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits payments to participants are recorded upon distribution.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

Contributions Receivable

Employer contributions receivable represent amounts due to the Plan resulting from a formal commitment, legal or contractual obligation for the Plan Sponsor to make a contribution.

3. Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification 820, "Fair Value Measurement," ("ASC 820"), which defines fair value, establishes the framework and gives guidance regarding the methods used for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described below:

- | | |
|---------|---|
| Level 1 | Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access. |
| Level 2 | Inputs to the valuation methodology include. <ul style="list-style-type: none">• Quoted prices for similar assets or liabilities in active markets;• Quoted prices for identical or similar assets or liabilities in inactive markets.• Inputs other than quoted prices that are observable for the asset or liability;• Inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability. |
| Level 3 | Inputs to the valuation methodology are unobservable and significant to the fair value measurement. |

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

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

hibu Inc. 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2016 and 2015

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

	Fair Value at December 31, 2016				
	Level 1	Level 2	Level 3	NAV	Total
Mutual funds	\$232,253,068	\$ -	\$ -	\$ -	\$232,253,068
Money market funds	-	108,614	-	-	108,614
Common collective trust	-	-	-	19,956,252	19,956,252
	<u>\$232,253,068</u>	<u>\$ 108,614</u>	<u>\$ -</u>	<u>\$ 19,956,252</u>	<u>\$252,317,934</u>

	Fair Value at December 31, 2015				
	Level 1	Level 2	Level 3	NAV	Total
Mutual funds	\$234,929,064	\$ -	\$ -	\$ -	\$234,929,064
Money market funds	-	178,237	-	-	178,237
Common collective trust	-	-	-	16,243,078	16,243,078
	<u>\$234,929,064</u>	<u>\$ 178,237</u>	<u>\$ -</u>	<u>\$ 16,243,078</u>	<u>\$251,350,379</u>

It is the Plan's policy to account for asset transfers between levels at the end of the year. During 2016 there were no transfers between levels.

The following is a description of the asset types and valuation methodologies used, by level, for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2016 and 2015.

Assets valued using Level 1 inputs in the table above represent Mutual Funds, which are valued using NAV quoted on active markets. The NAV is typically determined by the fund at the close of regular trading in the active market in which the fund is traded. Investments in mutual funds generally may be redeemed daily.

Assets valued using Level 2 inputs in the table above represent Money Market Funds, which are valued using inputs other than quoted prices included in Level 1 that are observable for the asset either directly or indirectly, including inputs in markets that are not considered to be active.

Assets valued at NAV in the table above represent Common Collective Trusts, which are valued using NAV. The investments are funds formed by the pooling of investments by institutional investors, such as a group of not necessarily affiliated pension or retirement plans, typically with the intention of achieving cost savings over similar investment options, such as mutual funds. Common collective trusts are similar to mutual funds, with a named investment manager and documented investment objective. The value of the investment is measured by the fund administrator and is based on the unit value. These investments are not classified within the hierarchy as they use the NAV as a practical expedient.

hibu Inc. 401(k) Profit Sharing Plan
Notes to Financial Statements
December 31, 2016 and 2015

The following table presents additional information regarding the Money Market Funds and Common Collective Trusts.

	Fair / Contract Value	Redemption Frequency	Redemption Notice Period
Fidelity Retirement Government Money Market Portfolio (A)	\$ 108,614	Daily	None
Prudential Stable Value Fund (B)	19,956,252	Daily	None

(A) The fund seeks income commensurate with securities issued by the U.S. Government or its agencies. Other investments include repurchase agreements in respect of these U.S. Government securities. This fund is recorded on the financial statements at fair value.

(B) The fund is primarily comprised of investment contracts issued by financial companies including Guaranteed Investment Contracts (GICs), Separate Account GICs, and Security Backed Investment Contracts. This fund is recorded on the financial statements at NAV, which materially approximates fair value.

The plan held no assets at December 31, 2016 or December 31, 2015 that were valued using Level 3 inputs.

4. Information Certified by the Trustee

In accordance with 29 CFR 2520.103–5 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA, the Trustee has certified that the investment information included in the financial statements as of December 31, 2016 and 2015 and for the year ended December 31, 2016 and the related schedule of assets held at December 31, 2016 are complete and accurate.

	2016	2015
Information certified by the Trustee		
Investments, at fair value*	\$ 252,317,934	\$ 251,350,379
Notes receivable from participants	4,035,829	4,691,632

	2016
Net depreciation in fair value of investments	\$ 10,791,938
Interest and dividend income	6,577,494
Total investment gain	<u>\$ 17,369,432</u>
Interest income on notes receivable from participants	\$ 184,125

* Investments include a Common Collective Trust, which is reported at NAV; however NAV approximates fair value.

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

5. Guaranteed investment contract

The Plan has a fully benefit-responsive synthetic guaranteed investment contract with The Prudential Insurance Company of America ("Prudential"). Prudential maintains the contributions in the Prudential Stable Value Fund, a common collective trust. The fund is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

Because the guaranteed investment contract is fully benefit-responsive, NAV is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. NAV, as reported to the Plan by Prudential, represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments at NAV.

There are no reserves against NAV for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on a monthly basis for resetting.

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

The guaranteed investment contract permits the insurance company to terminate the agreement prior to the scheduled maturity date with 60 days advance notice. In the event of termination without cause by Prudential, the Plan shall retain the underlying assets in the common collective trust.

The average crediting rate yield for the guaranteed investment contract was 1.86% for the plan year ended December 31, 2016.

6. Party-In-Interest Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company ("FMTTC"), trustee of the Plan, and therefore these transactions qualify as party-in-interest. Fees paid by the Plan to Fidelity Investments Institutional Operations Company, Inc., an affiliate of FMTTC, for record keeping and advisory services were \$196,937 for the year ended December 31, 2016. Loans to participants also qualify as party-in-interest transactions.

7. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of termination, to the extent permitted by law, all participant accounts shall

hibu Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2016 and 2015

become fully vested and distributed in accordance with the provisions of the Plan. The Company also has the right to amend the Plan at any time.

8. Income Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated May 8, 2012 that the Plan is qualified and the trust established under the Plan is tax exempt, under the appropriate sections of the Internal Revenue Code (the "Code"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the Code, and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

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

9. Subsequent Events

The Plan has evaluated subsequent events and transactions through October 13, 2017, the date the financial statements were available for issuance, and has determined that there are no material events or transactions that would require disclosure in the financial statements.

hibu Inc. 401(k) Profit Sharing Plan
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest Collateral, Par or Maturity Value	Cost	Current value
*	Fidelity Retirement Government Money Market Portfolio	Money Market	**	\$ 108,614
***	Prudential Stable Value Fund	Common/Collective Trust	**	19,956,252
	PIMCO Total Return Fund Institutional Class	Mutual Fund	**	12,803,920
	Vanguard Total Intl Stock AD	Mutual Fund	**	1,299,882
	Vanguard Total Stock Mkt IS	Mutual Fund	**	22,700,115
	Vanguard Equity Inc ADM	Mutual Fund	**	9,920,591
	Goldman Sachs Small Cap Value R6	Mutual Fund	**	6,185,001
*	Fidelity Diversified International Fund K	Mutual Fund	**	9,076,663
	Oppenheimer Developing Market I	Mutual Fund	**	1,323,691
*	Fidelity Contrafund K	Mutual Fund	**	28,101,528
*	Fidelity Growth Co. K	Mutual Fund	**	22,101,268
	DFA International Value I	Mutual Fund	**	1,164,024
	JPMorgan Mid Cap Value L	Mutual Fund	**	15,011,645
	Invesco International Growth Fund R6 Class	Mutual Fund	**	1,795,672
	Columbia Acorn International Y	Mutual Fund	**	347,815
	T. Rowe Price Retirement 2005 Fund	Mutual Fund	**	199,683
	T. Rowe Price Retirement 2010 Fund	Mutual Fund	**	759,777
	T. Rowe Price Retirement 2015 Fund	Mutual Fund	**	2,034,714
	T. Rowe Price Retirement 2020 Fund	Mutual Fund	**	10,340,230
	T. Rowe Price Retirement 2025 Fund	Mutual Fund	**	13,849,613
	T. Rowe Price Retirement 2030 Fund	Mutual Fund	**	13,262,881
	T. Rowe Price Retirement 2035 Fund	Mutual Fund	**	13,511,505
	T. Rowe Price Retirement 2040 Fund	Mutual Fund	**	11,516,859
	T. Rowe Price Retirement 2045 Fund	Mutual Fund	**	14,823,050
	T. Rowe Price Retirement 2050 Fund	Mutual Fund	**	8,076,167
	T. Rowe Price Retirement 2055 Fund	Mutual Fund	**	1,405,442
	T. Rowe Price Retirement 2060 Fund	Mutual Fund	**	80,003
	T. Rowe Price Retirement Balanced Fund	Mutual Fund	**	388,968
	HTFD Small Cap GR HLS IA	Mutual Fund	**	726,871
	Loomis Sayles Strategic Income	Mutual Fund	**	1,133,291
	Wellington Mid Cap	Mutual Fund	**	8,312,199
*	Notes Receivable from Participants	Loans, interest rates range from 4.00% to 11.5%, range of maturity: 2017 through 2026, collateralized by participant account balances		4,035,829
				<u>\$ 256,353,763</u>

* Denotes party-in-interest.

** Cost is not required for participant directed investments.

*** Investments are recorded at NAV, which approximates fair value.

The information in this schedule has been certified as to its completeness and accuracy by the Trustee.