Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2016

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2010

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)
LUCENT HOME HEALTH, LLC

1101 W. PLANO PARKWAY, STE. 101
PLANO, TX 75075

2b Employer Identification Number (EIN) 56-2640767

2c Plan Sponsor's telephone number 972-664-0945

2d Business code (see instructions) 621610

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2017	FESTUS MADABUIKE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	

5	Total number of participants at the beginning of the plan year	**5**	134
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)**	127
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	137
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	76
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	213
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	213
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	213
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	23
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2H 2J 3D

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

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **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 H (Form 5500)

Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2016

This Form is Open to Public Inspection

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

A Name of plan
LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LUCENT HOME HEALTH, LLC

D Employer Identification Number (EIN)
56-2640767

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	204475	165197
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	459	633
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	20513	12197
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	2276	
(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)	96020	63285
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	885711	1295988
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	1209454	1537300
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	993	2602
k	Total liabilities (add all amounts in lines 1g through1j)	1k	993	2602
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	1208461	1534698

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)	163184	
	(B) Participants	2a(1)(B)	102970	
	(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)		266154
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	4	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	3404	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3408
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	39473	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		39473
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	135768	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	135752	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		16
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		40322
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		349373
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	8996	
(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)		8996
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)		
(2) Contract administrator fees	2i(2)	14140	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		14140
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		23136
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		326237
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) [X] 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 [X] No

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

(1) Name: CATLIN, LILLARD & CO, PC **(2)** EIN: 75-2261362

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		2013
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		19000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n			
o	Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o			

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

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

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

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

Part V Trust Information

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2016

This Form is Open to Public Inspection.

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

A Name of plan
LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LUCENT HOME HEALTH, LLC

D Employer Identification Number (EIN)
56-2640767

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 95-6817943

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

Lucent Home Health LLC 401(k) Profit Sharing Plan

FINANCIAL STATEMENTS
and SUPPLEMENTAL SCHEDULES
for the years ended DECEMBER 31, 2016 and 2015

AND INDEPENDENT AUDITORS' REPORT

Catlin, Lillard & Co. PC
Certified Public Accountants

S. Brian Catlin
Ralph W. Lillard

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of
Lucent Home Health, LLC 401(k) Profit Sharing Plan

Report on the Financial Statements

We have audited the accompanying financial statements of Lucent Home Health, LLC 401(k) Profit Sharing Plan, which comprise the statements of net assets available for benefits as of December 31, 2016, and the related statements of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Lucent Home Health, LLC 401(k) Profit Sharing Plan as of December 31, 2016, and the changes in net assets available for benefits for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Established 1977

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Report on Compiled 2015 Financial Statement

Plan management is responsible for the accompanying statements of Lucent Home Health, LLC 401(k) Profit Sharing Plan, which comprise the statements of net assets available for benefits as of December 31, 2015, and the related statements of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standard for Accounting and Review Services promulgated by the Accounting and Review Services committee of the AICPA. We did not audit or review the financial statements nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by plan management. Accordingly, we do not express an opinion, a conclusion, or provide any form of assurance on the financial statements.

Report on Supplemental Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of delinquent participant contributions, assets (held at end of year), assets (acquired and disposed of within year), and reportable transactions, together referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.



Catlin, Lillard & Co., PC.
Fort Worth, Texas
October 16, 2017

Lucent Home Health LLC 401(k) Profit Sharing Plan
Statements of Net Assets Available for Benefits
For Period Ending December 31, 2016 and 2015

	2016	Unaudited 2015
Assets		
Cash or cash equivalent	$ 12,197	$ 20,513
Investments (at fair value)	1,295,988	887,987
Receivables:		
Employer matching contribution	67,505	75,577
Employer profit sharing contribution	95,679	127,128
Loans to participants	63,285	96,020
Participant loan interest	78	119
Dividends	555	340
Employer contributions	2,013	1,770
Total receivables	$ 229,115	$ 300,954
Total Assets	$ 1,537,300	$ 1,209,454
Liabilities & Net Assets Available for Benefits		
Liabilities:		
Accrued Expenses	2,602	993
Total Liabilities	2,602	993
Net assets reflecting investments at fair value	$ 1,534,698	$ 1,208,461
Net Assets Available for Benefits	$ 1,534,698	$ 1,208,461

See Independent Auditors' Report and Accompanying Notes to the Financial Statements

Lucent Home Health LLC 401(k) Profit Sharing Plan
Statements of Changes in Net Assets Available for Benefits
For Years Ending December 31, 2016 and 2015

	2016	Unaudited 2015
ADDITIONS		
Additions to Net Assets Attributed to:		
Investment income:		
Net appreciation (depreciation) in fair value of investments	$ 40,322	$ (29,661)
Realized gains / (losses)	16	(184)
Interest	4	9
Dividends	39,473	38,220
Capital gain distributions	-	148
	79,815	8,532
Interest income on notes receivable from participants	3,404	2,016
Contributions:		
Participants	102,970	111,826
Employer matching contribution	67,505	75,577
Employer profit sharing contribution	95,679	127,128
	266,154	314,531
Total Additions	349,373	325,079
DEDUCTIONS		
Deductions from Net Assets Attributed to:		
Benefits paid to participants	8,996	13,995
Administrative expenses	14,140	11,199
Total Deductions	23,136	25,194
Net increase	326,237	299,885
Net Assets Available for Benefits:		
Beginning of Year	1,208,461	908,576
End of Year	$ 1,534,698	$ 1,208,461

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2016 AND 2015

Note A – DESCRIPTION OF PLAN

The following description of Lucent Home Health, LLC 401(K) Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have one year of service and are 21 years of age or older. The Plan was originally adopted effective January 1, 2010. The owner of the company is the Plan sponsor and is responsible for the oversight of the Plan. The Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan sponsor. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

There were no amendments adopted in to the Plan for 2016.

An amendment to Article IV, Section 4.4 Allocation of Contribution and Usage of Forfeitures and Earnings was amended effective January 1, 2015 and is as follows:

> (b) Allocation of contributions. The Employer shall provide the Administrator with all information required by the Administrator to make a proper allocation of the Employer contributions for each Plan year. Within a reasonable period of time after the date of the receipt by the Administrator of such information, the Administrator shall allocate such contribution as follows:
>
> > (5) Non-elective Contributions. With respect to the Non-Elective Contribution made pursuant to Section 4.1, to each Participant's Non-elective Contribution Account in accordance with Section 4.1.
> >
> > > Any Participant employed during the Plan year shall be eligible to share in the Non-elective Contribution for the Plan Year.
>
> This change is being made in order to pass prerequisite testing under Code Section 401(a)(4) and the Regulations thereunder for the 2015 Plan Year only.

Contributions

Participants may elect to defer and contribute a pretax fixed amount or a percentage of his or her annual compensation to the Plan, but not to exceed 100% of annual compensation limited to $18,000 for 401(k) plans for the years ended December 31, 2016 and 2015, respectively. If a participant is over age 50, they may contribute an additional "catch-up" contribution of $6,000 for 2016 and 2015, respectively. Participants direct the investment of their contributions into various investment options offered by the Plan. Employees are notified when they become eligible to contribute to the Plan, the Company does not use an auto-enrollment process. The Company contributes 100% of the first 6% of base compensation that a participant contributes to the Plan and is invested in the same investment options as the participant contributions. Additional profit sharing amounts may be contributed at the option of the Company and are

Note A – DESCRIPTION OF PLAN (continued)

invested in a portfolio of investments as directed by the Company. The Company made profit sharing contributions of $95,679 and $127,128 for the years ended December 31, 2016 and 2015, respectively.

Participant Accounts

Each participant's account is credited with the participant's directed contributions and Company matching contributions, as well as the Company's profit sharing contributions and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific transactions as defined in the plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. There is an amount of $1,084 in Accrued Expenses as December 31, 2016 for benefits applied for by participants but not yet paid.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loan repayment terms may not exceed five years except for the purchase of a primary residence. The loans are secured by the vested balance in the participant's account, and bear interest at a rate equal to one percent above the prime rate. Principal and interest are paid ratably through payroll deductions.

Vesting

Participants are immediately vested in their voluntary contributions and the company matching contributions plus actual earnings thereon. Vesting in the Company profit sharing contributions is based on years of continuous service. A participant is fully vested after six years of credited service.

Payment of Benefits

On termination of service due to retirement, death, disability, or termination of employment, a participant, or his or her beneficiary, may elect to receive the value of their vested account balance distributed as a single lump-sum payment or a direct rollover to an individual retirement account or another employer plan.

Other benefits

Subject to Plan Administrator approval, participants with immediate and heavy financial hardships, as defined by the Plan, may receive a partial or total distribution.

Forfeitures

Forfeitures of unvested benefits are available as a reduction following year's discretionary contribution or for payment of plan expenses. The balances for forfeitures were $2,955 and $4,663 for December 31, 2016 and 2015, respectively.

Note A – DESCRIPTION OF PLAN (continued)

New Accounting Pronouncements

The Company believes it has implemented the accounting pronouncements with a material impact on its financial statements and does not believe there are any new or pending announcements that will materially impact its financial position or results of operations.

Note B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review

Subsequent events were evaluated through October 16, 2017, which is the date the financial statements were available to be issued.

Estimates

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

Basis of Accounting

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

Notes Receivable from Participants

Notes Receivable from participants are measured at their unpaid principal balances plus any accrued but unpaid interest. Interest income is reported on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. If a participant does not make loan payments and the plan administrator considers the participant loan to be in default, the loan is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document. Notes receivable from participants were $63,285 and $96,020 for the years ended December 31, 2016 and 2015, respectively.

Employer Contributions Receivable

Due from Sponsor represents a shortage between the amounts withheld for deferrals and loan repayments from the participant's and the amount remitted to the Plan. The amounts include interest as calculated by the Department of Labor Lost Earnings Calculator. Participants that were remitted for more than their withheld amounts have been reclassified as forfeitures, See Note A for information on forfeitures. Employer Contributions Receivable were $2,013 and $1,770 for December 31, 2016 and 2015, respectively.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Note B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

See Note C for discussion on fair value measurements.

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

Excess contributions

The Plan did not have any excess contributions in 2016 or 2015.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. The administrative expenses paid by the Plan were $14,140 and $11,199 for the years ended December 31, 2016 and 2015, respectively.

Note C – 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Note C – FAIR VALUE MEASUREMENTS (continued)

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 and liabilities in active 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 inputs that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of observable inputs.

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

Cash: Valued its current balance.

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

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

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

NOTE C - FAIR VALUE MEASUREMENTS (continued)

December 31, 2016	Level 1	Level 2	Level 3	Total
Mutual Funds	$1,295,988	-	-	$1,295,988
Common Stocks	-	-	-	-
Cash	$12,197	-	-	$12,197
Investments at Fair Value	$1,308,185	-	-	$1,308,185

December 31, 2015	Level 1	Level 2	Level 3	Total
Mutual Funds	$885,711	-	-	$885,711
Common Stocks	$2,276	-	-	$2,276
Cash	$20,513	-	-	$20,513
Investments at Fair Value	$908,500	-	-	$908,500

Note D – NONPARTICIPANT DIRECTED INVESTMENTS

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant directed investments is as follows:

	December 31,	
	2016	**2015**
Mutual Funds	$392,552	$242,107
Common Stocks	-	2,276
Cash	12,197	20,513
	$404,749	$264,896

Note D – NONPARTICIPANT DIRECTED INVESTMENTS (continued)

Changes in Net Assets:	**December 31, 2016**
Contributions	127,128
Interest, Dividends, Capital Gain Distributions	7,241
Realized Gains	16
Net Appreciation	10,599
Benefits Paid to Participants	(431)
Administrative Expenses	(4700)
	$139,853

Note E – RELATED PARTY and PARTIES IN INTEREST TRANSACTIONS

American Funds is the record keeper for the participant directed and Company matching portion of the Plan. All of the investments in this portion of the Plan are in American Funds mutual funds. American Funds received revenue from services it provides to the Plan.

The Plan sponsor is an employee of the company and also a participant and highly compensated employee for plan testing percentages. The Plan sponsor contributes tax deferred contributions to the plan and receives Company matching on that deferral. The Plan sponsor did not receive any Profit Sharing contributions for the years ended December 31, 2015 and 2016.

Note F – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

Note G – TAX STATUS

The Internal Revenue Service has determined and informed the Company by letter dated March 31, 2014, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is

Note G – TAX STATUS (continued)

currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require the Plan Administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities: however, there are currently no audits for any tax periods in progress.

Note H – RISKS AND UNCERTAINTIES

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

Note I – RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

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

	December 31, 2016	December 31, 2015
Net assets available for benefits per the financial statements	$1,534,698	$1,208,461
Reconciling items	$0	$0
Net assets available for benefits per Form 5500	$1,534,698	$1,208,461

Note I – RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500 (continued)

The following is reconciliation of net assets available for benefits from the 2015 Form 5500 prepared on modified accrual to the 2016 Form 5500 column for Beginning of Year:

	December 31, 2015
Net assets available for benefits per 2015 Form 5500	$1,207,334
Dividends Receivable	340
Loan Interest Receivable	118
Participant Loan Receivable	(108)
Employer Contribution Receivable	1,770
Accrued Expenses	(993)
Net assets available for benefits per Form 5500	$1,208,461

SUPPLEMENTAL SCHEDULES

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4a - Schedule of Delinquent Participant Contributions
December 31, 2016

Participant contributions transferred late to plan, check here if late participant loan repayments are included ✓	Total that constitutes nonexempt prohibited transactions			Total fully corrected under VFCP PTE 2002-51
	Contributions not corrected	Contributions corrected outside VFCP	Contributions pending correction in VFCP	
Participant deferral not remitted correctly	-	-	1,797	-
Participant loan repayment not remitted correctly	-	-	216	-

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4a - Schedule of Delinquent Participant Contributions
December 31, 2015

Participant contributions transferred late to plan, check here if late participant loan repayments are included ✓	Total that constitutes nonexempt prohibited transactions			Total fully corrected under VFCP PTE 2002-51
	Contributions not corrected	Contributions corrected outside VFCP	Contributions pending correction in VFCP	
Participant deferral not remitted correctly	-	-	1,661	-
Participant loan repayment not remitted correctly	-	-	109	-

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b) Indentity of issuer, borrower, lessor, or similar party	(c) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(d) Cost (n/a)	(e) Current Value
	Cash:				
	LPL Financial	Cash			12,197
	Mutual Funds:				
	Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	629 shares		12,104
	Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	744 shares		20,867
	Ishares	FM - Ishares MSCI Frontier	315 shares		7,839
	Ishares	DVY - Ishares Select Dividend	506 shares		44,849
	SPDR	XLP - Sector Consumers Staples Select	709 shares		36,660
	SPDR	XLK - Sector Technology Select	503 shares		24,304
	SPDR	JNK - SPDR Bloomberg Barcalys High Yield Bond	557 shares		20,314
	SPDR	SPY - SPDR S&P 500	361 shares		80,792
	Vanguard	VHT - Vanguard Health Care	187 shares		23,712
	Vanguard	VCIT - Vanguard Intermediate Term Corp	329 shares		28,210
	Vanguard	VB - Vanguard Small Cap	188 shares		24,209
	Vanguard	BND - Vanguard Total Bond Market	746 shares		60,265
	Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	154 shares		8,429
*	American Funds	WMIF - Washington Mutual Investors Fund	162 shares		6,612
*	American Funds	AMCAP - AMCAP Fund	68 shares		1,878
*	American Funds	IFA - The Income Fund of America	40 shares		877
*	American Funds	BFA - The Bond Fund of America	138 shares		1,759
*	American Funds	AMBAL - American Balanced Fund	471 shares		11,706
*	American Funds	EUPAC - EuroPacific Growth Fund	39 shares		1,762
*	American Funds	AHIT - American High-Income Trust	325 shares		3,334
*	American Funds	STBF - Short-Term Bond Fund of America	20 shares		203
*	American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	455 shares		5,237
*	American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	17,444 shares		210,031
*	American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	33,513 shares		421,923
*	American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	13,041 shares		165,103
*	American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	35 shares		453
*	American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	5,259 shares		68,528
*	American Funds	AFTD55 - American Funds 2055 Target Date Retirement Fund	65 shares		1,028
*	American Funds	MMF - Money Market Fund	202 Shares		202
*	American Funds	PSB - American Funds Balanced Portfolio	213 shares		2,798
*		Participant Loan 4-6%			63,285
			Total		**1,371,470**

* Denotes parties in interest

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2015

(a)	(b) Indentity of issuer, borrower, lessor, or similar party	(c) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(d) Cost (n/a)	(e) Current Value
	Cash:				
	LPL Financial	Cash			20,513
	Equities & Options:				
	JP Morgan	JP Morgan Chase Alerian	79 shares		2,276
	Mutual Funds:				
	SPDR	XLY - Consumer Discretionary Select	69 shares		5,358
	Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	415 shares		7,586
	Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	793 shares		21,536
	Ishares	TIP - Ishares TIP	71 shares		7,799
	Ishares	FLOT - Ishares Floating Rate Bond	155 shares		7,843
	Ishares	FM - Ishares MSCI Frontier	298 shares		7,415
	Ishares	IBB - Ishares NASDAQ Biotechnology	7 shares		2,369
	Ishares	DVY - Ishares Select Dividend	72 shares		5,447
	Powershares	PCY - Powershares Emerging Markets Sovereign	190 shares		5,189
	Powershares	BKLN - Powershares Senior Loan Port	227 shares		5,088
	SPDR	XLE - Sector Energy Select	42 shares		2,505
	SPDR	XLF - Sector Financial Select	345 shares		8,226
	SPDR	XLK - Sector Technology Select	195 shares		8,347
	SPDR	SJNK - SPDR Barclays Cap Short Term HY Bond	386 shares		9,906
	SPDR	XHS - SPDR S&P Healthcare	84 shares		4,804
	SPDR	KRE - SPDR S&P Regional Banking	195 shares		8,160
	SPDR	SPY - SPDR S&P 500	240 shares		48,964
	SPDR	XHB - SPDR Series Trust S&P Homebuilders	143 shares		4,899
	Vanguard	VHT - Vanguard Health Care	40 shares		5,259
	Vanguard	VCIT - Vanguard Intermediate Term Corp	156 shares		13,140
	Vanguard	VNQ - Vanguard REIT Index	34 shares		2,711
	Vanguard	VCSH - Vanguard Short Term Corp Bond	265 shares		20,924
	Vanguard	VBK - Vanguard Small Cap Growth	63 shares		7,610
	Vanguard	VBR - Vanguard Small Cap Value	105 shares		10,390
	Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	190 shares		10,632
*	American Funds	WMIF - Washington Mutual Investors Fund	74 shares		2,825
*	American Funds	AMCAP - AMCAP Fund	38 shares		1,008
*	American Funds	IFA - The Income Fund of America	24 shares		486
*	American Funds	BFA - The Bond Fund of America	80 shares		1,003
*	American Funds	AMBAL - American Balanced Fund	295 shares		7,034
*	American Funds	EUPAC - EuroPacific Growth Fund	22 shares		979
*	American Funds	AHIT - American High-Income Trust	175 shares		1,639
*	American Funds	STBF - Short-Term Bond Fund of America	12 shares		121
*	American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	141 shares		1,565
*	American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	11,457 shares		133,017
*	American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	27,623 shares		335,068
*	American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	8,409 shares		102,336
*	American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	63 shares		779
*	American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	4,331 shares		54,093
*	American Funds	MMF - Money Market Fund	121 shares		121
*	American Funds	PSB - American Funds Balanced Portfolio	119 shares		1,530
*		Participant Loan 4-6%			96,020
			Total		**1,004,520.00**

* Denotes parties in interest

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
December 31, 2016

(a) Indentity of issuer, borrower, lessor, or similar party	(b) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(c) Cost of acquisitions	(d) Proceeds of dispositions
Cash:				
LPL Financial	Cash		135,495	127,131
Equities & Options:				
JP Morgan	JP Morgan Chase Alerian	81 shares	-	2,604
Mutual Funds:				
SPDR	XLY - Consumer Discretionary Select	69 shares	-	5,596
Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	205 shares	4,041	-
Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	209 shares	5,549	-
Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	282 shares		7,233
Ishares	TIP - Ishares TIP	71 shares	-	8,305
Ishares	FLOT - Ishares Floating Rate Bond	155 shares	-	7,899
Ishares	FM - Ishares MSCI Frontier	99 shares	2,495	-
Ishares	FM - Ishares MSCI Frontier	88 shares	-	2,231
Ishares	IBB - Ishares NASDAQ Biotechnology	7 shares	-	1,906
Ishares	DVY - Ishares Select Dividend	426 shares	36,869	-
Powershares	PCY - Powershares Emerging Markets Sovereign	195 shares	-	5,857
Powershares	BKLN - Powershares Senior Loan Port	233 shares	-	5,363
SPDR	XLE - Sector Energy Select	42 shares	-	2,905
SPDR	XLF - Sector Financial Select	349 shares	-	8,172
SPDR	XLK - Sector Technology Select	302 shares	13,943	-
SPDR	XLP - Sector Consumers Staples Select	701 shares	38,164	-
SPDR	SJNK - SPDR Barclays Cap Short Term HY Bond	399 shares	-	10,840
SPDR	XHS - SPDR S&P Healthcare	84 shares	-	4,946
SPDR	KRE - SPDR S&P Regional Banking	197 shares	-	7,916
SPDR	JNK - SPDR Bloomberg Barcalys High Yield Bond	546 shares	19,749	
SPDR	SPY - SPDR S&P 500	116 shares	25,005	-
SPDR	XHB - SPDR Series Trust S&P Homebuilders	144 shares	-	5,051
Vanguard	VHT - Vanguard Health Care	146 shares	19,212	-
Vanguard	VCIT - Vanguard Intermediate Term Corp	166 shares	14,643	-
Vanguard	VNQ - Vanguard REIT Index	6 shares	-	3,110
Vanguard	VCSH - Vanguard Short Term Corp Bond	268 shares	-	21,541
Vanguard	VB - Vanguard Small Cap	186 shares	22,301	-
Vanguard	VBK - Vanguard Small Cap Growth	63 shares	-	8,070
Vanguard	VBR - Vanguard Small Cap Value	106 shares	-	11,550
Vanguard	BND - Vanguard Total Bond Market	738 shares	61,653	-
Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	47 shares	2,492	4,657
American Funds	WMIF - Washington Mutual Investors Fund	75 shares	3,131	
American Funds	AMCAP - AMCAP Fund	28 shares	727	
American Funds	IFA - The Income Fund of America	16 shares	320	
American Funds	BFA - The Bond Fund of America	57 shares	735	
American Funds	AMBAL - American Balanced Fund	157 shares	3,880	
American Funds	EUPAC - EuroPacific Growth Fund	17 shares	753	
American Funds	AHIT - American High-Income Trust	139 shares	1,323	
American Funds	STBF - Short-Term Bond Fund of America	8 shares	80	
American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	300 shares	3,462	
American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	5,235 shares	64,402	
American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	4,453 shares	56,776	
American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	3,999 shares	51,187	
American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	27 shares	-	370
American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	740 shares	9,471	
American Funds	AFTD55 - American Funds 2055 Target Date Retirement Fund	63 shares	993	
American Funds	MMF - Money Market Fund	80 shares	80	
American Funds	PSB - American Funds Balanced Portfolio	85 shares	1,138	
	Participant Loan 4-6%			
		Total	**600,069**	**263,253**

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
December 31, 2015

(a) Indentity of issuer, borrower, lessor, or similar party	(b) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(c) Cost of acquisitions	(d) Proceeds of dispositions
Cash:				
LPL Financial	Cash		208,773	181,837
Equities & Options:				
JP Morgan	JP Morgan Chase Alerian	68 shares	2,289	-
Mutual Funds:				
SPDR	XLY - Consumer Discretionary Select	69 shares	5,009	-
Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	415 shares	8,026	-
Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	790 shares	20,929	-
Ishares	TIP - Ishares TIP	58 shares	6,465	-
Ishares	FLOT - Ishares Floating Rate Bond	126 shares	6,368	-
	EFA - Ishares MSCI	38 shares	-	2,358
	EEM - Ishares Emerging Markets	28 shares	-	1,136
Ishares	FM - Ishares MSCI Frontier	250 shares	6,665	-
Ishares	IBB - Ishares NASDAQ Biotechnology	6 shares	2,008	-
Ishares	DVY - Ishares Select Dividend	66 shares	4,753	-
Powershares	PCY - Powershares Emerging Markets Sovereign	156 shares	4,208	-
Powershares	BKLN - Powershares Senior Loan Port	145 shares	3,203	1,783
SPDR	XLE - Sector Energy Select	42 shares	2,782	-
SPDR	XLF - Sector Financial Select	305 shares	6,876	-
SPDR	XLK - Sector Technology Select	159 shares	6,331	-
SPDR	SJNK - SPDR Barclays Cap Short Term HY Bond	263 shares	7,065	-
SPDR	XHS - SPDR S&P Healthcare	78 shares	4,631	-
SPDR	KRE - SPDR S&P Regional Banking	170 shares	6,768	-
SPDR	SPY - SPDR S&P 500	198 shares	38,918	-
SPDR	XHB - SPDR Series Trust S&P Homebuilders	128 shares	4,594	-
Vanguard	VHT - Vanguard Health Care	32 shares	4,192	-
Vanguard	VCIT - Vanguard Intermediate Term Corp	118 shares	10,197	-
Vanguard	VNQ - Vanguard REIT Index	26 shares	2,077	-
Vanguard	VCSH - Vanguard Short Term Corp Bond	193 shares	15,392	-
Vanguard	VBK - Vanguard Small Cap Growth	56 shares	6,862	-
Vanguard	VBR - Vanguard Small Cap Value	90 shares	9,062	-
Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	169 shares	9,296	-
American Funds	WMIF - Washington Mutual Investors Fund	64 shares	2,569	-
American Funds	AMCAP - AMCAP Fund	27 shares	775	-
American Funds	IFA - The Income Fund of America	16 shares	342	-
American Funds	BFA - The Bond Fund of America	60 shares	775	-
American Funds	AMBAL - American Balanced Fund	221 shares	5,406	-
American Funds	EUPAC - EuroPacific Growth Fund	4 shares	216	-
American Funds	AHIT - American High-Income Trust	126 shares	1,379	-
American Funds	STBF - Short-Term Bond Fund of America	8 shares	85	-
American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	118 shares	1,396	-
American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	4,477 shares	55,924	-
American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	3,573 shares	46,629	-
American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	2,387 shares	31,994	-
American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	0 shares	-	8
American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	965 shares	12,649	-
American Funds	MMF - Money Market Fund	86 shares	86	-
American Funds	PSB - American Funds Balanced Portfolio	88 shares	1,207	-
	Participant Loan 4-6%			
		Total	**575,171**	**187,122**

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4j - Schedule of Reportable Transactions
December 31, 2016

(a) Indentity of party involved	(b) Description of asset (include interest rate and maturity in case of loan	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense incurred with trasnaction	(g) Cost of asset	(h) Current value of asset on trasnaction date	(i) Net gain or (loss)
Plan Sponsor	Contributions:							
	Payment of prior year matching receivable	n/a	n/a	n/a	n/a	-	75,577	75,577
	Payment of prior year profit sharing receivable	n/a	n/a	n/a	n/a	-	127,128	127,128
						-	**202,705**	**202,705**

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4j - Schedule of Reportable Transactions
December 31, 2015

(a) Indentity of party involved	(b) Description of asset (include interest rate and maturity in case of loan	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense incurred with trasnaction	(g) Cost of asset	(h) Current value of asset on trasnaction date	(i) Net gain or (loss)
Plan Sponsor	Contributions:							
	Payment of prior year matching receivable	n/a	n/a	n/a	n/a	-	58,887	58,887
	Payment of prior year profit sharing receivable	n/a	n/a	n/a	n/a	-	176,402	176,402
						-	**235,289**	**235,289**

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2016

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☒ 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
LUCENT HOME HEALTH, LLC
401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2010

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)
LUCENT HOME HEALTH, LLC

1101 W. PLANO PARKWAY, STE. 101

PLANO TX 75075

2b Employer Identification Number (EIN) 56-2640767

2c Plan Sponsor's telephone number (972)664-0945

2d Business code (see instructions) 621610

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	[signature]	10/16/17	FESTUS MADABUIKE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	[signature]	10/16/17	FESTUS MADABUIKE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	134
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)**	127
a(2) Total number of active participants at the end of the plan year	**6a(2)**	137
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	76
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	213
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	213
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	213
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	23
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2H 2J 3D

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

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **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_____

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2016

(a)	(b) Indentity of issuer, borrower, lessor, or similar party	(c) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(d) Cost (n/a)	(e) Current Value
	Cash:				
	LPL Financial	Cash			12,197
	Mutual Funds:				
	Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	629 shares		12,104
	Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	744 shares		20,867
	Ishares	FM - Ishares MSCI Frontier	315 shares		7,839
	Ishares	DVY - Ishares Select Dividend	506 shares		44,849
	SPDR	XLP - Sector Consumers Staples Select	709 shares		36,660
	SPDR	XLK - Sector Technology Select	503 shares		24,304
	SPDR	JNK - SPDR Bloomberg Barcalys High Yield Bond	557 shares		20,314
	SPDR	SPY - SPDR S&P 500	361 shares		80,792
	Vanguard	VHT - Vanguard Health Care	187 shares		23,712
	Vanguard	VCIT - Vanguard Intermediate Term Corp	329 shares		28,210
	Vanguard	VB - Vanguard Small Cap	188 shares		24,209
	Vanguard	BND - Vanguard Total Bond Market	746 shares		60,265
	Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	154 shares		8,429
*	American Funds	WMIF - Washington Mutual Investors Fund	162 shares		6,612
*	American Funds	AMCAP - AMCAP Fund	68 shares		1,878
*	American Funds	IFA - The Income Fund of America	40 shares		877
*	American Funds	BFA - The Bond Fund of America	138 shares		1,759
*	American Funds	AMBAL - American Balanced Fund	471 shares		11,706
*	American Funds	EUPAC - EuroPacific Growth Fund	39 shares		1,762
*	American Funds	AHIT - American High-Income Trust	325 shares		3,334
*	American Funds	STBF - Short-Term Bond Fund of America	20 shares		203
*	American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	455 shares		5,237
*	American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	17,444 shares		210,031
*	American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	33,513 shares		421,923
*	American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	13,041 shares		165,103
*	American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	35 shares		453
*	American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	5,259 shares		68,528
*	American Funds	AFTD55 - American Funds 2055 Target Date Retirement Fund	65 shares		1,028
*	American Funds	MMF - Money Market Fund	202 Shares		202
*	American Funds	PSB - American Funds Balanced Portfolio	213 shares		2,798
*		Participant Loan 4-6%			63,285
			Total		**1,371,470**

* Denotes parties in interest

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	Powershares	PCY - Powershares Emerging Markets Sovereign	190 shares		5,189
	Powershares	BKLN - Powershares Senior Loan Port	227 shares		5,088
	SPDR	XLE - Sector Energy Select	42 shares		2,505
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	SPDR	XHS - SPDR S&P Healthcare	84 shares		4,804
	SPDR	KRE - SPDR S&P Regional Banking	195 shares		8,160
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	Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	190 shares		10,632
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*	American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	27,623 shares		335,068
*	American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	8,409 shares		102,336
*	American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	63 shares		779
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*	American Funds	MMF - Money Market Fund	121 shares		121
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			Total		**1,004,520.00**

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Powershares	PCY - Powershares Emerging Markets Sovereign	195 shares	-	5,857
Powershares	BKLN - Powershares Senior Loan Port	233 shares	-	5,363
SPDR	XLE - Sector Energy Select	42 shares	-	2,905
SPDR	XLF - Sector Financial Select	349 shares	-	8,172
SPDR	XLK - Sector Technology Select	302 shares	13,943	-
SPDR	XLP - Sector Consumers Staples Select	701 shares	38,164	-
SPDR	SJNK - SPDR Barclays Cap Short Term HY Bond	399 shares	-	10,840
SPDR	XHS - SPDR S&P Healthcare	84 shares	-	4,946
SPDR	KRE - SPDR S&P Regional Banking	197 shares	-	7,916
SPDR	JNK - SPDR Bloomberg Barcalys High Yield Bond	546 shares	19,749	
SPDR	SPY - SPDR S&P 500	116 shares	25,005	-
SPDR	XHB - SPDR Series Trust S&P Homebuilders	144 shares	-	5,051
Vanguard	VHT - Vanguard Health Care	146 shares	19,212	-
Vanguard	VCIT - Vanguard Intermediate Term Corp	166 shares	14,643	-
Vanguard	VNQ - Vanguard REIT Index	6 shares	-	3,110
Vanguard	VCSH - Vanguard Short Term Corp Bond	268 shares	-	21,541
Vanguard	VB - Vanguard Small Cap	186 shares	22,301	-
Vanguard	VBK - Vanguard Small Cap Growth	63 shares	-	8,070
Vanguard	VBR - Vanguard Small Cap Value	106 shares	-	11,550
Vanguard	BND - Vanguard Total Bond Market	738 shares	61,653	-
Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	47 shares	2,492	4,657
American Funds	WMIF - Washington Mutual Investors Fund	75 shares	3,131	
American Funds	AMCAP - AMCAP Fund	28 shares	727	
American Funds	IFA - The Income Fund of America	16 shares	320	
American Funds	BFA - The Bond Fund of America	57 shares	735	
American Funds	AMBAL - American Balanced Fund	157 shares	3,880	
American Funds	EUPAC - EuroPacific Growth Fund	17 shares	753	
American Funds	AHIT - American High-Income Trust	139 shares	1,323	
American Funds	STBF - Short-Term Bond Fund of America	8 shares	80	
American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	300 shares	3,462	
American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	5,235 shares	64,402	
American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	4,453 shares	56,776	
American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	3,999 shares	51,187	
American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	27 shares	-	370
American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	740 shares	9,471	
American Funds	AFTD55 - American Funds 2055 Target Date Retirement Fund	63 shares	993	
American Funds	MMF - Money Market Fund	80 shares	80	
American Funds	PSB - American Funds Balanced Portfolio	85 shares	1,138	
	Participant Loan 4-6%			
		Total	**600,069**	**263,253**

See Independent Auditors' Report

LUCENT HOME HEALTH, LLC 401(K) PROFIT SHARING PLAN
Schedule H, line 4i - Schedule of Assets (Acquired and Disposed of Within Year)
December 31, 2015

(a) Indentity of issuer, borrower, lessor, or similar party	(b) Description of investment , including maturity data, rate of interest, collateral, par , or maturity value		(c) Cost of acquisitions	(d) Proceeds of dispositions
Cash:				
LPL Financial	Cash		208,773	181,837
Equities & Options:				
JP Morgan	JP Morgan Chase Alerian	68 shares	2,289	-
Mutual Funds:				
SPDR	XLY - Consumer Discretionary Select	69 shares	5,009	-
Deutsche Asset Mgmt	DBEM - Duetsche X Trackers MCSI Emerging Markets	415 shares	8,026	-
Deutsche Asset Mgmt	DBEF - Duetsche X Trackers MCSI EAFE	790 shares	20,929	-
Ishares	TIP - Ishares TIP	58 shares	6,465	-
Ishares	FLOT - Ishares Floating Rate Bond	126 shares	6,368	-
	EFA - Ishares MSCI	38 shares	-	2,358
	EEM - Ishares Emerging Markets	28 shares	-	1,136
Ishares	FM - Ishares MSCI Frontier	250 shares	6,665	-
Ishares	IBB - Ishares NASDAQ Biotechnology	6 shares	2,008	-
Ishares	DVY - Ishares Select Dividend	66 shares	4,753	-
Powershares	PCY - Powershares Emerging Markets Sovereign	156 shares	4,208	-
Powershares	BKLN - Powershares Senior Loan Port	145 shares	3,203	1,783
SPDR	XLE - Sector Energy Select	42 shares	2,782	-
SPDR	XLF - Sector Financial Select	305 shares	6,876	-
SPDR	XLK - Sector Technology Select	159 shares	6,331	-
SPDR	SJNK - SPDR Barclays Cap Short Term HY Bond	263 shares	7,065	-
SPDR	XHS - SPDR S&P Healthcare	78 shares	4,631	-
SPDR	KRE - SPDR S&P Regional Banking	170 shares	6,768	-
SPDR	SPY - SPDR S&P 500	198 shares	38,918	-
SPDR	XHB - SPDR Series Trust S&P Homebuilders	128 shares	4,594	-
Vanguard	VHT - Vanguard Health Care	32 shares	4,192	-
Vanguard	VCIT - Vanguard Intermediate Term Corp	118 shares	10,197	-
Vanguard	VNQ - Vanguard REIT Index	26 shares	2,077	-
Vanguard	VCSH - Vanguard Short Term Corp Bond	193 shares	15,392	-
Vanguard	VBK - Vanguard Small Cap Growth	56 shares	6,862	-
Vanguard	VBR - Vanguard Small Cap Value	90 shares	9,062	-
Wisdomtree Investments	DFE - Wisdomtree Europe Small Cap Dividend	169 shares	9,296	-
American Funds	WMIF - Washington Mutual Investors Fund	64 shares	2,569	-
American Funds	AMCAP - AMCAP Fund	27 shares	775	-
American Funds	IFA - The Income Fund of America	16 shares	342	-
American Funds	BFA - The Bond Fund of America	60 shares	775	-
American Funds	AMBAL - American Balanced Fund	221 shares	5,406	-
American Funds	EUPAC - EuroPacific Growth Fund	4 shares	216	-
American Funds	AHIT - American High-Income Trust	126 shares	1,379	-
American Funds	STBF - Short-Term Bond Fund of America	8 shares	85	-
American Funds	AFTD20 - American Funds 2020 Target Date Retirement Fund	118 shares	1,396	-
American Funds	AFTD25 - American Funds 2025 Target Date Retirement Fund	4,477 shares	55,924	-
American Funds	AFTD30 - American Funds 2030 Target Date Retirement Fund	3,573 shares	46,629	-
American Funds	AFTD35 - American Funds 2035 Target Date Retirement Fund	2,387 shares	31,994	-
American Funds	AFTD40 - American Funds 2040 Target Date Retirement Fund	0 shares	-	8
American Funds	AFTD45 - American Funds 2045 Target Date Retirement Fund	965 shares	12,649	-
American Funds	MMF - Money Market Fund	86 shares	86	-
American Funds	PSB - American Funds Balanced Portfolio	88 shares	1,207	-
	Participant Loan 4-6%			
		Total	**575,171**	**187,122**

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