

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

Part II	Basic Plan Information —enter all requested information		
1a Name of plan	<u>SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN</u>	1b Three-digit plan number (PN) ▶	<u>010</u>
		1c Effective date of plan	<u>01/01/1986</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>GREAT AMERICAN FINANCIAL RESOURCES INC.</u>			
 <u>GREAT AMERICAN TOWER 18S</u> <u>301 E. FOURTH STREET</u> <u>CINCINNATI, OH 45202-4201</u>			
	2b Employer Identification Number (EIN)	<u>06-1356481</u>	
	2c Plan Sponsor's telephone number	<u>513-369-5000</u>	
	2d Business code (see instructions)	<u>524290</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>10/16/2017</u>	<u>MARK MUETHING</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.

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3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN
	3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 1504
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year.....	6a(1) 3
a(2) Total number of active participants at the end of the plan year	6a(2) 2
b Retired or separated participants receiving benefits.....	6b 952
c Other retired or separated participants entitled to future benefits	6c 222
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 1176
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 138
f Total. Add lines 6d and 6e	6f 1314
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h
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:
 1B 3H 1I

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

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

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

a Pension Schedules	b General Schedules
(1) ☒ R (Retirement Plan Information)	(1) ☒ H (Financial Information)
(2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) ☐ I (Financial Information – Small Plan)
(3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) ☐ 0 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 SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	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

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN</u>	B Three-digit plan number (PN) ▶ <u>010</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>GREAT AMERICAN FINANCIAL RESOURCES INC.</u>	D Employer Identification Number (EIN) <u>06-1356481</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2016</u>	
2 Assets:	
a Market value	2a <u>26710355</u>
b Actuarial value	2b <u>27170496</u>
3 Funding target/participant count breakdown	(1) Number of participants (2) Vested Funding Target (3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	<u>1152</u> <u>18541616</u> <u>18541616</u>
b For terminated vested participants.....	<u>349</u> <u>6689651</u> <u>6689651</u>
c For active participants.....	<u>3</u> <u>8977</u> <u>8977</u>
d Total.....	<u>1504</u> <u>25240244</u> <u>25240244</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>5.69 %</u>
6 Target normal cost.....	6 <u>364073</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		<u>10/10/2017</u>
	Signature of actuary	Date
<u>LIVIA W. PAYLO</u>	Type or print name of actuary	<u>17-07469</u>
<u>CONDUENT HR CONSULTING, LLC</u>	Firm name	Most recent enrollment number
<u>11 STANWIX STREET</u> <u>SUITE 700</u> <u>PITTSBURGH, PA 15222-1312</u>	Address of the firm	<u>412-281-2506</u>
		Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2016
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Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	269195	355335
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	269195	355335
10	Interest on line 9 using prior year's actual return of 2.97%	7995	10553
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.92%		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	277190	365888

Part III Funding Percentages			
14	Funding target attainment percentage	14	105.09%
15	Adjusted funding target attainment percentage	15	107.64%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	104.80%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ►			18(b)	0	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 0
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☐ Yes ☒ No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☐ Yes ☐ No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost					
21	Discount rate:					
a	Segment rates:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">1st segment: 4.43%</td> <td style="width: 33%;">2nd segment: 5.91%</td> <td style="width: 33%;">3rd segment: 6.65%</td> </tr> </table>	1st segment: 4.43%	2nd segment: 5.91%	3rd segment: 6.65%	☐ N/A, full yield curve used
1st segment: 4.43%	2nd segment: 5.91%	3rd segment: 6.65%				
b	Applicable month (enter code)	21b	4			
22	Weighted average retirement age	22	63			
23	Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute					
Part VI	Miscellaneous Items					
24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No					
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No					
26	Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No					
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.	27				
Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years					
28	Unpaid minimum required contributions for all prior years	28	0			
29	Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0			
30	Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0			
Part VIII	Minimum Required Contribution For Current Year					
31	Target normal cost and excess assets (see instructions):					
a	Target normal cost (line 6)	31a	364073			
b	Excess assets, if applicable, but not greater than line 31a	31b	364073			
32	Amortization installments:	Outstanding Balance	Installment			
a	Net shortfall amortization installment	0	0			
b	Waiver amortization installment	0	0			
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33				
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0			
		Carryover balance	Prefunding balance			
35	Balances elected for use to offset funding requirement	0	0			
36	Additional cash requirement (line 34 minus line 35)	36	0			
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0			
38	Present value of excess contributions for current year (see instructions)					
a	Total (excess, if any, of line 37 over line 36)	38a	0			
b	Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0			
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0			
40	Unpaid minimum required contributions for all years	40	0			
Part IX	Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)					
41	If an election was made to use PRA 2010 funding relief for this plan:					
a	Schedule elected	☐ 2 plus 7 years ☐ 15 years				
b	Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011				
42	Amount of acceleration adjustment	42				
43	Excess installment acceleration amount to be carried over to future plan years	43				

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 SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN	B Three-digit plan number (PN) ▶ 010
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT AMERICAN FINANCIAL RESOURCES INC.	D Employer Identification Number (EIN) 06-1356481

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

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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)

THE BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 19 21 50	NONE	102660	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

XEROX CORPORATION

16-0468020

(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?
11 50	NONE	84469	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PNC INSTITUTIONAL INVESTORS

22-1146430

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	54005	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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>SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">B Three-digit plan number (PN) ►</td> <td style="width:20%; text-align: center;"><u>010</u></td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>	B Three-digit plan number (PN) ►	<u>010</u>		
B Three-digit plan number (PN) ►	<u>010</u>				
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT AMERICAN FINANCIAL RESOURCES INC.</u>	D Employer Identification Number (EIN) <u>06-1356481</u>				

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COLLECTIVE SHORT TERM INVESTMENT</u>		
b Name of sponsor of entity listed in (a): <u>BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>13-6154008-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1410053</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>CHASE BANK INTL SHORT TERM FUND</u>		
b Name of sponsor of entity listed in (a): <u>BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>13-5160382-000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10000</u>
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)**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 G (Form 5500) Department of Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	Financial Transaction Schedules This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection.
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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 SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN	B Three-digit plan number (PN) ► 010
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT AMERICAN FINANCIAL RESOURCES INC.	D Employer Identification Number (EIN) 06-1356481

Part I	Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible Complete as many entries as needed to report all loans or fixed income obligations in default or classified as uncollectible. Check box (a) if obligor is known to be a party in interest. Attach Overdue Loan Explanation for each loan listed. See Instructions.
--------	--

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐	PSI NET INC.	11%, DUE 8/1/2009

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest
500000			492152		

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

Part II Schedule of Leases in Default or Classified as Uncollectible

Complete as many entries as needed to report all leases in default or classified as uncollectible. Check box (a) if lessor or lessee is known to be a party in interest. Attach Overdue Lease Explanation for each lease listed. (See instructions)

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization, or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price		
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

SCHEDULE H (Form 5500) Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2016 This Form is Open to Public Inspection
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For calendar plan year 2016 or fiscal plan year beginning <u>01/01/2016</u> and ending <u>12/31/2016</u>		
A Name of plan <u>SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN</u>	B Three-digit plan number (PN) ►	<u>010</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GREAT AMERICAN FINANCIAL RESOURCES INC.</u>	D Employer Identification Number (EIN) <u>06-1356481</u>	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	60031	58977
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)	46441	43879
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	2919924	1535028
(B) All other.....	1c(3)(B)	4476591	4205373
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	10387664	10982779
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	2850877	1420054
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	5968827	5124351

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	26710355	23370441

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	26710355	23370441
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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)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	-211	
(B) U.S. Government securities	2b(1)(B)	2864	
(C) Corporate debt instruments	2b(1)(C)	280716	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		283369
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	213699	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		213699
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	7894939	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	9282512	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-1387573
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	1965448	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		1965448

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		9601
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1084544

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4025315	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		4025315
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	187129	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	54090	
(4) Other	2i(4)	157924	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		399143
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4424458

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-3339914
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: CLARK, SCHAEFFER & HACKETT

(2) EIN: 31-0800053

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		429152

		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		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4012585. (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>SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN</u>	B Three-digit plan number (PN) ▶ <u>010</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GREAT AMERICAN FINANCIAL RESOURCES INC.</u>	D Employer Identification Number (EIN) <u>06-1356481</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	<u>0</u>
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>13-5160382</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	<u>64</u>

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: <u>61.0</u> % Investment-Grade Debt: <u>13.0</u> % High-Yield Debt: <u>15.0</u> % Real Estate: <u>0.0</u> % Other: <u>11.0</u> %	
	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 / / .	

SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN

Financial Statements

And

Supplemental Schedules

December 31, 2016 and 2015

With Independent Auditors' Report



CLARK SCHAEFER HACKETT
CPAs & ADVISORS

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INDEPENDENT AUDITORS' REPORT

To the Participants and Trustees of
Sprague Electric Company Retirement Income Guarantee Plan:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Sprague Electric Company Retirement Income Guarantee Plan, which comprise the statements of net assets available for benefits and accumulated plan benefits as of December 31, 2016 and 2015, and the related statement of changes in net assets available for benefits and changes in accumulated plan benefits for the year ended December 31, 2016, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

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 The Bank of New York Mellon, N.A., 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 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 these financial statements.

Other Matter

The supplemental schedules as of or for the year ended December 31, 2016, as listed in the table of contents, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are 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 these supplemental schedules.

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

Clark, Schaefer, Hackett & Co.

Cincinnati, Ohio
October 10, 2017

Sprague Electric Company
Retirement Income Guarantee Plan
Statements of Net Assets Available for Benefits
and Accumulated Plan Benefits
December 31, 2016 and 2015

	<u>2016</u>	<u>2015</u>
Net Assets Available for Benefits		
Investments, at fair value:		
Fixed income securities	\$ 5,784,280	7,442,956
Equity securities	10,982,779	10,387,664
Coal leases	5,124,351	5,968,827
Common/collective trust funds	<u>1,420,054</u>	<u>2,850,877</u>
	<u>23,311,464</u>	<u>26,650,324</u>
Receivables:		
Accrued income	<u>58,977</u>	<u>60,031</u>
Net assets available for benefits	\$ <u>23,370,441</u>	<u>26,710,355</u>
Accumulated Plan Benefits		
Actuarial present value of accumulated plan benefits:		
Participants currently receiving benefits	\$ 16,716,324	18,431,716
Terminated vested participants	5,071,850	6,481,109
Other participants	<u>-</u>	<u>8,584</u>
Actuarial present value of accumulated plan benefits	\$ <u>21,788,174</u>	<u>24,921,409</u>

See accompanying notes to the financial statements.

Sprague Electric Company
Retirement Income Guarantee Plan
Statement of Changes in Net Assets Available for Benefits
and Changes in Accumulated Plan Benefits
Year Ended December 31, 2016

Changes in Net Assets Available for Benefits

Additions:

Interest and dividend income	\$ 506,669
Net appreciation in fair value of investments	<u>577,875</u>

Total additions	<u>1,084,544</u>
-----------------	------------------

Deductions:

Benefits paid to participants	4,025,315
Pension Benefit Guaranty Corporation premiums	157,924
Administrative expenses	<u>241,219</u>

Total deductions	<u>4,424,458</u>
------------------	------------------

Net decrease	(3,339,914)
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Net assets available for benefits:

Beginning of year	<u>26,710,355</u>
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End of year	\$ <u>23,370,441</u>
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Changes in Accumulated Plan Benefits

Increase (decrease) during the year attributable to:

Interest	\$ 1,605,995
Benefits paid to participants	(4,025,315)
Change in actuarial assumptions	(462,550)
Actuarial change	<u>(251,365)</u>

Net decrease	(3,133,235)
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Actuarial present value of accumulated plan benefits:

Beginning of year	<u>24,921,409</u>
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End of year	\$ <u>21,788,174</u>
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See accompanying notes to the financial statements.

1. DESCRIPTION OF PLAN:

The following brief description of the Sprague Electric Company Retirement Income Guarantee Plan (the "Plan") is provided for general informational purposes only. Participants should refer to the Plan documents for more complete information.

General

The Plan is a noncontributory defined benefit plan. Sprague Electric Company has no active employees. All participants of the Plan are fully vested. Former participants in the Retirement Plan for Salaried Employees of American Empire Insurance Company ("AEIC") and the American Premier Underwriters, Inc. ("APU") Retirement Income Guarantee Plan are part of this Plan. The original sponsors of these plans became subsidiaries of American Financial Group, Inc., which is the parent of Great American Financial Resources, Inc. ("GAFRI"). GAFRI (the "Company") is the current sponsor of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Funding policy

The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. During 2016, the Company was not required to, and did not, make any contributions. The Company has met the minimum funding requirements of ERISA.

Benefits

Benefits are primarily paid in the form of monthly payments based on defined formulas after the participant reaches normal retirement date. Participants may also elect to receive a lump sum distribution at normal retirement date.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of accounting

The financial statements of the Plan are prepared under the accrual method of accounting.

Use of estimates

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

Payment of benefits

Benefit payments to participants are recorded upon distribution.

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. See further discussion of fair value in Note 3.

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

Administrative expenses

All expenses for the administration of the Plan may be paid out of the trust fund unless paid by the sponsor. Expenses that are paid directly by the sponsor are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statement of changes in net assets available for benefits and changes in accumulated plan benefits. In addition, certain investment related expenses are included in net appreciation in fair value of investments presented in the accompanying statement of changes in net assets available for benefits and changes in accumulated plan benefits.

Actuarial present value of accumulated plan benefits

Accumulated plan benefits are those future periodic payments, including lump sum distributions that are attributable under the Plan's provisions to the service that employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances—retirement, death, disability, and termination of employment—are included, to the extent they are deemed attributable to employee service rendered to the valuation date. The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuations as of December 31, 2016 and 2015 were (a) life expectancy of participants (using the RP-2014 Mortality Table), (b) retirement age assumptions (the assumed average retirement age was 65), and (c) investment return. The interest rates used to discount the obligation for 2016 and 2015 was 7.0%. The mortality table used in the valuation as of December 31, 2016 was updated by using a Mortality Improvement Scale MP-2016.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2017 and 2016. Had the valuations been performed as of December 31, there would have been no material differences.

Accounting changes

Recently issued accounting pronouncements—The Financial Accounting Standards Board issued ASU 2015-07, "Disclosures for Investments in Certain Entities that Calculate Net Asset Value Per Share (or Its Equivalent)." ASU 2015-07 simplifies disclosures and reporting on investments valued at net asset value as a practical expedient. ASU 2015-07 is effective for fiscal years beginning after December 15, 2016, with earlier adoption permitted. The Plan has elected to early adopt ASU 2015-07, applied retrospectively to all periods presented. This change has no impact on net assets available for benefits.

Reclassifications

Certain amounts in the 2015 financial statements have been reclassified to conform to the 2016 presentation.

Subsequent events

The Plan evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements consider events through October 10, 2017, the date on which the financial statements were available to be issued.

3. FAIR VALUE MEASUREMENTS:

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy 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: 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 or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

Equity securities and fixed income securities: Valued at the quoted net asset value ("NAV") of shares held by the Plan at December 31, 2016.

Coal leases: Valued at estimated fair value by calculating the discounted cash flows, using a 6% discount rate, anticipated to be received throughout the remaining holding period of the investment.

Common/collective trust funds: The common/collective trust funds are public investment vehicles valued using a NAV provided by the administrator of the funds as a practical expedient to estimate fair value. The NAV is based on the underlying net assets owned by the fund, divided by the number of shares outstanding. The NAV's unit price is quoted on a private market that is not active. However, the NAV is based on the fair value of the underlying securities within the fund, which are traded on an active market, and valued at the closing price reported on the active

market on which those individual securities are traded.

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

Investments at fair value as of December 31, 2016

	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Fixed income securities	\$ 5,784,280	5,784,280	-	-
Equity Securities	10,982,779	10,982,779	-	-
Coal leases	<u>5,124,351</u>	<u>-</u>	<u>-</u>	<u>5,124,351</u>
Investments in the fair value hierarchy	\$ <u>21,891,410</u>	<u>16,767,059</u>	<u>-</u>	<u>5,124,351</u>
Common/collective trusts at NAV	\$ <u>1,420,054</u>			
Total investments at fair value	\$ <u>23,311,464</u>			

Investments at fair value as of December 31, 2015

	<u>Total</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>
Fixed income securities	\$ 7,442,956	7,442,956	-	-
Equity Securities	10,387,664	10,387,664	-	-
Coal leases	<u>5,968,827</u>	<u>-</u>	<u>-</u>	<u>5,968,827</u>
Investments in the fair value hierarchy	\$ <u>23,799,447</u>	<u>17,830,620</u>	<u>-</u>	<u>5,968,827</u>
Common/collective trusts at NAV	\$ <u>2,850,877</u>			
Total investments at fair value	\$ <u>26,650,324</u>			

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

	<u>Coal Leases</u>
Beginning balance	\$ 5,968,827
Realized/unrealized loss on investments held at year end	89,831
Settlements	<u>(934,307)</u>
Ending balance	\$ <u>5,124,351</u>

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

<u>Instrument</u>	<u>Fair Value</u>	<u>Principal Valuation Technique</u>	<u>Unobservable Inputs</u>	<u>Range of Significant Input Values</u>
Coal leases	\$5,124,351	Discounted cash flow	Producer Price Index for all Industrial Commodities	186.1
			Discount rate	6%

The following table summarizes investments for which fair value is measured using NAV per share as a practical expedient as of December 31, 2016 and 2015, respectively.

<u>December 31, 2016</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trust funds	\$1,420,054	n/a	Daily	None

<u>December 31, 2015</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trust funds	\$2,850,877	n/a	Daily	None

4. INFORMATION CERTIFIED BY PLAN'S TRUSTEE:

All financial data related to investments used in the preparation of the statements of net assets available for benefits, statements of changes in net assets available for benefits and the supplemental schedules have been certified as to accuracy and completeness by the Plan's trustee, The Bank of New York Mellon, N.A, as of December 31, 2016 and 2015, and for the year ended December 31, 2016.

5. TAX STATUS:

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated May 22, 2012, that the Plan and related trust, as then designed, were in compliance with applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Accordingly the Plan is exempt from income tax.

6. RELATED PARTY TRANSACTIONS:

Plan administrative expenses, including fees and expenses connected with administrative services provided by external service providers, are paid from Plan assets. Fees paid for legal, accounting, and other services rendered by parties-in-interest were based upon customary and reasonable rates for such services.

Certain Plan investments are in common/collective trust funds managed by The Bank of New York Mellon, N.A., the trustee, as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions. In 2016, \$102,746 was directly charged to the Plan by The Bank of New York Mellon, N.A. for administrative expenses. Also, certain Plan investments are in coal leases and fixed income securities managed by GAFRI. GAFRI is the sponsor of the Plan and, therefore, these transactions qualify as party-in-interest transactions.

7. RISKS AND UNCERTAINTIES:

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

The actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

8. PLAN TERMINATION:

Although the Company has not expressed any intention to do so, it has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event the Plan terminates, the net assets of the Plan will be allocated for payment in order of priority determined in accordance with ERISA, applicable regulations there under, and the Plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (PBGC) if the Plan terminates. Generally, the PBGC guarantees most vested normal retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan # 010
Schedule of Reportable Transactions
Year Ended December 31, 2016

(a) Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current value of Asset	(i) Gain or (Loss)
Category (iii) - a series of transactions in the same security in excess of 5%						
Bank of New York Mellon	BNY MELLON CASH RESERVE					
	0.010% 12/31/2049 DD 06/26/97					
	Purchases	1,819,727	-	1,819,727	1,819,727	-
	Sales	-	1,819,727	1,819,727	1,819,727	-
Bank of New York Mellon	BNY COMMON/COLLECTIVE TRUST					
	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20					
	Purchases	4,441,278	-	4,441,278	4,441,278	-
	Sales	-	5,872,101	5,872,101	5,872,101	-

Note: Column (e) and Column (f) are not applicable

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan # 010
Schedule of Obligations in Default
Year Ended December 31, 2016

(a) Party Involved	(b) Address of Obligor	(c) Original Amount	(f) Unpaid Balance	(g) Detail Description of bond
Market	PSINet Inc.	\$ 500,000	\$ 500,000	11%, due 8/1/2009

Note: The market value of the bonds are properly reflected on the Plan financial statements. It is management's intention to hold on to the investments for the foreseeable future to attempt to realize more value on the investment.



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
U. S. GOVERNMENT SECURITIES					
B13F84228602	36210VK42 GNMA POOL #0503515 7.000% 03/15/2029 DD 03/01/99	39,965.423	39,166.08	43,879.24	4,713.16
<u>TOTAL U. S. GOVERNMENT SECURITIES</u>			<u>39,166.08</u>	<u>43,879.24</u>	<u>4,713.16</u>
CORPORATE DEBT INSTRUMENTS - PREFERRED					
B13F84228602	032165AD4 AMSOUTH BANCORP 6.750% 11/01/2025 DD 11/06/95	1,000,000.000	998,100.00	1,147,830.00	149,730.00
B13F84228602	07330TAA0 BCRR TRUST 2009-2 2A 1A1 144A 6.500% 07/17/2040 DD 07/11/09	387,492.635	356,568.90	387,198.14	30,629.24
<u>TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED</u>			<u>1,354,668.90</u>	<u>1,535,028.14</u>	<u>180,359.24</u>
CORPORATE DEBT INSTRUMENTS					
B13F84228602	084423AC6 WR BERKLEY CORP 8.700% 01/01/2022 DD 01/01/92	380,000.000	361,000.00	462,699.40	101,699.40
B13F84228602	25157FAK0 DEUTSCHE MORTGAGE WF1 1A4 144A VAR RT 06/26/2035 DD 08/01/05	1,612,000.000	891,225.00	1,552,807.36	661,582.36
B13F84228602	46632TAA3 JP MORGAN MORTGAGE R2 1A1 144A VAR RT 07/27/2037 DD 07/01/08	1,841,540.918	1,143,151.67	1,717,697.29	574,545.62
B13F84228602	69363VAB3 PSINET INC 11.000% 08/01/2009 DD 07/23/99	429,152.100	446,250.00	0.00	-446,250.00
B13F84228602	75970NAL1 RENAISSANCE HOME EQUITY 2 AF4 VAR RT 08/25/2035 DD 06/01/05	255,000.000	178,500.00	255,938.40	77,438.40
B13F84228602	86359AMH3 STRUCTURED ASSET S AL1 B1 144A 3.357% 04/25/2031 DD 01/01/03	236,459.803	164,930.66	216,230.67	51,300.01
<u>TOTAL CORPORATE DEBT INSTRUMENTS</u>			<u>3,185,057.33</u>	<u>4,205,373.12</u>	<u>1,020,315.79</u>
CORPORATE STOCK - COMMON					
B13F84228602	060505104 BANK OF AMERICA CORP	10,000.000	483,334.00	221,000.00	-262,334.00
B13F84228602	124857202 CBS CORP	4,261.000	117,977.89	271,084.82	153,106.93
B13F84228602	172967424 CITIGROUP INC	4,000.000	1,796,675.00	237,720.00	-1,558,955.00
B13F84228602	20030N101 COMCAST CORP	5,000.000	91,990.67	345,250.00	253,259.33
B13F84228602	313400301 FEDERAL HOME LOAN MORTGAGE COR	10,000.000	567,702.00	37,400.00	-530,302.00
B13F84228602	320517105 FIRST HORIZON NATIONAL CORP	428.000	13,081.87	8,564.28	-4,517.59
B13F84228602	369604103 GENERAL ELECTRIC CO	20,000.000	662,162.00	632,000.00	-30,162.00
B13F84228602	69007J106 OUTFRONT MEDIA INC	1,796.000	25,601.96	44,666.52	19,064.56
B13F84228602	707991105 PENN CENTRAL COAL LEASE	2,805,728.550	2,805,728.55	2,805,728.55	0.00
B13F84228602	849991104 SPRAGUE TECH COAL LEASE	2,318,622.900	2,318,622.90	2,318,622.90	0.00
B13F84228602	85207U105 SPRINT CORP	2,617.000	139,899.84	22,035.14	-117,864.70
B13F84228602	999F69740 HARRIS CIF SPL CAP LIQ	122.030	122.03	122.03	0.00
B13F84228602	999F69757 HARRIS CIF CONV LIQUIDATING	250.480	250.48	250.48	0.00
B13F84228902	002824100 ABBOTT LABORATORIES	1,250.000	52,222.68	48,012.50	-4,210.18
B13F84228902	02079K305 ALPHABET INC-CL A	270.000	145,034.90	213,961.50	68,926.60
B13F84228902	02209S103 ALTRIA GROUP INC	770.000	28,239.84	52,067.40	23,827.56
B13F84228902	031162100 AMGEN INC	710.000	97,701.68	103,809.10	6,107.42
B13F84228902	037833100 APPLE INC	2,243.000	119,530.35	259,784.26	140,253.91
B13F84228902	038222105 APPLIED MATERIALS INC	2,470.000	67,379.34	79,706.90	12,327.56
B13F84228902	042735100 ARROW ELECTRONICS INC	880.000	47,153.04	62,744.00	15,590.96
B13F84228902	08579W103 BERRY GLOBAL GROUP INC	1,860.000	80,962.43	90,637.80	9,675.37
B13F84228902	09062X103 BIOGEN INC	360.000	101,858.97	102,088.80	229.83
B13F84228902	122017106 BURLINGTON STORES INC	1,270.000	76,702.57	107,632.50	30,929.93



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228902	12514G108 CDW CORP/DE	1,610.000	52,245.15	83,864.90	31,619.75
B13F84228902	142339100 CARLISLE COS INC	580.000	54,538.20	63,968.20	9,430.00
B13F84228902	143658300 CARNIVAL CORP	1,310.000	67,402.53	68,198.60	796.07
B13F84228902	151020104 CELGENE CORP	470.000	58,176.55	54,402.50	-3,774.05
B13F84228902	16119P108 CHARTER COMMUNICATIONS INC	310.000	83,064.28	89,255.20	6,190.92
B13F84228902	172908105 CINTAS CORP	520.000	41,277.60	60,091.20	18,813.60
B13F84228902	20030N101 COMCAST CORP	1,830.000	87,564.87	126,361.50	38,796.63
B13F84228902	21036P108 CONSTELLATION BRANDS INC	440.000	36,292.33	67,456.40	31,164.07
B13F84228902	253393102 DICK'S SPORTING GOODS INC	1,290.000	78,695.68	68,499.00	-10,196.68
B13F84228902	254687106 WALT DISNEY CO/THE	580.000	39,351.34	60,447.60	21,096.26
B13F84228902	25754A201 DOMINO'S PIZZA INC	400.000	66,664.44	63,696.00	-2,968.44
B13F84228902	260543103 DOW CHEMICAL CO/THE	1,430.000	72,146.78	81,824.60	9,677.82
B13F84228902	26138E109 DR PEPPER SNAPPLE GROUP INC	550.000	37,023.05	49,868.50	12,845.45
B13F84228902	28176E108 EDWARDS LIFESCIENCES CORP	640.000	29,509.38	59,968.00	30,458.62
B13F84228902	294429105 EQUIFAX INC	480.000	48,882.62	56,750.40	7,867.78
B13F84228902	30303M102 FACEBOOK INC	1,530.000	172,560.42	176,026.50	3,466.08
B13F84228902	369550108 GENERAL DYNAMICS CORP	500.000	70,305.86	86,330.00	16,024.14
B13F84228902	436440101 HOLOGIC INC	1,350.000	53,793.86	54,162.00	368.14
B13F84228902	437076102 HOME DEPOT INC/THE	1,070.000	76,142.12	143,465.60	67,323.48
B13F84228902	438516106 HONEYWELL INTERNATIONAL INC	610.000	71,613.86	70,668.50	-945.36
B13F84228902	452308109 ILLINOIS TOOL WORKS INC	480.000	50,597.71	58,780.80	8,183.09
B13F84228902	458140100 INTEL CORP	2,140.000	68,296.76	77,617.80	9,321.04
B13F84228902	459506101 INTERNATIONAL FLAVORS & FRAGRA	400.000	52,191.48	47,132.00	-5,059.48
B13F84228902	478160104 JOHNSON & JOHNSON	500.000	44,428.64	57,605.00	13,176.36
B13F84228902	500754106 KRAFT HEINZ CO/THE	900.000	79,106.67	78,588.00	-518.67
B13F84228902	512807108 LAM RESEARCH CORP	990.000	77,822.22	104,672.70	26,850.48
B13F84228902	539830109 LOCKHEED MARTIN CORP	290.000	41,003.62	72,482.60	31,478.98
B13F84228902	552953101 MGM RESORTS INTERNATIONAL	2,480.000	71,154.98	71,498.40	343.42
B13F84228902	57636Q104 MASTERCARD INC	500.000	51,840.85	51,625.00	-215.85
B13F84228902	594918104 MICROSOFT CORP	3,110.000	152,276.03	193,255.40	40,979.37
B13F84228902	608190104 MOHAWK INDUSTRIES INC	400.000	82,303.28	79,872.00	-2,431.28
B13F84228902	617446448 MORGAN STANLEY	1,680.000	53,724.55	70,980.00	17,255.45
B13F84228902	654106103 NIKE INC	910.000	51,661.69	46,255.30	-5,406.39
B13F84228902	666807102 NORTHROP GRUMMAN CORP	320.000	54,310.18	74,425.60	20,115.42
B13F84228902	67103H107 O'REILLY AUTOMOTIVE INC	340.000	79,973.93	94,659.40	14,685.47
B13F84228902	713448108 PEPSICO INC	1,310.000	129,801.53	137,065.30	7,263.77
B13F84228902	717081103 PFIZER INC	1,600.000	52,010.43	51,968.00	-42.43
B13F84228902	72348P104 PINNACLE FOODS INC	1,320.000	67,446.32	70,554.00	3,107.68
B13F84228902	74340W103 PROLOGIS INC	990.000	54,027.07	52,262.10	-1,764.97
B13F84228902	74876Y101 QUINTILES IMS HOLDINGS INC	790.000	53,926.80	60,079.50	6,152.70
B13F84228902	755111507 RAYTHEON CO	500.000	60,038.98	71,000.00	10,961.02
B13F84228902	78409V104 S&P GLOBAL INC	660.000	80,632.27	70,976.40	-9,655.87



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228902	811065101	SCRIPPS NETWORKS INTERACTIVE I	1,180.000	76,576.45	84,216.60	7,640.15
B13F84228902	882508104	TEXAS INSTRUMENTS INC	1,210.000	73,481.68	88,293.70	14,812.02
B13F84228902	883556102	THERMO FISHER SCIENTIFIC INC	620.000	82,322.33	87,482.00	5,159.67
B13F84228902	902494103	TYSON FOODS INC	1,110.000	76,789.24	68,464.80	-8,324.44
B13F84228902	91324P102	UNITEDHEALTH GROUP INC	610.000	86,777.93	97,624.40	10,846.47
B13F84228902	91879Q109	VAIL RESORTS INC	490.000	77,886.99	79,041.90	1,154.91
B13F84228902	92210H105	VANTIV INC	890.000	49,404.17	53,061.80	3,657.63
B13F84228902	929160109	VULCAN MATERIALS CO	420.000	52,074.79	52,563.00	488.21
B13F84228902	G02602103	AMDOCS LTD	1,280.000	69,920.05	74,560.00	4,639.95
B13F84228902	G1151C101	ACCENTURE PLC	670.000	66,546.28	78,477.10	11,930.82
B13F84228902	G47791101	INGERSOLL-RAND PLC	1,140.000	74,905.30	85,545.60	10,640.30
B13F84229002	00206R102	AT&T INC	1,500.000	52,198.05	63,795.00	11,596.95
B13F84229002	002824100	ABBOTT LABORATORIES	1,350.000	53,804.09	51,853.50	-1,950.59
B13F84229002	025537101	AMERICAN ELECTRIC POWER CO INC	580.000	34,516.83	36,516.80	1,999.97
B13F84229002	030420103	AMERICAN WATER WORKS CO INC	870.000	47,735.60	62,953.20	15,217.60
B13F84229002	055622104	BP PLC ADR	1,100.000	36,734.50	41,118.00	4,383.50
B13F84229002	060505104	BANK OF AMERICA CORP	6,100.000	130,918.58	134,810.00	3,891.42
B13F84229002	064058100	BANK OF NEW YORK MELLON CORP/T	1,340.000	55,345.22	63,489.20	8,143.98
B13F84229002	08579W103	BERRY GLOBAL GROUP INC	890.000	38,422.60	43,369.70	4,947.10
B13F84229002	12514G108	CDW CORP/DE	1,090.000	34,769.77	56,778.10	22,008.33
B13F84229002	142339100	CARLISLE COS INC	380.000	35,731.72	41,910.20	6,178.48
B13F84229002	143658300	CARNIVAL CORP	1,050.000	54,247.04	54,663.00	415.96
B13F84229002	166764100	CHEVRON CORP	653.000	60,866.99	76,858.10	15,991.11
B13F84229002	172062101	CINCINNATI FINANCIAL CORP	650.000	42,374.71	49,237.50	6,862.79
B13F84229002	17275R102	CISCO SYSTEMS INC	1,368.000	25,676.55	41,340.96	15,664.41
B13F84229002	174610105	CITIZENS FINANCIAL GROUP INC	2,060.000	52,386.17	73,397.80	21,011.63
B13F84229002	20030N101	COMCAST CORP	720.000	37,160.97	49,716.00	12,555.03
B13F84229002	21036P108	CONSTELLATION BRANDS INC	270.000	24,377.14	41,393.70	17,016.56
B13F84229002	233331107	DTE ENERGY CO	400.000	38,609.08	39,404.00	794.92
B13F84229002	25179M103	DEVON ENERGY CORP	1,370.000	59,008.75	62,567.90	3,559.15
B13F84229002	25278X109	DIAMONDBACK ENERGY INC	390.000	38,048.48	39,413.40	1,364.92
B13F84229002	254709108	DISCOVER FINANCIAL SERVICES	1,040.000	57,667.38	74,973.60	17,306.22
B13F84229002	260543103	DOW CHEMICAL CO/THE	860.000	43,025.96	49,209.20	6,183.24
B13F84229002	294429105	EQUIFAX INC	380.000	38,057.25	44,927.40	6,870.15
B13F84229002	30231G102	EXXON MOBIL CORP	745.000	66,853.25	67,243.70	390.45
B13F84229002	369550108	GENERAL DYNAMICS CORP	270.000	37,953.17	46,618.20	8,665.03
B13F84229002	369604103	GENERAL ELECTRIC CO	1,230.000	33,952.17	38,868.00	4,915.83
B13F84229002	437076102	HOME DEPOT INC/THE	270.000	36,157.02	36,201.60	44.58
B13F84229002	438516106	HONEYWELL INTERNATIONAL INC	300.000	30,883.40	34,755.00	3,871.60
B13F84229002	452308109	ILLINOIS TOOL WORKS INC	350.000	36,840.08	42,861.00	6,020.92
B13F84229002	457187102	INGREDION INC	340.000	45,771.38	42,486.40	-3,284.98
B13F84229002	458140100	INTEL CORP	2,870.000	98,147.97	104,094.90	5,946.93



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84229002	46625H100	JPMORGAN CHASE & CO	2,250.000	131,345.44	194,152.50	62,807.06
B13F84229002	478160104	JOHNSON & JOHNSON	1,119.000	98,664.74	128,919.99	30,255.25
B13F84229002	493267108	KEYCORP	2,500.000	39,450.00	45,675.00	6,225.00
B13F84229002	500754106	KRAFT HEINZ CO/THE	770.000	68,990.17	67,236.40	-1,753.77
B13F84229002	512807108	LAM RESEARCH CORP	500.000	34,775.85	52,865.00	18,089.15
B13F84229002	571748102	MARSH & MCLENNAN COS INC	840.000	54,203.96	56,775.60	2,571.64
B13F84229002	58933Y105	MERCK & CO INC	810.000	48,450.84	47,684.70	-766.14
B13F84229002	617446448	MORGAN STANLEY	1,800.000	59,526.18	76,050.00	16,523.82
B13F84229002	665859104	NORTHERN TRUST CORP	1,020.000	71,418.70	90,831.00	19,412.30
B13F84229002	666807102	NORTHROP GRUMMAN CORP	290.000	45,634.51	67,448.20	21,813.69
B13F84229002	713448108	PEPSICO INC	500.000	51,681.19	52,315.00	633.81
B13F84229002	717081103	PFIZER INC	2,836.000	81,492.36	92,113.28	10,620.92
B13F84229002	74340W103	PROLOGIS INC	1,040.000	55,536.19	54,901.60	-634.59
B13F84229002	755111507	RAYTHEON CO	430.000	53,326.71	61,060.00	7,733.29
B13F84229002	78409V104	S&P GLOBAL INC	470.000	51,518.74	50,543.80	-974.94
B13F84229002	806857108	SCHLUMBERGER LTD	1,080.000	94,666.39	90,666.00	-4,000.39
B13F84229002	811065101	SCRIPPS NETWORKS INTERACTIVE I	560.000	36,845.93	39,967.20	3,121.27
B13F84229002	828806109	SIMON PROPERTY GROUP INC	190.000	34,468.99	33,757.30	-711.69
B13F84229002	84763R101	SPECTRUM BRANDS HOLDINGS INC	470.000	54,963.09	57,495.10	2,532.01
B13F84229002	857477103	STATE STREET CORP	820.000	57,073.90	63,730.40	6,656.50
B13F84229002	867914103	SUNTRUST BANKS INC	1,270.000	53,917.85	69,659.50	15,741.65
B13F84229002	882508104	TEXAS INSTRUMENTS INC	630.000	35,655.10	45,971.10	10,316.00
B13F84229002	883556102	THERMO FISHER SCIENTIFIC INC	330.000	50,660.83	46,563.00	-4,097.83
B13F84229002	887317303	TIME WARNER INC	490.000	38,105.78	47,299.70	9,193.92
B13F84229002	89151E109	TOTAL SAADR	1,490.000	69,593.21	75,945.30	6,352.09
B13F84229002	89353D107	TRANSCANADA CORP	810.000	38,440.41	36,571.50	-1,868.91
B13F84229002	902494103	TYSON FOODS INC	680.000	45,763.70	41,942.40	-3,821.30
B13F84229002	91324P102	UNITEDHEALTH GROUP INC	250.000	37,878.88	40,010.00	2,131.12
B13F84229002	91913Y100	VALERO ENERGY CORP	600.000	37,834.98	40,992.00	3,157.02
B13F84229002	92343V104	VERIZON COMMUNICATIONS INC	890.000	44,502.30	47,508.20	3,005.90
B13F84229002	929160109	VULCAN MATERIALS CO	310.000	38,076.59	38,796.50	719.91
B13F84229002	92939U106	WEC ENERGY GROUP INC	600.000	24,889.68	35,190.00	10,300.32
B13F84229002	949746101	WELLS FARGO & CO	987.000	38,898.11	54,393.57	15,495.46
B13F84229002	98389B100	XCEL ENERGY INC	920.000	32,581.26	37,444.00	4,862.74
B13F84229002	G02602103	AMDOCS LTD	690.000	37,691.40	40,192.50	2,501.10
B13F84229002	G1151C101	ACCENTURE PLC	320.000	36,360.29	37,481.60	1,121.31
B13F84229002	G47791101	INGERSOLL-RAND PLC	630.000	40,598.96	47,275.20	6,676.24
TOTAL CORPORATE STOCK - COMMON				16,836,172.19	16,107,130.08	-729,042.11

COMMON/COLLECTIVE TRUST

* B13F84228502	996214912	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	0.020	0.02	0.02	0.00
* B13F84228602	996214912	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	1,212,607.940	1,212,607.94	1,212,607.94	0.00



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228602	999F69716 CHASE BANK INTL SHORT TERM FUND	10,000.000	10,000.00	10,000.00	0.00
* B13F84228902	996214912 EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	103,421.920	103,421.92	103,421.92	0.00
* B13F84229002	996214912 EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	94,023.550	94,023.55	94,023.55	0.00
TOTAL COMMON/COLLECTIVE TRUST			1,420,053.43	1,420,053.43	0.00
GRAND TOTAL			22,835,117.93	23,311,464.01	476,346.08

* Indicates party-in-interest to the Plan



Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB, Line 26 - Schedule of Active Participant Data

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25										
25 to 29										
30 to 34										
35 to 39										
40 to 44										
45 to 49										
50 to 54										
55 to 59								1		
60 to 64								1	1	
65 to 69										
70 & up										

Note: Average compensation is not shown since the plan has less than 1,000 active participants.

Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Prescribed Funding Assumptions and Methods

The following assumptions and methods are prescribed by ERISA.

Funding interest rates

Segment Rates with four-month lookback, constrained in accordance with relevant legislation as follows:

	Unconstrained Rates*	Rates Reflecting Corridor**
First Segment Rate	1.34%	4.43%
Second Segment Rate	4.03%	5.91%
Third Segment Rate	5.06%	6.65%
	Effective Interest Rate:	
	Based on constrained rates	5.69%

* Used for maximum tax-deduction purposes

** Used for minimum funding and benefit restriction purposes

Mortality

Mortality tables mandated by PPA as specified in IRS Regulation 1.430(h)(3)-1, applied on a static basis, projected 7 years from the valuation date for annuitants and 15 years for non-annuitants.

Actuarial cost method

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan expenses to be paid from plan assets during the year.

Non-Prescribed Funding Assumptions and Methods

The following assumptions were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor and is an acceptable method under PPA. Since the plan's experience is too small to form the basis of reliable assumptions, the assumptions were based on actuarial judgement and observed experience of similarly situated employment groups.

Expenses

Expected plan expenses of \$364,073 were added to the Target Normal Cost.

Retirement age

Active and deferred vested participants are assumed to commence receiving benefits at age 65. Immediate commencement of benefits is assumed for active and deferred vested participants past age 65.

Frequency of optional payment forms

Sprague RIGP participants are assumed to elect a 5-year certain & life annuity and APU RIGP participants are assumed to elect a life annuity.

Withdrawal rates

None assumed.

Asset valuation method

The Actuarial Value of Assets is determined using a method that spreads asset gains/(losses) over two years. The gain/(loss) for each period is determined as the actual return during the period less the expected return based on an assumed earnings rate chosen by the actuary but required by PPA to be not greater than the applicable third segment rate. The resulting value is constrained to be within a corridor of 90% to 110% of market value. The discounted value of accrued contributions, if any, is included in the Actuarial Value of Assets.

	Actuary's Assumption	Third Segment Rate	Reflecting PPA Limit
2016 Expected Return	7.00%	6.65%	6.65%
2015 Expected Return	7.00%	6.81%	6.81%
2014 Expected Return	7.00%	6.99%	6.99%

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this assignment.

Summary of Changes from the January 1, 2015 Valuation

- The interest rates and mortality tables were updated to those applicable to the current plan year in accordance with relevant legislation. The assumption changes relating to interest rates and mortality tables increased the Funding Target by approximately \$0.3 million.
- The expense component of Target Normal Cost was changed from \$296,997 to \$364,073 based on actual plan experience.

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan # 010
Schedule of Reportable Transactions
Year Ended December 31, 2016

(a) Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current value of Asset	(i) Gain or (Loss)
Category (iii) - a series of transactions in the same security in excess of 5%						
Bank of New York Mellon	BNY MELLON CASH RESERVE					
	0.010% 12/31/2049 DD 06/26/97					
	Purchases	1,819,727	-	1,819,727	1,819,727	-
	Sales	-	1,819,727	1,819,727	1,819,727	-
Bank of New York Mellon	BNY COMMON/COLLECTIVE TRUST					
	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20					
	Purchases	4,441,278	-	4,441,278	4,441,278	-
	Sales	-	5,872,101	5,872,101	5,872,101	-

Note: Column (e) and Column (f) are not applicable

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	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

► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan SPRAGUE ELECTRIC COMPANY RETIREMENT INCOME GUARANTEE PLAN	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">B Three-digit plan number (PN) ►</td> <td style="width: 30%; text-align: center;">010</td> </tr> </table>	B Three-digit plan number (PN) ►	010
B Three-digit plan number (PN) ►	010		
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF GREAT AMERICAN FINANCIAL RESOURCES INC.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>D Employer Identification Number (EIN) 06-1356481</td> </tr> </table>	D Employer Identification Number (EIN) 06-1356481	
D Employer Identification Number (EIN) 06-1356481			
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B			
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500			

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2016</u>			
2 Assets:			
a Market value.....	2a	26,710,355	
b Actuarial value.....	2b	27,170,496	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	1,152	18,541,616	18,541,616
b For terminated vested participants	349	6,689,651	6,689,651
c For active participants	3	8,977	8,977
d Total	1,504	25,240,244	25,240,244
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate.....	5	5.69%	
6 Target normal cost	6	364,073	

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	LIVIA W. PAYLO  Signature of actuary	10/10/2017 Date
	LIVIA W. PAYLO Type or print name of actuary	1707469 Most recent enrollment number
	CONDUENT HR CONSULTING, LLC Firm name	412-281-2506 Telephone number (including area code)
	11 STANWIX STREET SUITE 700 PITTSBURGH PA 15222-1312 Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	269,195	355,335
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	269,195	355,335
10 Interest on line 9 using prior year's actual return of <u>2.97%</u>	7,995	10,553
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.92%</u>		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	277,190	365,888

Part III Funding Percentages		
14 Funding target attainment percentage	14	105.09%
15 Adjusted funding target attainment percentage	15	107.64%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	104.80%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ►			18(b)	0	18(c)
				0	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:			
a Segment rates:	1st segment: 4.43 %	2nd segment: 5.91 %	3rd segment: 6.65 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)		31a	364,073
b Excess assets, if applicable, but not greater than line 31a		31b	364,073
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		0	0
b Waiver amortization installment		0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....		34	0
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)		36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)		37	0
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39	0
40 Unpaid minimum required contributions for all years		40	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected		☐ 2 plus 7 years ☐ 15 years	
b Eligible plan year(s) for which the election in line 41a was made		☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011	
42 Amount of acceleration adjustment		42	
43 Excess installment acceleration amount to be carried over to future plan years		43	

Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB - Statement by Enrolled Actuary

In preparing this Schedule SB, the actuary relied upon other parties for – and applied reasonability tests to – information on assets, contributions, plan provisions and data on people covered by the plan.

Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB, Line 22 - Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan:

(1)	(2)	(3)	(4)	(5)
Age	Expected Active Headcount	Retirement Rate	Expected Retirements (2) x (3)	Weighted Age (1) x (4)
60	1.0000	1.0000	1.0000	60.0000
61	0.0000	1.0000	0.0000	0.0000
62	0.0000	1.0000	0.0000	0.0000
63	0.0000	1.0000	0.0000	0.0000
64	2.0000	1.0000	2.0000	128.0000
Total			3.0000	188.0000
Average				62.67

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General Note: The table presents values rounded to fewer significant digits than used in the calculation.

Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB, Part V - Summary of Plan Provisions

Sprague RIGP Plan

Eligibility

All salaried employees hired before January 1, 1986.

Average annual compensation

The highest 60 consecutive month average of base, overtime and incentive compensation received in the 120 months preceding retirement.

The plan was amended during 1989 to provide that compensation and service credits used to calculate benefits were frozen as of December 31, 1993.

Normal Retirement

Eligibility

Age 65. Employment may continue beyond age 65.

Basic Benefit

The annual normal retirement benefit (inclusive of benefits payable under the Travelers Insurance Company Group Annuity Contract Number GR-1840) is equal to:

- (i) 2% of average annual compensation per year of benefit service from the 1st to the 20th year, plus
- (ii) 1% of such compensation per year of benefit service after the first 20 such years, not to exceed a maximum of 60%, less
- (iii) 1-½% of participant's annual Social Security benefit per year of benefit service to a maximum 50% offset but not less than
- (iv) \$1,320 minimum annual benefit or any benefit that would have been payable under the plan provisions in effect as of January 1, 1986. See "Grandfather Provisions."

For any employee who works past age 65, the benefit determined as described above based on service and compensation at retirement date except that calculation under the "Grandfather Provisions" are based on service and compensation at Normal Retirement Date increased to the extent that benefits payable under the Group Annuity Contract are increased.

The Basic Benefit calculated above is offset by benefits derived by the 5% Retirement Account plus the value of the Retirement Rollover with an assumed growth rate of 9% per year, or if applicable, the annuity provided by Equitable Life.

Early Retirement

Eligibility

Age 55 and 10 years of benefit service.

Benefit

Benefit determined as in a normal retirement allowance based on service and compensation at Early Retirement Date payable at Normal Retirement Date without reduction or payable at Early Retirement reduced by $\frac{1}{4}\%$ for each month by which age at Early Retirement Date precedes age at Normal Retirement Date.

If benefits are paid in accordance with one of the "Grandfather Provisions," benefits are not reduced by the Social Security offset until age 65 but such offset at age 65 is reduced for early retirement.

Vested Deferred Retirement

Eligibility

5 years of service.

Benefit

Deferred benefit payable in full at age 65 determined as normal retirement allowance based on applicable compensation as of employee's date of termination and service projected to normal retirement date and multiplied by the ratio of his benefit service as of the date of termination to projected benefit service at normal retirement date. The benefit is payable as a lump sum immediately or an annuity starting at early or normal retirement, reduced appropriately.

Disability Retirement

Eligibility

Upon total and permanent disablement so as to qualify for Long Term Disability Benefits.

Benefit

Benefit determined as a normal retirement allowance above based on the applicable compensation as of the date of disability and service projected to Normal Retirement Date. Benefit commences on the later of Normal Retirement Date and the date on which LTD payments cease.

Death Benefit

Eligibility

Death in active service after completing eligibility requirements for a deferred vested benefit or death of any vested retired or terminated member who dies prior to benefit commencement.

Benefit

Benefit payable to eligible spouse is 50% of the benefit that would have been payable to the deceased employee, commencing on the later of his date of death and the 55th anniversary of his date of birth, as if he had separated service the day before his death and had elected a joint and 50% survivor form of benefit payment commencing immediately or at age 55, if later.

Grandfather Provisions

- A. If an employee was a plan participant on July 1, 1981, the annual normal retirement benefit, payable on a 10 year certain and life basis (inclusive of any benefits payable under the Travelers Insurance Company Group Annuity Contract Number GR-1840), will not be less than:
- (i) 2% of the highest consecutive 5-year average annual base "compensation" per year of service from the 1st to the 10th year of service, plus
 - (ii) 1% of such compensation per year of service from the 11th to the 30th year of service, plus
 - (iii) ½% of such compensation per year of service from the 31st to the 40th year of service, less
 - (iv) \$1,020 multiplied by a ratio, the numerator of which equals benefit service to June 30, 1976 and the denominator of which equals benefit service projected to Normal Retirement Date, plus 1-¼% of the participant's annual Social Security benefit per year of benefit service after June 30, 1976, but not less than
 - (v) \$1,200 minimum annual benefit.

"Compensation" for purposes of these grandfather provisions is base salary prior to Normal Retirement Date only; it excludes overtime and incentive compensation.

- B. If an employee was a plan participant on July 1, 1976, the annual normal retirement benefit, payable on a 10 year certain and life basis (inclusive of any benefits payable under the Travelers Insurance Company Group Annuity Contract Number GR-1840), will not be less than:
- (i) 2% of the highest annual rate of base "compensation" on a July 1 at least 5 years and not more than 11 years prior to Normal Retirement Date per completed year of benefit service from the 1st to the 10th year, plus
 - (ii) 1% of such compensation per completed year of benefit service from the 11th to the 30th year, plus
 - (iii) ½% of such compensation per completed year of benefit service from the 31st to the 40th year, less
 - (iv) \$1,020 (Social Security offset), but not less than
 - (v) \$720 minimum annual benefit.

"Compensation" for purposes of these grandfather provisions excludes overtime and incentive compensation; service is calculated in completed years.

Early Retirement Incentive Program (ERIP)

Effective Date

Eligible employees who retire between April 1, 1987 and April 30, 1987.

Eligibility

Age 55 and 10 years of benefit service as of April 1, 1987.

Benefit

Benefit determined as a normal or early retirement allowance based on including 3 additional years of benefit service and 3 less years of early retirement reduction.

In addition, a \$500 monthly supplement is payable to the member until age 65 (with a 12 month minimum). After the death of the member, the \$500 continues to be paid to the spouse until the member would have been age 65. In any event, at least 12 monthly payments will be made.

Normal Form of Benefit

Life annuity for single participants. Reduced 50% joint and survivorship annuity for married participants.

Optional Forms of Benefit

(1) Life annuity, (2) joint and survivorship annuity with any multiple of 10% continuation or (3) lump sum distribution.

Maximum Allowance

The amount of allowance payable under the plan will be limited to the extent necessary so that the allowance will not exceed the maximum amount permissible under ERISA.

Contributions

Non-contributory.

Branch Plants Plan

Eligibility

Date employee first completes an Hour of Service.

Normal Retirement Allowance

Eligibility

Age 65. Employment may continue beyond age 65.

Benefit

The monthly benefit is equal to \$13.00 times the number of years of credited service, (maximum 30 years) to age 65. The Plan was amended to provide that service credits used to calculate benefits were frozen as of June 30, 1993.

Early Retirement Allowance

Eligibility

Age 60 and 10 years of credited service.

Benefit

Benefit computed as a normal retirement allowance based on credited service to early retirement date reduced by 0.3% per month for each month that the date payments commence precedes age 65.

Vested Termination Allowance

Eligibility

5 years of vesting service.

Benefit

Benefit computed as a normal retirement allowance as of date of termination deferred to age 65.

Any members with 10 years of credited service may elect to commence payment of the benefit any time after age 60 reduced by 0.3% for each month that the date payments commence precedes age 65.

Disability Retirement Allowance

Eligibility

Becoming permanently incapacitated after age 45 and when age and credited service (not less than 10) total 60.

Benefit

Greater of \$125 monthly benefit or 110% of benefit calculated as an early retirement allowance based on credited service to date of disability reduced by $\frac{1}{2}\%$ for each month between 60 and 65 and $\frac{1}{4}\%$ for each month prior to age 60, to a maximum reduction of 45%.

Spouse's Benefit

Eligibility

A married active employee who dies in active service after attaining the eligibility requirements for a vested allowance or retired member who dies prior to date benefits commence.

Benefit

Benefit payable on the earliest date on which the member could have commenced payments to surviving spouse equal to 50% of accrued benefit of employee as of his date of death appropriately reduced for 50% survivorship coverage and early commencement.

Refund of Contributions

Any employee with less than 5 years of service who either terminates or dies in active service, the member or spouse is entitled to accumulated contributions with interest to date of distribution.

Normal Form of Benefit

Life annuity with 60 monthly payments guaranteed for single participants. Reduced 50% joint and survivorship annuity for married participants.

Optional Forms of Benefit

(1) Life annuity with no monthly payments guaranteed, (2) life annuity with sixty monthly payments guaranteed and (3) joint and survivorship annuity with 50% or 100% continuation.

Maximum Allowance

The amount of allowance payable under the plan will be limited to the extent necessary so that the allowance will not exceed the maximum amount permissible under ERISA.

Contributions

Non-contributory since September 2, 1974.

APU RIGP Plan

Eligibility

All employees hired before January 1, 1986 are eligible upon the completion of one year of service.

Normal Retirement Allowance

Eligibility

Age 65. Employment may continue beyond age 65.

Benefit

Benefit sum total of the following:

- (i) 2% of average final five year compensation for each of the first 20 years of credited service, plus
- (ii) 1% of average final five year compensation for each year of credited service in excess of 20 years, minus
- (iii) 1-½% of Social Security primary insurance amount for each year of credited service (not to be greater than 50%).

The above benefit is to be offset by benefits derived by the 5% retirement account in the Savings Plan and the benefits payable under the applicable Prior Plans.

For those participants whose pay is limited to \$150,000 (indexed), the allowance is the greater of the above and their accrued benefit determined as of December 31, 1993 plus a benefit using the above formula, based on service after 1993.

Effective December 31, 1996 benefit accruals under the plan were frozen.

Early Retirement Allowance

Eligibility

Age 55 and 5 years of vesting service.

Benefit

Monthly allowance determined as a normal retirement allowance based on credited service and average final five year compensation to date of retirement appropriately reduced by 0.25% for each month that payment commencement date precedes age 65.

Vested Termination Allowance

Eligibility

Service	Vesting Percentage
3	20%
4	40%
5	60%
6	80%
7+	100%

Benefit

Benefit computed as a normal retirement allowance as of date of termination deferred to age 65 multiplied by the appropriate vesting percentage.

Any member may elect to have payments begin before age 65, reduced by 1/240 for each month that the payment commencement date precedes age 65.

Disability Retirement Allowance

Eligibility

Retired on account of disability and in receipt of payments under the LTD plan.

Benefit

Benefit computed as normal retirement or early retirement allowance assuming the employee continued in active service at the same rate of compensation as of date of disability.

Spouse's Benefit

Eligibility

A married active employee who dies in active service after attaining the eligibility requirements for a vested allowance or retired member who dies before benefit payments have commenced.

Benefit

Benefit payable to the spouse is 50% of the allowance that would have been payable to the deceased employee, commencing on the later of date of death or the employee's 55th anniversary of his birth, as if he had separated from service the day before his death and elected a joint and 50% survivor coverage with payments commencing immediately or at age 55 if later.

Normal Form of Benefit

Life annuity with no monthly payments guaranteed for single participants. Reduced 50% joint and survivorship annuity for married participants.

Optional Forms of Benefit

(1) Life annuity, (2) joint and survivorship 25%, 50%, 75% and 100% annuity, (3) period certain (5, 10, 15 and 20 years) and life thereafter annuity, (4) Social Security leveling option to age 62 and (5) lump sum distribution.

Maximum Allowance

The amount of allowance payable under the plan will be limited to the extent necessary so that the allowance will not exceed the maximum amount permissible under ERISA.

Contributions

Non-contributory.

Retirement Plan for Salaried Employees of American Empire Insurance Company

Eligibility

See "Vested Benefits." Only vested participants at December 1, 1975 are eligible for benefits. No further benefits will be earned.

Normal Retirement Date

First of the month following participant's 65th birthday.

Normal Retirement Benefit

Past Service

$\frac{3}{4}$ of 1% of the first \$4,800 of annual rate of compensation on December 31, 1964 plus 1- $\frac{1}{2}$ % of annual rate of compensation on December 31, 1964 in excess of \$4,800, multiplied by the number of years and completed months of Past Service. Past Service is the period of service credited prior to January 1, 1965 but after the completion of eligibility requirements. Past Service Benefits are not to be less than amounts credited under previous plans for the same period of service from employer contributions.

Future Service

1% of the first \$4,800 of annual compensation plus 2% of annual compensation in excess of \$4,800 for each year of Future Service. Future Service is credited service from date of membership in the plan to the normal or early retirement date.

The minimum pension as computed above, will be \$5.00 a month for each year of Credited Service to a maximum of 35 years.

Early Retirement

A member who has attained age 55 and has completed at least 15 years of Continuous Service may retire either:

- (i) Immediately with his accrued pension at that date reduced $\frac{3}{10}$ of 1% for each of the first 60 months that the early retirement date precedes the normal retirement date, and $\frac{5}{10}$ of 1% for each of the next 60 months.
- (ii) At normal retirement with the pension accrued to the date of such early retirement.

Vested Benefits

All benefits accrued to December 1, 1975.

Death Benefits

If a married member dies prior to actually retiring, the spouse will be entitled to receive a monthly pension calculated under the assumption that the member had retired as of the day before his death and elected the joint and one-half (50%) survivor form of payment. If death occurs prior to age 55, the calculation will be made and benefits will commence when the member would have attained age 55.

Optional Forms of Payout

The member may elect prior to normal retirement an actuarially equivalent mode of payment as follows: (a) 10 years certain and life and (b) 100% or 50% joint and survivor.



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
U. S. GOVERNMENT SECURITIES					
B13F84228602	36210VK42 GNMA POOL #0503515 7.000% 03/15/2029 DD 03/01/99	39,965.423	39,166.08	43,879.24	4,713.16
<u>TOTAL U. S. GOVERNMENT SECURITIES</u>			<u>39,166.08</u>	<u>43,879.24</u>	<u>4,713.16</u>
CORPORATE DEBT INSTRUMENTS - PREFERRED					
B13F84228602	032165AD4 AMSOUTH BANCORP 6.750% 11/01/2025 DD 11/06/95	1,000,000.000	998,100.00	1,147,830.00	149,730.00
B13F84228602	07330TAA0 BCRR TRUST 2009-2 2A 1A1 144A 6.500% 07/17/2040 DD 07/11/09	387,492.635	356,568.90	387,198.14	30,629.24
<u>TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED</u>			<u>1,354,668.90</u>	<u>1,535,028.14</u>	<u>180,359.24</u>
CORPORATE DEBT INSTRUMENTS					
B13F84228602	084423AC6 WR BERKLEY CORP 8.700% 01/01/2022 DD 01/01/92	380,000.000	361,000.00	462,699.40	101,699.40
B13F84228602	25157FAK0 DEUTSCHE MORTGAGE WF1 1A4 144A VAR RT 06/26/2035 DD 08/01/05	1,612,000.000	891,225.00	1,552,807.36	661,582.36
B13F84228602	46632TAA3 JP MORGAN MORTGAGE R2 1A1 144A VAR RT 07/27/2037 DD 07/01/08	1,841,540.918	1,143,151.67	1,717,697.29	574,545.62
B13F84228602	69363VAB3 PSINET INC 11.000% 08/01/2009 DD 07/23/99	429,152.100	446,250.00	0.00	-446,250.00
B13F84228602	75970NAL1 RENAISSANCE HOME EQUITY 2 AF4 VAR RT 08/25/2035 DD 06/01/05	255,000.000	178,500.00	255,938.40	77,438.40
B13F84228602	86359AMH3 STRUCTURED ASSET S AL1 B1 144A 3.357% 04/25/2031 DD 01/01/03	236,459.803	164,930.66	216,230.67	51,300.01
<u>TOTAL CORPORATE DEBT INSTRUMENTS</u>			<u>3,185,057.33</u>	<u>4,205,373.12</u>	<u>1,020,315.79</u>
CORPORATE STOCK - COMMON					
B13F84228602	060505104 BANK OF AMERICA CORP	10,000.000	483,334.00	221,000.00	-262,334.00
B13F84228602	124857202 CBS CORP	4,261.000	117,977.89	271,084.82	153,106.93
B13F84228602	172967424 CITIGROUP INC	4,000.000	1,796,675.00	237,720.00	-1,558,955.00
B13F84228602	20030N101 COMCAST CORP	5,000.000	91,990.67	345,250.00	253,259.33
B13F84228602	313400301 FEDERAL HOME LOAN MORTGAGE COR	10,000.000	567,702.00	37,400.00	-530,302.00
B13F84228602	320517105 FIRST HORIZON NATIONAL CORP	428.000	13,081.87	8,564.28	-4,517.59
B13F84228602	369604103 GENERAL ELECTRIC CO	20,000.000	662,162.00	632,000.00	-30,162.00
B13F84228602	69007J106 OUTFRONT MEDIA INC	1,796.000	25,601.96	44,666.52	19,064.56
B13F84228602	707991105 PENN CENTRAL COAL LEASE	2,805,728.550	2,805,728.55	2,805,728.55	0.00
B13F84228602	849991104 SPRAGUE TECH COAL LEASE	2,318,622.900	2,318,622.90	2,318,622.90	0.00
B13F84228602	85207U105 SPRINT CORP	2,617.000	139,899.84	22,035.14	-117,864.70
B13F84228602	999F69740 HARRIS CIF SPL CAP LIQ	122.030	122.03	122.03	0.00
B13F84228602	999F69757 HARRIS CIF CONV LIQUIDATING	250.480	250.48	250.48	0.00
B13F84228902	002824100 ABBOTT LABORATORIES	1,250.000	52,222.68	48,012.50	-4,210.18
B13F84228902	02079K305 ALPHABET INC-CL A	270.000	145,034.90	213,961.50	68,926.60
B13F84228902	02209S103 ALTRIA GROUP INC	770.000	28,239.84	52,067.40	23,827.56
B13F84228902	031162100 AMGEN INC	710.000	97,701.68	103,809.10	6,107.42
B13F84228902	037833100 APPLE INC	2,243.000	119,530.35	259,784.26	140,253.91
B13F84228902	038222105 APPLIED MATERIALS INC	2,470.000	67,379.34	79,706.90	12,327.56
B13F84228902	042735100 ARROW ELECTRONICS INC	880.000	47,153.04	62,744.00	15,590.96
B13F84228902	08579W103 BERRY GLOBAL GROUP INC	1,860.000	80,962.43	90,637.80	9,675.37
B13F84228902	09062X103 BIOGEN INC	360.000	101,858.97	102,088.80	229.83
B13F84228902	122017106 BURLINGTON STORES INC	1,270.000	76,702.57	107,632.50	30,929.93



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228902	12514G108	CDW CORP/DE	1,610.000	52,245.15	83,864.90	31,619.75
B13F84228902	142339100	CARLISLE COS INC	580.000	54,538.20	63,968.20	9,430.00
B13F84228902	143658300	CARNIVAL CORP	1,310.000	67,402.53	68,198.60	796.07
B13F84228902	151020104	CELGENE CORP	470.000	58,176.55	54,402.50	-3,774.05
B13F84228902	16119P108	CHARTER COMMUNICATIONS INC	310.000	83,064.28	89,255.20	6,190.92
B13F84228902	172908105	CINTAS CORP	520.000	41,277.60	60,091.20	18,813.60
B13F84228902	20030N101	COMCAST CORP	1,830.000	87,564.87	126,361.50	38,796.63
B13F84228902	21036P108	CONSTELLATION BRANDS INC	440.000	36,292.33	67,456.40	31,164.07
B13F84228902	253393102	DICK'S SPORTING GOODS INC	1,290.000	78,695.68	68,499.00	-10,196.68
B13F84228902	254687106	WALT DISNEY CO/THE	580.000	39,351.34	60,447.60	21,096.26
B13F84228902	25754A201	DOMINO'S PIZZA INC	400.000	66,664.44	63,696.00	-2,968.44
B13F84228902	260543103	DOW CHEMICAL CO/THE	1,430.000	72,146.78	81,824.60	9,677.82
B13F84228902	26138E109	DR PEPPER SNAPPLE GROUP INC	550.000	37,023.05	49,868.50	12,845.45
B13F84228902	28176E108	EDWARDS LIFESCIENCES CORP	640.000	29,509.38	59,968.00	30,458.62
B13F84228902	294429105	EQUIFAX INC	480.000	48,882.62	56,750.40	7,867.78
B13F84228902	30303M102	FACEBOOK INC	1,530.000	172,560.42	176,026.50	3,466.08
B13F84228902	369550108	GENERAL DYNAMICS CORP	500.000	70,305.86	86,330.00	16,024.14
B13F84228902	436440101	HOLOGIC INC	1,350.000	53,793.86	54,162.00	368.14
B13F84228902	437076102	HOME DEPOT INC/THE	1,070.000	76,142.12	143,465.60	67,323.48
B13F84228902	438516106	HONEYWELL INTERNATIONAL INC	610.000	71,613.86	70,668.50	-945.36
B13F84228902	452308109	ILLINOIS TOOL WORKS INC	480.000	50,597.71	58,780.80	8,183.09
B13F84228902	458140100	INTEL CORP	2,140.000	68,296.76	77,617.80	9,321.04
B13F84228902	459506101	INTERNATIONAL FLAVORS & FRAGRA	400.000	52,191.48	47,132.00	-5,059.48
B13F84228902	478160104	JOHNSON & JOHNSON	500.000	44,428.64	57,605.00	13,176.36
B13F84228902	500754106	KRAFT HEINZ CO/THE	900.000	79,106.67	78,588.00	-518.67
B13F84228902	512807108	LAM RESEARCH CORP	990.000	77,822.22	104,672.70	26,850.48
B13F84228902	539830109	LOCKHEED MARTIN CORP	290.000	41,003.62	72,482.60	31,478.98
B13F84228902	552953101	MGM RESORTS INTERNATIONAL	2,480.000	71,154.98	71,498.40	343.42
B13F84228902	57636Q104	MASTERCARD INC	500.000	51,840.85	51,625.00	-215.85
B13F84228902	594918104	MICROSOFT CORP	3,110.000	152,276.03	193,255.40	40,979.37
B13F84228902	608190104	MOHAWK INDUSTRIES INC	400.000	82,303.28	79,872.00	-2,431.28
B13F84228902	617446448	MORGAN STANLEY	1,680.000	53,724.55	70,980.00	17,255.45
B13F84228902	654106103	NIKE INC	910.000	51,661.69	46,255.30	-5,406.39
B13F84228902	666807102	NORTHROP GRUMMAN CORP	320.000	54,310.18	74,425.60	20,115.42
B13F84228902	67103H107	O'REILLY AUTOMOTIVE INC	340.000	79,973.93	94,659.40	14,685.47
B13F84228902	713448108	PEPSICO INC	1,310.000	129,801.53	137,065.30	7,263.77
B13F84228902	717081103	PFIZER INC	1,600.000	52,010.43	51,968.00	-42.43
B13F84228902	72348P104	PINNACLE FOODS INC	1,320.000	67,446.32	70,554.00	3,107.68
B13F84228902	74340W103	PROLOGIS INC	990.000	54,027.07	52,262.10	-1,764.97
B13F84228902	74876Y101	QUINTILES IMS HOLDINGS INC	790.000	53,926.80	60,079.50	6,152.70
B13F84228902	755111507	RAYTHEON CO	500.000	60,038.98	71,000.00	10,961.02
B13F84228902	78409V104	S&P GLOBAL INC	660.000	80,632.27	70,976.40	-9,655.87



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228902	811065101	SCRIPPS NETWORKS INTERACTIVE I	1,180.000	76,576.45	84,216.60	7,640.15
B13F84228902	882508104	TEXAS INSTRUMENTS INC	1,210.000	73,481.68	88,293.70	14,812.02
B13F84228902	883556102	THERMO FISHER SCIENTIFIC INC	620.000	82,322.33	87,482.00	5,159.67
B13F84228902	902494103	TYSON FOODS INC	1,110.000	76,789.24	68,464.80	-8,324.44
B13F84228902	91324P102	UNITEDHEALTH GROUP INC	610.000	86,777.93	97,624.40	10,846.47
B13F84228902	91879Q109	VAIL RESORTS INC	490.000	77,886.99	79,041.90	1,154.91
B13F84228902	92210H105	VANTIV INC	890.000	49,404.17	53,061.80	3,657.63
B13F84228902	929160109	VULCAN MATERIALS CO	420.000	52,074.79	52,563.00	488.21
B13F84228902	G02602103	AMDOCS LTD	1,280.000	69,920.05	74,560.00	4,639.95
B13F84228902	G1151C101	ACCENTURE PLC	670.000	66,546.28	78,477.10	11,930.82
B13F84228902	G47791101	INGERSOLL-RAND PLC	1,140.000	74,905.30	85,545.60	10,640.30
B13F84229002	00206R102	AT&T INC	1,500.000	52,198.05	63,795.00	11,596.95
B13F84229002	002824100	ABBOTT LABORATORIES	1,350.000	53,804.09	51,853.50	-1,950.59
B13F84229002	025537101	AMERICAN ELECTRIC POWER CO INC	580.000	34,516.83	36,516.80	1,999.97
B13F84229002	030420103	AMERICAN WATER WORKS CO INC	870.000	47,735.60	62,953.20	15,217.60
B13F84229002	055622104	BP PLC ADR	1,100.000	36,734.50	41,118.00	4,383.50
B13F84229002	060505104	BANK OF AMERICA CORP	6,100.000	130,918.58	134,810.00	3,891.42
B13F84229002	064058100	BANK OF NEW YORK MELLON CORP/T	1,340.000	55,345.22	63,489.20	8,143.98
B13F84229002	08579W103	BERRY GLOBAL GROUP INC	890.000	38,422.60	43,369.70	4,947.10
B13F84229002	12514G108	CDW CORP/DE	1,090.000	34,769.77	56,778.10	22,008.33
B13F84229002	142339100	CARLISLE COS INC	380.000	35,731.72	41,910.20	6,178.48
B13F84229002	143658300	CARNIVAL CORP	1,050.000	54,247.04	54,663.00	415.96
B13F84229002	166764100	CHEVRON CORP	653.000	60,866.99	76,858.10	15,991.11
B13F84229002	172062101	CINCINNATI FINANCIAL CORP	650.000	42,374.71	49,237.50	6,862.79
B13F84229002	17275R102	CISCO SYSTEMS INC	1,368.000	25,676.55	41,340.96	15,664.41
B13F84229002	174610105	CITIZENS FINANCIAL GROUP INC	2,060.000	52,386.17	73,397.80	21,011.63
B13F84229002	20030N101	COMCAST CORP	720.000	37,160.97	49,716.00	12,555.03
B13F84229002	21036P108	CONSTELLATION BRANDS INC	270.000	24,377.14	41,393.70	17,016.56
B13F84229002	233331107	DTE ENERGY CO	400.000	38,609.08	39,404.00	794.92
B13F84229002	25179M103	DEVON ENERGY CORP	1,370.000	59,008.75	62,567.90	3,559.15
B13F84229002	25278X109	DIAMONDBACK ENERGY INC	390.000	38,048.48	39,413.40	1,364.92
B13F84229002	254709108	DISCOVER FINANCIAL SERVICES	1,040.000	57,667.38	74,973.60	17,306.22
B13F84229002	260543103	DOW CHEMICAL CO/THE	860.000	43,025.96	49,209.20	6,183.24
B13F84229002	294429105	EQUIFAX INC	380.000	38,057.25	44,927.40	6,870.15
B13F84229002	30231G102	EXXON MOBIL CORP	745.000	66,853.25	67,243.70	390.45
B13F84229002	369550108	GENERAL DYNAMICS CORP	270.000	37,953.17	46,618.20	8,665.03
B13F84229002	369604103	GENERAL ELECTRIC CO	1,230.000	33,952.17	38,868.00	4,915.83
B13F84229002	437076102	HOME DEPOT INC/THE	270.000	36,157.02	36,201.60	44.58
B13F84229002	438516106	HONEYWELL INTERNATIONAL INC	300.000	30,883.40	34,755.00	3,871.60
B13F84229002	452308109	ILLINOIS TOOL WORKS INC	350.000	36,840.08	42,861.00	6,020.92
B13F84229002	457187102	INGREDION INC	340.000	45,771.38	42,486.40	-3,284.98
B13F84229002	458140100	INTEL CORP	2,870.000	98,147.97	104,094.90	5,946.93



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84229002	46625H100	JPMORGAN CHASE & CO	2,250.000	131,345.44	194,152.50	62,807.06
B13F84229002	478160104	JOHNSON & JOHNSON	1,119.000	98,664.74	128,919.99	30,255.25
B13F84229002	493267108	KEYCORP	2,500.000	39,450.00	45,675.00	6,225.00
B13F84229002	500754106	KRAFT HEINZ CO/THE	770.000	68,990.17	67,236.40	-1,753.77
B13F84229002	512807108	LAM RESEARCH CORP	500.000	34,775.85	52,865.00	18,089.15
B13F84229002	571748102	MARSH & MCLENNAN COS INC	840.000	54,203.96	56,775.60	2,571.64
B13F84229002	58933Y105	MERCK & CO INC	810.000	48,450.84	47,684.70	-766.14
B13F84229002	617446448	MORGAN STANLEY	1,800.000	59,526.18	76,050.00	16,523.82
B13F84229002	665859104	NORTHERN TRUST CORP	1,020.000	71,418.70	90,831.00	19,412.30
B13F84229002	666807102	NORTHROP GRUMMAN CORP	290.000	45,634.51	67,448.20	21,813.69
B13F84229002	713448108	PEPSICO INC	500.000	51,681.19	52,315.00	633.81
B13F84229002	717081103	PFIZER INC	2,836.000	81,492.36	92,113.28	10,620.92
B13F84229002	74340W103	PROLOGIS INC	1,040.000	55,536.19	54,901.60	-634.59
B13F84229002	755111507	RAYTHEON CO	430.000	53,326.71	61,060.00	7,733.29
B13F84229002	78409V104	S&P GLOBAL INC	470.000	51,518.74	50,543.80	-974.94
B13F84229002	806857108	SCHLUMBERGER LTD	1,080.000	94,666.39	90,666.00	-4,000.39
B13F84229002	811065101	SCRIPPS NETWORKS INTERACTIVE I	560.000	36,845.93	39,967.20	3,121.27
B13F84229002	828806109	SIMON PROPERTY GROUP INC	190.000	34,468.99	33,757.30	-711.69
B13F84229002	84763R101	SPECTRUM BRANDS HOLDINGS INC	470.000	54,963.09	57,495.10	2,532.01
B13F84229002	857477103	STATE STREET CORP	820.000	57,073.90	63,730.40	6,656.50
B13F84229002	867914103	SUNTRUST BANKS INC	1,270.000	53,917.85	69,659.50	15,741.65
B13F84229002	882508104	TEXAS INSTRUMENTS INC	630.000	35,655.10	45,971.10	10,316.00
B13F84229002	883556102	THERMO FISHER SCIENTIFIC INC	330.000	50,660.83	46,563.00	-4,097.83
B13F84229002	887317303	TIME WARNER INC	490.000	38,105.78	47,299.70	9,193.92
B13F84229002	89151E109	TOTAL SAADR	1,490.000	69,593.21	75,945.30	6,352.09
B13F84229002	89353D107	TRANSCANADA CORP	810.000	38,440.41	36,571.50	-1,868.91
B13F84229002	902494103	TYSON FOODS INC	680.000	45,763.70	41,942.40	-3,821.30
B13F84229002	91324P102	UNITEDHEALTH GROUP INC	250.000	37,878.88	40,010.00	2,131.12
B13F84229002	91913Y100	VALERO ENERGY CORP	600.000	37,834.98	40,992.00	3,157.02
B13F84229002	92343V104	VERIZON COMMUNICATIONS INC	890.000	44,502.30	47,508.20	3,005.90
B13F84229002	929160109	VULCAN MATERIALS CO	310.000	38,076.59	38,796.50	719.91
B13F84229002	92939U106	WEC ENERGY GROUP INC	600.000	24,889.68	35,190.00	10,300.32
B13F84229002	949746101	WELLS FARGO & CO	987.000	38,898.11	54,393.57	15,495.46
B13F84229002	98389B100	XCEL ENERGY INC	920.000	32,581.26	37,444.00	4,862.74
B13F84229002	G02602103	AMDOCS LTD	690.000	37,691.40	40,192.50	2,501.10
B13F84229002	G1151C101	ACCENTURE PLC	320.000	36,360.29	37,481.60	1,121.31
B13F84229002	G47791101	INGERSOLL-RAND PLC	630.000	40,598.96	47,275.20	6,676.24
TOTAL CORPORATE STOCK - COMMON				16,836,172.19	16,107,130.08	-729,042.11

COMMON/COLLECTIVE TRUST

* B13F84228502	996214912	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	0.020	0.02	0.02	0.00
* B13F84228602	996214912	EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	1,212,607.940	1,212,607.94	1,212,607.94	0.00



Schedule of Investments at End of Plan Year at Historical Cost

Sprague Electric Company
Retirement Income Guarantee Plan
EIN 06-1356481 Plan #010
Schedule of Assets (Held at End of Year)
December 31, 2016

TOTAL COMBINED - B13G00010000

1/1/2016 - 12/31/2016

Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
B13F84228602	999F69716 CHASE BANK INTL SHORT TERM FUND	10,000.000	10,000.00	10,000.00	0.00
* B13F84228902	996214912 EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	103,421.920	103,421.92	103,421.92	0.00
* B13F84229002	996214912 EB TEMP INV FD VAR RT 12/31/49 FEE CL 20	94,023.550	94,023.55	94,023.55	0.00
TOTAL COMMON/COLLECTIVE TRUST			1,420,053.43	1,420,053.43	0.00
GRAND TOTAL			22,835,117.93	23,311,464.01	476,346.08

* Indicates party-in-interest to the Plan

Name of Plan: Sprague Electric Company Retirement Income Guarantee Plan
EIN / PN: 06-1356481 / 010
Plan Year: January 1, 2016 to December 31, 2016

Schedule SB, Line 24 - Change in Actuarial Assumptions

The expense component of the Target Normal Cost was changed from \$296,997 to \$364,073 based on actual plan experience.