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
- [X] 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
PRESSED JUICERY INC 401(K) PROFIT SHARING PLAN & TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2012

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)
PRESSED JUICERY LLC

1550 17TH ST
SANTA MONICA, CA 90404-3402

2b Employer Identification Number (EIN) 27-3092174

2c Plan Sponsor's telephone number 310-477-7171

2d Business code (see instructions) 423990

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.	11/01/2017	AMANDA BAKER
	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 PRESSED JUICERY LLC	**4c**	PN
5	Total number of participants at the beginning of the plan year	**5**	309
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)**	315
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	378
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	6
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	384
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	384
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	21
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2A 2E 2F 2G 2J 2T 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)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

(1)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[ ]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan	**B** Three-digit plan number (PN) ▶
PRESSED JUICERY INC 401(K) PROFIT SHARING PLAN & TRUST	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
PRESSED JUICERY LLC	27-3092174

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

PAYCHEX SECURITIES CORPORATION
225 KENNETH DRIVE
ROCHESTER, NY 14623

16-1486352

(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)

(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 ☐

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

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(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 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
PRESSED JUICERY INC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PRESSED JUICERY LLC

D Employer Identification Number (EIN)
27-3092174

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	708	1593
(2) U.S. Government securities	1c(2)	0	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	
(B) All other	1c(3)(B)	0	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	
(B) Common	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)	0	
(6) Real estate (other than employer real property)	1c(6)	0	
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans	1c(8)	1071	875
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	40434	299267
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	
	(2) Employer real property	1d(2)	0	
e	Buildings and other property used in plan operation	1e	0	
f	Total assets (add all amounts in lines 1a through 1e)	1f	42213	301735
	Liabilities			
g	Benefit claims payable	1g	0	
h	Operating payables	1h	0	
i	Acquisition indebtedness	1i	0	
j	Other liabilities	1j	0	
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	42213	301735

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)	0	
	(B) Participants	2a(1)(B)	99260	
	(C) Others (including rollovers)	2a(1)(C)	154385	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		253645
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2	
	(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)	35	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		37
	(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)	7036	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		7036
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(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)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		18313
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		279031
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	9663	
(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)		9663
f Corrective distributions (see instructions)	2f		6661
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	3185	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		3185
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		19509
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		259522
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: BDO USA **(2)** EIN: 13-5381590

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		20000
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
PRESSED JUICERY INC 401(K) PROFIT SHARING PLAN & TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PRESSED JUICERY LLC

D Employer Identification Number (EIN)
27-3092174

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**

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): 16-1470238

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 _____/_____/_____.

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements and Supplemental Schedule

As of December 31, 2016 and 2015 and for the Year Ended December 31, 2016

The report accompanying these financial statements was issued by

BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee.



Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements
and Supplemental Schedule
As of December 31, 2016 and 2015 and for the
Year Ended December 31, 2016

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

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Note: Schedules other than those listed above have been omitted because they are not applicable or are not required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

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Suite 400
San Diego, CA 92130

Independent Auditor's Report

The Plan Administrator
Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust
Santa Monica, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, the related statement of changes in net assets available for 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.

Auditor's Responsibility

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

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 7, which was certified by Mid Atlantic Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2016 and 2015, that the information provided to the Plan administrator by the trustee is complete and accurate.

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

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 audit opinions on the financial statements. Accordingly, we do not express an opinion on these financial statements.

Other Matters

The supplemental Schedule H, Line 4i- Schedule of Assets (Held at End of Year) as of December 31, 2016 is required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is 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 the supplemental schedule.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, 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.

BDO USA, LLP

San Diego, California
October 12, 2017

Financial Statements

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Statements of Net Assets Available for Benefits

December 31,	2016	2015
Assets		
Investments, at fair value	$ 300,860	$ 41,142
Notes receivable from participants	875	1,071
Total assets	301,735	42,213
Liabilities		
Corrective distributions payable	18,867	6,870
Net assets available for benefits	$ 282,868	$ 35,343

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2016

Changes to net assets attributed to		
Investment income:		
Net appreciation in fair value investments	$	18,313
Interest and dividends on investments		7,038
Total net investment income		25,351
Interest from notes receivable from participants		35
Contributions:		
Participant contributions		99,260
Rollovers		154,385
Total contributions		253,645
Distributions:		
Benefits paid to participants		9,663
Corrective distributions		18,658
Administrative expenses		3,185
Total distributions		31,506
Net increase in net assets available for benefits		247,525
Net assets available for benefits, beginning of year		35,343
Net assets available for benefits, end of year	$	282,868

See accompanying notes to financial statements

1. Description of Plan

The following description of the Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust (the "Plan") provides general information only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan was established on January 1, 2012 as a defined contribution plan. The Plan covers all full-time employees of Pressed Juicery, LLC (the "Company" or "Plan Sponsor") who are not in an ineligible class of employees, as defined in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Eligibility

Employees are eligible to participate in the Plan upon completing three months of service following the employee's employment commencement date and attaining age 21.

Contributions

Participants may contribute pre-tax or Roth contributions up to 100% of their compensation, as defined in the Plan, but no more than the maximum annual limit as determined by the Internal Revenue Code. Participants have the option to elect to stop contributing to the Plan at any time.

The Company has the option to contribute an employer profit sharing contribution. Additional discretionary amounts may be contributed at the option of the Company. In order to qualify to receive the profit sharing or discretionary contribution, participants must complete a year of service, which is defined as 1,000 hours of service during the Plan year. During the year ended December 31, 2016, the Company did not make a profit sharing contribution or discretionary contribution to the Plan.

Rollover Contributions

Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Participant Accounts

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

Vesting

Participants are immediately vested in their voluntary contributions and rollovers, plus actual earnings or losses thereon. Vesting in employer discretionary non-elective contributions is based on years of service as follows: 20% after two years of service; 40% after three years of service; 60% after four years of service; 80% after five years of service and 100% after six years of service.

Payment of Benefits

Participants are eligible to receive a lump-sum distribution of benefits upon termination of employment, death, disability, retirement or Plan termination.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of $1,000 up to the maximum of $50,000 or 50% of the participant's vested account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the participant loans fund. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Interest rates were 4.25% during the years ended December 31, 2016, and 2015. Principal and interest is paid ratably through payroll deductions.

Forfeitures

Forfeited balances of terminated participants' non-vested accounts will be allocated to pay Plan expenses and used to reduce future employer contributions. There were no forfeitures available to reduce future employer contributions at December 31, 2016 and 2015.

Investment Options

As of December 31, 2016 and 2015, Mid Atlantic Trust Company as Trustee ("Mid Atlantic" or "Trustee") under a trust agreement holds the assets of the Plan, including all contributions and earnings thereon. Upon enrollment in the Plan, participants may direct contributions in any of several investment options.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

Accounting Estimates

The Plan administrator uses estimates and assumptions in preparing the Plan's financial statements in accordance with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported changes in net assets. Actual results could materially differ from the estimates that were used.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value as certified by Mid Atlantic Trust Company as of December 31, 2016 and 2015. 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 measurements date. See Note 6 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued interest. Delinquent participant notes receivable are reclassified as distributions based upon the terms of the Plan document. Interest income is recorded on the accrual basis.

Risks and Uncertainties

Investments are exposed to various risks, such as interest rate, market fluctuation and credit. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks in the near term could materially affect the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

The Plan invests in investment options that invest in securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid and their prices more volatile than those of securities of comparable U.S. companies.

Plan Expenses

The Company sponsors the Plan. Personnel within the Company perform various administrative services for the Plan. The payroll and related overhead costs associated with these services are not included as Plan expenses. Most administrative expenses of the Plan, including recordkeeping, consulting, investment, legal, and audit fees, are paid by the Company.

Payment of Benefits

Benefits are recorded when paid. As of December 31, 2016, there were no benefit amounts that participants had elected to withdraw which had not been paid.

Recent Accounting Pronouncements

In May 2015, the FASB issued Accounting Standards Update (ASU) No. 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)*. The amendments apply to reporting entities that elect to measure the fair value of an investment using the net asset value per share (or its equivalent) practical expedient. The amendments remove the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value per share practical expedient. The amendments also remove the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. Rather, those disclosures are limited to investments for which the entity has elected to measure the fair value using that practical expedient. The guidance is effective for fiscal years beginning after December 31, 2016, and requires retrospective presentation. Early adoption of ASU 2015-07 is permitted. ASU 2015-07 is not applicable to the Plan as it holds no investments that calculate net asset value per share as of December 31, 2016 and 2015.

In July 2015, the FASB issued Accounting Standards Update 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient*. Part I eliminates the requirements to measure the fair value of fully benefit- responsive investment contracts and provide certain disclosures. Contract value is the only required measure for fully benefit-responsive investment contracts. Part II eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. Part II also simplifies the level of disaggregation of investments that are measured using fair value. Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to disaggregate investments by nature, characteristics and risks. Further, the disclosure of information about fair value measurements shall be provided by general type of plan asset. Part III provides a practical expedient to permit plans to measure its investments and investment related accounts as of a month-end date closest to its fiscal year for a plan with a fiscal year end that does not coincide with the end of a calendar month. The amendments in ASU 2015-12 are effective for reporting periods beginning after December 15, 2016, with early adoption permitted. Parts I and II are to be applied retrospectively and Part III is to be applied prospectively. Parts I and III are not applicable to the Plan. Management has elected to early adopt Part II of ASU 2015-12 as of December 31, 2015.

In January 2016, FASB issued ASU No. 2016-01, *Financial Instruments - Overall (Subtopic 825-10): Recognition and Measurement of Financial Assets and Financial Liabilities*, which addresses certain aspects of recognition, measurement, presentation, and disclosure of financial instruments. The amendments in this ASU are effective for fiscal years beginning after December 15, 2018, and interim periods within fiscal years beginning after December 15, 2019. With certain exceptions, early adoption is not permitted. Plan management is currently evaluating the impact that ASU 2016-01 will have on its financial statements.

Other accounting standards that have been issued or proposed by the FASB or other standard setting bodies are not expected to have a material impact on the Plan's net assets available for benefits, or changes in net assets available for benefits.

3. Income Tax Status

The Plan obtained its latest favorable opinion letter for the prototype standardized profit sharing plan, which the Plan sponsor adopted, dated April 10, 2014 in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that, more likely than not, would not be sustained upon examination by the IRS.

The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2016, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Since the Plan was established on January 1, 2012, there are no tax filings for years prior to 2013.

4. Plan Termination

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

5. Party-In Interest

Certain Plan investments are mutual funds managed by Mid Atlantic Trust Company ("Mid Atlantic"). Paychex, Inc. ("Paychex") provides certain administrative services to the Plan. Mid Atlantic is the trustee of the Plan and Paychex is the recordkeeper; therefore, these transactions qualify as party-in interest transactions as defined by ERISA. Any transactions involving these investments are on the open market at fair value, as outlined in Note 2. Consequently, such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in interest transactions under ERISA.

6. Fair Value Measurements

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

Level Input	*Input Definition*
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 process for similar assets or liabilities in active markets; • Quoted prices for identical or similar assets or liabilities in inactive markets; • Inputs or other than quoted prices that are observable for the asset or liability; • Inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Mutual funds: based on quoted market prices in active markets, of shares held by the Plan at year-end.

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

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

	Assets at Fair Value Measurements			
December 31, 2016	Level 1	Level 2	Level 3	Total
Mutual funds	$ 300,860	$ -	$ -	$ 300,860
Total investments, at fair value	$ 300,860	$ -	$ -	$ 300,860

	Assets at Fair Value Measurements			
December 31, 2015	Level 1	Level 2	Level 3	Total
Mutual funds	$ 41,142	$ -	$ -	$ 41,142
Total investments, at fair value	$ 41,142	$ -	$ -	$ 41,142

The Plan assesses the levels of the investments at each measurement date, and transfers between levels are recognized on the actual date of the event or change in circumstances that caused the transfer in accordance with the Plan's accounting policy regarding the recognition of transfers between levels of the fair value hierarchy. For the year ended December 31, 2016, there were no such transfers.

7. Information Certified by the Trustee (Unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mid Atlantic, as the trustee, has certified that the following data included in the accompanying financial statements and supplemental schedule are complete and accurate.

(a) Investments, as shown in the statements of net Assets available for benefits;

(b) Interest income, dividends, and net appreciation (depreciation) in fair value of mutual funds, as shown in the statement of changes in net assets available for benefits;

(c) Investment information disclosed in Note 6; and

(d) All information included in the Schedule H, Line 4i - Schedule of Assets (Held at End of year) as of December 31, 2016, as shown in the supplemental schedule.

The Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to this certified information, except for comparing such information with the related information included in the financial statements and supplemental schedule.

8. Reconciliation of Financial Statements to Form 5500

The Form 5500, which is filed with the U.S. Department of Labor, has assets and earnings items that differ from the amounts shown on the accompanying statements of net assets available for benefits.

The following are reconciliations of net assets available for benefits, and changes in net assets available for benefits between the financial statements and the Form 5500 as of December 31:

Net Assets Available for Benefits

December 31,	2016	2015
Net assets available for benefits per the financial statements	$ 282,868	$ 35,343
Corrective distributions payable	18,867	6,870
Net assets available for benefits per the Form 5500	**$ 301,735**	$ 42,213

Change in Net Assets Available for Benefits

December 31, 2016	
Net change in net assets available for benefits per the financial statements	$ 247,525
Add: 2016 corrective distributions payable	18,867
Less: 2015 corrective distributions payable	(6,870)
Net increase in net assets available for benefits per the Form 5500	$ 259,522

9. Corrective Distributions Payable

The Internal Revenue Code and the Plan limit the amount certain highly compensated individuals pay contribute based on amounts contributed by lower compensated individuals. The Plan failed certain non-discrimination tests related to these limitations for the year ended December 31, 2016 and 2015. As a result, refunds of excess contributions were required to be paid out to participants in order for the Plan to meet compliance testing requirements. The accompanying statements of net assets available for benefits include corrective distributions payable of $18,867 and $6,870 as of December 31, 2016 and 2015, respectively.

10. Subsequent Events

In accordance with ASC 855, Subsequent Events, the Plan has evaluated subsequent events from the date of the Statement of Net Assets Available for Benefits through October 12, 2017, the date the financial statements were available to be issued. During this period, no material recognizable subsequent events were identified.

Supplemental Schedule

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

EIN: 27-3092174
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment, maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Vanguard	Vanguard Target Retirement 2040 Fund Investor	$ **	$ 181,906
	Vanguard	Vanguard Value Index Fund Admiral	**	10,690
	Vanguard	Vanguard Growth Index Fund Admiral	**	8,612
	Vanguard	Vanguard Mid-Cap Growth Index Fund Investor	**	8,177
	Vanguard	Vanguard Equity Income Admiral	**	7,031
	Vanguard	Vanguard Small Cap Value Index Investor	**	4,908
	Vanguard	Vanguard Global Equity Fund Investor	**	4,725
	T. Rowe Price	T. Rowe Price New Era Fund	**	7,655
	Dimensional Fund Advisors	DFA US Small Cap I	**	4,233
	Federated	Federated Institutional High Yield Bond Fund Institutional	**	3,671
	Vanguard	Vanguard Short-Term Federal Fund Admiral	**	3,566
	Vanguard	Vanguard Total Stock Market Index Fund Admiral	**	3,147
	T. Rowe Price	T. Rowe Price Media and Telecommunications	**	3,126
	Dimensional Fund Advisors	DFA US Large Cap Value Portfolio Institutional Class	**	3,067
	Vanguard	Vanguard Long Term US Treasury Investor	**	2,833
	Vanguard	Vanguard Target Retirement 2030 Investor	**	2,824
	Franklin	Franklin Gold And Precious Metals Advisor	**	2,817
	Vanguard	Vanguard REIT Index Fund Admiral	**	2,755
	T. Rowe Price	T. Rowe Price Financial Services Fund	**	2,720
	American Funds	American Funds Capital World Growth & Income R5	**	2,654
	Dodge & Cox	Dodge & Cox International Stock Fund	**	2,595
	Schwab	Schwab Health Care Fund	**	2,589
	American Century	American Century Zero Coupon 2025 Fund Investor Class	**	2,072
	Vanguard	Vanguard Emerging Markets Stock Index Fund Admiral	**	2,019
	Pear Tree	Pear Tree PanAgora Dynamic Emerging Markets Fund Institutional	**	1,985
	Vanguard	Vanguard Wellesley Income Fund Admiral	**	1,727
	Nationwide	Nationwide Mid Cap Market Index R6	**	1,461
(a)	(b)	(c)	(d)	(e)

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

Identity of issue, borrower, lessor, or similar party	Description of investment, maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Dimensional Fund Advisors	DFA International Core Equity I	**	1,378
Franklin	Franklin Growth Advisor	**	1,336
Dreyfus	Dreyfus Technology Growth I	**	1,323
MFS Utilities	MFS Utilities R4	**	1,016
Vanguard	Vanguard Small Cap Index Admiral	**	880
Delaware Investments	Delaware Corporate Bond Institutional Class	**	876
Vanguard	Vanguard Money Market Reserves Federal	**	835
Fidelity	Fidelity Money Market Trust Retirement Government Money Market II Portfolio	**	758
Fidelity	Fidelity China Region	**	617
American Century	American Century Global Gold Investor	**	608
Mainstay	Mainstay S&P 500 Index I	**	599
T. Rowe Price	T. Rowe Price Science & Technology	**	543
Franklin	Franklin Natural Resources Advisor	**	509
American Funds	American Funds High Income Trust R5	**	486
Oppenheimer	Oppenheimer International Bond Y	**	469
Prudential	Prudential Global Real Estate Z	**	469
American Funds	American Funds Investment Company Of America R5	**	467
Vanguard	Vanguard Total Bond Index Investor	**	453
BlackRock	BlackRock Latin America Fund Institution	**	442
American Funds	American Funds Growth Fund Of America R5	**	434
Vanguard	Vanguard Small Cap Growth Index Investor	**	422
Vanguard	Vanguard Target Retirement 2015 Investor	**	401
American Funds	American Funds Euro-pacific Growth R5	**	372
Vanguard	Vanguard Balanced Index Admiral	**	367
Vanguard	Vanguard Interim Term Treasury Admiral	**	262
Vanguard	Vanguard Target Retirement Income Investor	**	189
Royce	Royce Opportunity Investment	**	145
Virtus	Virtus Ceredex Mid-Cap Value Equity Fund	**	137
Templeton China	Templeton China World Fund Class Advisor	**	133
(a)	(b)	(c)	(d)	(e)

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

	Identity of issue, borrower, lessor, or similar party	Description of investment, maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Vanguard	Vanguard Total Stock Market Index Admiral	**	132
	TIAA-CREF	TIAA-CREF Social Choice Equity Institution Class	**	132
	Vanguard	Vanguard Inflation-Protected Securities Fund Admiral	**	131
	PIMCO	PIMCO Commodity Real Return Strategy Fund Class P	**	130
	Vanguard	Vanguard Target Retirement 2050 Investor	**	129
	Vanguard	Vanguard Lifestrategy Growth Investor	**	128
	Vanguard	Vanguard Balanced Index Investor	**	128
	Vanguard	Vanguard LifeStrategy Moderate Growth Investor	**	127
	Fidelity	Fidelity Total Bond	**	125
	Payden	Payden Emerging Markets Bond Fund Investor Class	**	70
	Vanguard	Vanguard Short Term Bond Index Investor	**	62
	Vanguard	Vanguard Interim Term Investment Grade Bond Admiral	**	61
	BlackRock	BlackRock Global Allocation Fund Institutional	**	7
	American Century	American Century Heritage Investor	**	7
	Total Mutual Funds:			300,860
*	Participant Loans	Participant Loans - Rate 4.25% with maturity through 2020	-	875
				$ 301,735

** Assets are invested with a party-in-interest to the Plan as defined by Section 3(14) of ERISA.*
***Historical cost Information is not required as investments are participant directed.*

***Note**: This schedule was derived from data certified by Mid Atlantic Trust Company, the trustee of the Plan, as complete and accurate*

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements and Supplemental Schedule

As of December 31, 2016 and 2015 and for the Year Ended December 31, 2016

The report accompanying these financial statements was issued by

BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee.



Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Financial Statements
and Supplemental Schedule
As of December 31, 2016 and 2015 and for the
Year Ended December 31, 2016

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

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Note: Schedules other than those listed above have been omitted because they are not applicable or are not required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

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San Diego, CA 92130

Independent Auditor's Report

The Plan Administrator
Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust
Santa Monica, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2016 and 2015, the related statement of changes in net assets available for 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.

Auditor's Responsibility

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

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 7, which was certified by Mid Atlantic Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2016 and 2015, that the information provided to the Plan administrator by the trustee is complete and accurate.

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

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 audit opinions on the financial statements. Accordingly, we do not express an opinion on these financial statements.

Other Matters

The supplemental Schedule H, Line 4i- Schedule of Assets (Held at End of Year) as of December 31, 2016 is required by the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is 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 the supplemental schedule.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, 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.

BDO USA, LLP

San Diego, California
October 12, 2017

Financial Statements

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Statements of Net Assets Available for Benefits

December 31,	2016	2015
Assets		
Investments, at fair value	$ 300,860	$ 41,142
Notes receivable from participants	875	1,071
Total assets	301,735	42,213
Liabilities		
Corrective distributions payable	18,867	6,870
Net assets available for benefits	$ 282,868	$ 35,343

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2016

Changes to net assets attributed to		
Investment income:		
Net appreciation in fair value investments	$	18,313
Interest and dividends on investments		7,038
Total net investment income		25,351
Interest from notes receivable from participants		35
Contributions:		
Participant contributions		99,260
Rollovers		154,385
Total contributions		253,645
Distributions:		
Benefits paid to participants		9,663
Corrective distributions		18,658
Administrative expenses		3,185
Total distributions		31,506
Net increase in net assets available for benefits		247,525
Net assets available for benefits, beginning of year		35,343
Net assets available for benefits, end of year	$	282,868

See accompanying notes to financial statements

1. Description of Plan

The following description of the Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust (the "Plan") provides general information only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan was established on January 1, 2012 as a defined contribution plan. The Plan covers all full-time employees of Pressed Juicery, LLC (the "Company" or "Plan Sponsor") who are not in an ineligible class of employees, as defined in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Eligibility

Employees are eligible to participate in the Plan upon completing three months of service following the employee's employment commencement date and attaining age 21.

Contributions

Participants may contribute pre-tax or Roth contributions up to 100% of their compensation, as defined in the Plan, but no more than the maximum annual limit as determined by the Internal Revenue Code. Participants have the option to elect to stop contributing to the Plan at any time.

The Company has the option to contribute an employer profit sharing contribution. Additional discretionary amounts may be contributed at the option of the Company. In order to qualify to receive the profit sharing or discretionary contribution, participants must complete a year of service, which is defined as 1,000 hours of service during the Plan year. During the year ended December 31, 2016, the Company did not make a profit sharing contribution or discretionary contribution to the Plan.

Rollover Contributions

Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Participant Accounts

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

Vesting

Participants are immediately vested in their voluntary contributions and rollovers, plus actual earnings or losses thereon. Vesting in employer discretionary non-elective contributions is based on years of service as follows: 20% after two years of service; 40% after three years of service; 60% after four years of service; 80% after five years of service and 100% after six years of service.

Payment of Benefits

Participants are eligible to receive a lump-sum distribution of benefits upon termination of employment, death, disability, retirement or Plan termination.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of $1,000 up to the maximum of $50,000 or 50% of the participant's vested account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the participant loans fund. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Interest rates were 4.25% during the years ended December 31, 2016, and 2015. Principal and interest is paid ratably through payroll deductions.

Forfeitures

Forfeited balances of terminated participants' non-vested accounts will be allocated to pay Plan expenses and used to reduce future employer contributions. There were no forfeitures available to reduce future employer contributions at December 31, 2016 and 2015.

Investment Options

As of December 31, 2016 and 2015, Mid Atlantic Trust Company as Trustee ("Mid Atlantic" or "Trustee") under a trust agreement holds the assets of the Plan, including all contributions and earnings thereon. Upon enrollment in the Plan, participants may direct contributions in any of several investment options.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

Accounting Estimates

The Plan administrator uses estimates and assumptions in preparing the Plan's financial statements in accordance with accounting principles generally accepted in the United States of America. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported changes in net assets. Actual results could materially differ from the estimates that were used.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value as certified by Mid Atlantic Trust Company as of December 31, 2016 and 2015. 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 measurements date. See Note 6 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued interest. Delinquent participant notes receivable are reclassified as distributions based upon the terms of the Plan document. Interest income is recorded on the accrual basis.

Risks and Uncertainties

Investments are exposed to various risks, such as interest rate, market fluctuation and credit. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks in the near term could materially affect the amounts reported in the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

The Plan invests in investment options that invest in securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid and their prices more volatile than those of securities of comparable U.S. companies.

Plan Expenses

The Company sponsors the Plan. Personnel within the Company perform various administrative services for the Plan. The payroll and related overhead costs associated with these services are not included as Plan expenses. Most administrative expenses of the Plan, including recordkeeping, consulting, investment, legal, and audit fees, are paid by the Company.

Payment of Benefits

Benefits are recorded when paid. As of December 31, 2016, there were no benefit amounts that participants had elected to withdraw which had not been paid.

Recent Accounting Pronouncements

In May 2015, the FASB issued Accounting Standards Update (ASU) No. 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)*. The amendments apply to reporting entities that elect to measure the fair value of an investment using the net asset value per share (or its equivalent) practical expedient. The amendments remove the requirement to categorize within the fair value hierarchy all investments for which fair value is measured using the net asset value per share practical expedient. The amendments also remove the requirement to make certain disclosures for all investments that are eligible to be measured at fair value using the net asset value per share practical expedient. Rather, those disclosures are limited to investments for which the entity has elected to measure the fair value using that practical expedient. The guidance is effective for fiscal years beginning after December 31, 2016, and requires retrospective presentation. Early adoption of ASU 2015-07 is permitted. ASU 2015-07 is not applicable to the Plan as it holds no investments that calculate net asset value per share as of December 31, 2016 and 2015.

In July 2015, the FASB issued Accounting Standards Update 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient*. Part I eliminates the requirements to measure the fair value of fully benefit- responsive investment contracts and provide certain disclosures. Contract value is the only required measure for fully benefit-responsive investment contracts. Part II eliminates the requirements to disclose individual investments that represent 5 percent or more of net assets available for benefits and the net appreciation or depreciation in fair value of investments by general type. Part II also simplifies the level of disaggregation of investments that are measured using fair value. Plans will continue to disaggregate investments that are measured using fair value by general type; however, plans are no longer required to disaggregate investments by nature, characteristics and risks. Further, the disclosure of information about fair value measurements shall be provided by general type of plan asset. Part III provides a practical expedient to permit plans to measure its investments and investment related accounts as of a month-end date closest to its fiscal year for a plan with a fiscal year end that does not coincide with the end of a calendar month. The amendments in ASU 2015-12 are effective for reporting periods beginning after December 15, 2016, with early adoption permitted. Parts I and II are to be applied retrospectively and Part III is to be applied prospectively. Parts I and III are not applicable to the Plan. Management has elected to early adopt Part II of ASU 2015-12 as of December 31, 2015.

In January 2016, FASB issued ASU No. 2016-01, *Financial Instruments - Overall (Subtopic 825-10): Recognition and Measurement of Financial Assets and Financial Liabilities*, which addresses certain aspects of recognition, measurement, presentation, and disclosure of financial instruments. The amendments in this ASU are effective for fiscal years beginning after December 15, 2018, and interim periods within fiscal years beginning after December 15, 2019. With certain exceptions, early adoption is not permitted. Plan management is currently evaluating the impact that ASU 2016-01 will have on its financial statements.

Other accounting standards that have been issued or proposed by the FASB or other standard setting bodies are not expected to have a material impact on the Plan's net assets available for benefits, or changes in net assets available for benefits.

3. Income Tax Status

The Plan obtained its latest favorable opinion letter for the prototype standardized profit sharing plan, which the Plan sponsor adopted, dated April 10, 2014 in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that, more likely than not, would not be sustained upon examination by the IRS.

The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2016, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Since the Plan was established on January 1, 2012, there are no tax filings for years prior to 2013.

4. Plan Termination

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

5. Party-In Interest

Certain Plan investments are mutual funds managed by Mid Atlantic Trust Company ("Mid Atlantic"). Paychex, Inc. ("Paychex") provides certain administrative services to the Plan. Mid Atlantic is the trustee of the Plan and Paychex is the recordkeeper; therefore, these transactions qualify as party-in interest transactions as defined by ERISA. Any transactions involving these investments are on the open market at fair value, as outlined in Note 2. Consequently, such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in interest transactions under ERISA.

6. Fair Value Measurements

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

Level Input	*Input Definition*
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 process for similar assets or liabilities in active markets; • Quoted prices for identical or similar assets or liabilities in inactive markets; • Inputs or other than quoted prices that are observable for the asset or liability; • Inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Mutual funds: based on quoted market prices in active markets, of shares held by the Plan at year-end.

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

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

	Assets at Fair Value Measurements			
December 31, 2016	Level 1	Level 2	Level 3	Total
Mutual funds	$ 300,860	$ -	$ -	$ 300,860
Total investments, at fair value	$ 300,860	$ -	$ -	$ 300,860

	Assets at Fair Value Measurements			
December 31, 2015	Level 1	Level 2	Level 3	Total
Mutual funds	$ 41,142	$ -	$ -	$ 41,142
Total investments, at fair value	$ 41,142	$ -	$ -	$ 41,142

The Plan assesses the levels of the investments at each measurement date, and transfers between levels are recognized on the actual date of the event or change in circumstances that caused the transfer in accordance with the Plan's accounting policy regarding the recognition of transfers between levels of the fair value hierarchy. For the year ended December 31, 2016, there were no such transfers.

7. Information Certified by the Trustee (Unaudited)

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mid Atlantic, as the trustee, has certified that the following data included in the accompanying financial statements and supplemental schedule are complete and accurate.

(a) Investments, as shown in the statements of net Assets available for benefits;

(b) Interest income, dividends, and net appreciation (depreciation) in fair value of mutual funds, as shown in the statement of changes in net assets available for benefits;

(c) Investment information disclosed in Note 6; and

(d) All information included in the Schedule H, Line 4i - Schedule of Assets (Held at End of year) as of December 31, 2016, as shown in the supplemental schedule.

The Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to this certified information, except for comparing such information with the related information included in the financial statements and supplemental schedule.

8. Reconciliation of Financial Statements to Form 5500

The Form 5500, which is filed with the U.S. Department of Labor, has assets and earnings items that differ from the amounts shown on the accompanying statements of net assets available for benefits.

The following are reconciliations of net assets available for benefits, and changes in net assets available for benefits between the financial statements and the Form 5500 as of December 31:

Net Assets Available for Benefits

December 31,	2016	2015
Net assets available for benefits per the financial statements	$ 282,868	$ 35,343
Corrective distributions payable	18,867	6,870
Net assets available for benefits per the Form 5500	**$ 301,735**	$ 42,213

Change in Net Assets Available for Benefits

December 31, 2016	
Net change in net assets available for benefits per the financial statements	$ 247,525
Add: 2016 corrective distributions payable	18,867
Less: 2015 corrective distributions payable	(6,870)
Net increase in net assets available for benefits per the Form 5500	$ 259,522

9. Corrective Distributions Payable

The Internal Revenue Code and the Plan limit the amount certain highly compensated individuals pay contribute based on amounts contributed by lower compensated individuals. The Plan failed certain non-discrimination tests related to these limitations for the year ended December 31, 2016 and 2015. As a result, refunds of excess contributions were required to be paid out to participants in order for the Plan to meet compliance testing requirements. The accompanying statements of net assets available for benefits include corrective distributions payable of $18,867 and $6,870 as of December 31, 2016 and 2015, respectively.

10. Subsequent Events

In accordance with ASC 855, Subsequent Events, the Plan has evaluated subsequent events from the date of the Statement of Net Assets Available for Benefits through October 12, 2017, the date the financial statements were available to be issued. During this period, no material recognizable subsequent events were identified.

Supplemental Schedule

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

EIN: 27-3092174
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment, maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	Vanguard	Vanguard Target Retirement 2040 Fund Investor	$ **	$ 181,906
	Vanguard	Vanguard Value Index Fund Admiral	**	10,690
	Vanguard	Vanguard Growth Index Fund Admiral	**	8,612
	Vanguard	Vanguard Mid-Cap Growth Index Fund Investor	**	8,177
	Vanguard	Vanguard Equity Income Admiral	**	7,031
	Vanguard	Vanguard Small Cap Value Index Investor	**	4,908
	Vanguard	Vanguard Global Equity Fund Investor	**	4,725
	T. Rowe Price	T. Rowe Price New Era Fund	**	7,655
	Dimensional Fund Advisors	DFA US Small Cap I	**	4,233
	Federated	Federated Institutional High Yield Bond Fund Institutional	**	3,671
	Vanguard	Vanguard Short-Term Federal Fund Admiral	**	3,566
	Vanguard	Vanguard Total Stock Market Index Fund Admiral	**	3,147
	T. Rowe Price	T. Rowe Price Media and Telecommunications	**	3,126
	Dimensional Fund Advisors	DFA US Large Cap Value Portfolio Institutional Class	**	3,067
	Vanguard	Vanguard Long Term US Treasury Investor	**	2,833
	Vanguard	Vanguard Target Retirement 2030 Investor	**	2,824
	Franklin	Franklin Gold And Precious Metals Advisor	**	2,817
	Vanguard	Vanguard REIT Index Fund Admiral	**	2,755
	T. Rowe Price	T. Rowe Price Financial Services Fund	**	2,720
	American Funds	American Funds Capital World Growth & Income R5	**	2,654
	Dodge & Cox	Dodge & Cox International Stock Fund	**	2,595
	Schwab	Schwab Health Care Fund	**	2,589
	American Century	American Century Zero Coupon 2025 Fund Investor Class	**	2,072
	Vanguard	Vanguard Emerging Markets Stock Index Fund Admiral	**	2,019
	Pear Tree	Pear Tree PanAgora Dynamic Emerging Markets Fund Institutional	**	1,985
	Vanguard	Vanguard Wellesley Income Fund Admiral	**	1,727
	Nationwide	Nationwide Mid Cap Market Index R6	**	1,461
(a)	(b)	(c)	(d)	(e)

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

Identity of issue, borrower, lessor, or similar party	Description of investment, maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Dimensional Fund Advisors	DFA International Core Equity I	**	1,378
Franklin	Franklin Growth Advisor	**	1,336
Dreyfus	Dreyfus Technology Growth I	**	1,323
MFS Utilities	MFS Utilities R4	**	1,016
Vanguard	Vanguard Small Cap Index Admiral	**	880
Delaware Investments	Delaware Corporate Bond Institutional Class	**	876
Vanguard	Vanguard Money Market Reserves Federal	**	835
Fidelity	Fidelity Money Market Trust Retirement Government Money Market II Portfolio	**	758
Fidelity	Fidelity China Region	**	617
American Century	American Century Global Gold Investor	**	608
Mainstay	Mainstay S&P 500 Index I	**	599
T. Rowe Price	T. Rowe Price Science & Technology	**	543
Franklin	Franklin Natural Resources Advisor	**	509
American Funds	American Funds High Income Trust R5	**	486
Oppenheimer	Oppenheimer International Bond Y	**	469
Prudential	Prudential Global Real Estate Z	**	469
American Funds	American Funds Investment Company Of America R5	**	467
Vanguard	Vanguard Total Bond Index Investor	**	453
BlackRock	BlackRock Latin America Fund Institution	**	442
American Funds	American Funds Growth Fund Of America R5	**	434
Vanguard	Vanguard Small Cap Growth Index Investor	**	422
Vanguard	Vanguard Target Retirement 2015 Investor	**	401
American Funds	American Funds Euro-pacific Growth R5	**	372
Vanguard	Vanguard Balanced Index Admiral	**	367
Vanguard	Vanguard Interim Term Treasury Admiral	**	262
Vanguard	Vanguard Target Retirement Income Investor	**	189
Royce	Royce Opportunity Investment	**	145
Virtus	Virtus Ceredex Mid-Cap Value Equity Fund	**	137
Templeton China	Templeton China World Fund Class Advisor	**	133
(a)	(b)	(c)	(d)	(e)

Pressed Juicery, LLC 401(k) Profit Sharing Plan and Trust

Form 5500 - Schedule H - Line 4i - Schedule of Assets (Held at End of Year) December 31, 2016

	Identity of issue, borrower, lessor, or similar party	Description of investment, maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Vanguard	Vanguard Total Stock Market Index Admiral	**	132
	TIAA-CREF	TIAA-CREF Social Choice Equity Institution Class	**	132
	Vanguard	Vanguard Inflation-Protected Securities Fund Admiral	**	131
	PIMCO	PIMCO Commodity Real Return Strategy Fund Class P	**	130
	Vanguard	Vanguard Target Retirement 2050 Investor	**	129
	Vanguard	Vanguard Lifestrategy Growth Investor	**	128
	Vanguard	Vanguard Balanced Index Investor	**	128
	Vanguard	Vanguard LifeStrategy Moderate Growth Investor	**	127
	Fidelity	Fidelity Total Bond	**	125
	Payden	Payden Emerging Markets Bond Fund Investor Class	**	70
	Vanguard	Vanguard Short Term Bond Index Investor	**	62
	Vanguard	Vanguard Interim Term Investment Grade Bond Admiral	**	61
	BlackRock	BlackRock Global Allocation Fund Institutional	**	7
	American Century	American Century Heritage Investor	**	7
	Total Mutual Funds:			300,860
*	Participant Loans	Participant Loans - Rate 4.25% with maturity through 2020	-	875
				$ 301,735

** Assets are invested with a party-in-interest to the Plan as defined by Section 3(14) of ERISA.*
***Historical cost Information is not required as investments are participant directed.*

***Note**: This schedule was derived from data certified by Mid Atlantic Trust Company, the trustee of the Plan, as complete and accurate*