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
SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1961

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)
SEYMOUR OF SYCAMORE, INC.

917 CROSBY AVENUE
SYCAMORE, IL 60178

2b Employer Identification Number (EIN) 36-2127718

2c Plan Sponsor's telephone number 815-895-9101

2d Business code (see instructions) 325500

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.	01/11/2018	TIMOTHY NELSON
	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 ☐ Same as Plan Sponsor

SEYMOUR OF SYCAMORE, INC.

917 CROSBY AVENUE
SYCAMORE, IL 60178

3b Administrator's EIN: 36-2127718

3c Administrator's telephone number: 815-895-9101

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	211
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)**	146
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	156
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	66
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	222
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	
f	Total. Add lines **6d** and **6e**.	**6f**	222
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	219
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	4
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2H 2J

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

b General Schedules

(1)	X	**H** (Financial Information)
(2)	☐	**I** (Financial Information – Small Plan)
(3)	☐	**A** (Insurance Information)
(4)	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
SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SEYMOUR OF SYCAMORE, INC.

D Employer Identification Number (EIN)
36-2127718

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). . . . . ☐ Yes ☒ No

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

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

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

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

T. ROWE PRICE RPS INC

100 EAST PRATT STREET
BALTIMORE, MD 21202

52-1714114

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 28 37 49 50 28 59 62 64 65	RECORD KEEPER	7331	Yes [X] No [ ]	Yes [X] No [ ]		Yes [ ] No [X]

(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

(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: LEO J. KRUPP & COMPANY, LLC
b EIN: 47-4039697
c Position: ACCOUNTANT
d Address: 1460 RENAISSANCE DR STE 200
PARK RIDGE, IL 60068
e Telephone: 847-699-8455

Explanation: ACCOUNTANT CEASED OPERATIONS

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
SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SEYMOUR OF SYCAMORE, INC.

D Employer Identification Number (EIN)
36-2127718

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	158142	154029
(2) Participant contributions	1b(2)	59281	17444
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	247627	227553
(9) Value of interest in common/collective trusts	1c(9)		0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	14043668	14374605
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	14508718	14773631
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k		
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	14508718	14773631

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)	359929	
	(B) Participants	2a(1)(B)	284528	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		644457
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(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)	24957	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		24957
	(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)	524419	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		524419
	(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)		
	(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)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		155785
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1349618
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1077374	
(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)		1077374
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	7331	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		7331
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1084705
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		264913
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] Unqualified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: PAGLIUCO OPALACZ & ASSOCIATES PC **(2)** EIN: 75-3079509

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		14860
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n		X	
o	Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?	4o		X	

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

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

FINANCIAL STATEMENTS

Years Ended December 31, 2016 and 2015

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INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST:

Report on the Financial Statements

We have audited the accompanying financial statements of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust, which comprise the statements of net assets available for benefits as of December 31, 2016, and the related statements of changes in net assets available for benefits for the year 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 our audits. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust as of December 31, 2016, and the changes in its net assets available for benefits for the year ended December 31, 2016, in accordance with accounting principles generally accepted in the United States of America.

Other Matter – Supplemental Schedule

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Schedule H, Line 4a – Schedule of Delinquent Participant Contributions, and Schedule H, Line 4i – Schedule of Assets (Held at End of Year), as of or for the year ended December 31, 2016, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Other Matter – 2015 Financial Statements

The financial statements of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust as of and for the year December 31, 2015, were audited by other auditors whose report dated August 9, 2016, expressed an unmodified opinion on those statements.

Pagliuco Ozalas & Associates, P.C.

December 11, 2017

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2016 AND 2015

	2016		
	Total	Participant Directed	Non-Participant Directed
ASSETS:			
INVESTMENTS AT FAIR VALUE	$14,374,605	$8,399,736	$5,974,869
RECEIVABLES:			
Employer contributions	154,029	9,029	145,000
Participant contributions	17,444	17,444	-
Notes receivable from participants	227,553	227,553	-
Total receivables	399,026	254,026	145,000
TOTAL ASSETS	14,773,631	8,653,762	6,119,869
LIABILITIES	-	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$14,773,631	$8,653,762	$6,119,869

	2015		
	Total	Participant Directed	Non-Participant Directed
ASSETS:			
INVESTMENTS AT FAIR VALUE	$14,043,668	$7,870,439	$6,173,229
RECEIVABLES:			
Employer contributions	158,142	28,142	130,000
Participant contributions	59,281	59,281	-
Notes receivable from participants	247,627	247,627	-
Total receivables	465,050	335,050	130,000
TOTAL ASSETS	14,508,718	8,205,489	6,303,229
LIABILITIES	-	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$14,508,718	$8,205,489	$6,303,229

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

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEAR ENDED DECEMBER 31, 2016

ADDITIONS:	
Investment Income:	
Net appreciation in fair value of investments	$ 155,785
Interest and dividends	524,419
Interest on notes receivable from participants	24,957
	705,161
Contributions:	
Participants	284,528
Employer	359,929
	644,457
TOTAL ADDITIONS	1,349,618
DEDUCTIONS:	
Benefits paid to participants	1,077,374
Administrative expenses and other fees (net)	7,331
TOTAL DEDUCTIONS	1,084,705
NET INCREASE	264,913
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	14,508,718
End of year	$14,733,631

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

Note:

1. DESCRIPTION OF THE PLAN:

The following description of the Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust (the Plan) provides only general information. Reference should be made to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is sponsored and administered by Seymour of Sycamore, Inc. (the Company). The Plan was established July 1, 1961. The purpose of the Plan is to allow eligible employees to accumulate funds on a tax-deferred basis, thereby promoting future retirement security.

The Plan a defined contribution plan covering all full-time employees of the Company who have met certain service and age requirements. Each participant has a separate account to which employer contributions, individual participant contributions, investment income and loss, and forfeitures are allocated in accordance with Plan provisions. The Plan consists of a 401(k) pay deferral plan with annual discretionary employer matching contributions, as well as provisions for annual Company discretionary profit sharing contributions. All of the Plan's assets are held in a trust fund which is the sole source of all benefit payments. The assets of the trust fund are not commingled with Company assets. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participants may elect to contribute to the Plan a specific percentage or dollar amount of pretax annual compensation as a salary deferral, as defined by the Plan, up to the annual maximum limit established by the Internal Revenue Service. For 2016, the dollar amount is $18,000. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. For 2016, the maximum catch-up contribution is $6,000. A participant may also contribute a rollover contribution subject to approval, provided it represents a balance from a qualified plan under the IRC. The Company makes a matching contribution equal to 100% of each participant's elective deferrals up to 3% of that participant's annual compensation. Participant contributions and Company matching contributions are participant directed and are invested into various investment options offered by the Plan.

The Company may make discretionary profit sharing contributions to the Plan for the benefit of the participants. Contributions are limited to the amount deductible under the Internal Revenue Code. These contributions and earnings thereon are considered non-participant directed as the Plan management decides where to invest the contributions.

Note:

1. **DESCRIPTION OF THE PLAN (Continued):**

Participant Accounts

Each participant's account is credited with the participant's contributions, rollovers, the Company's matching and discretionary contributions and an allocation of the Plan's earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, 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 and rollover contributions, plus their actual earnings thereon. Participant directed company matching contributions and non-participant directed company discretionary contributions vest in accordance with the following schedule:

Year of Service	Percent Vested
Less than 1	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Notwithstanding the foregoing, participants shall have a fully vested interest in their employer contribution, deferred and rollover accounts upon death, total and permanent disability, or upon attainment of normal retirement age.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of $1,000 up to a maximum amount equal to the lesser 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 Participants' Loans Receivable Fund. Loans must be repaid within five years, unless the loan is used to acquire a principal residence, in which case the loan may be repaid over a longer term at the Plan Administrator's discretion determined at the time the loan is made. The loans are secured by the balance in the participant's principal account and bear a reasonable rate of interest. The Plan requires that repayments on loan obligation be made by payroll deductions. Loans in default are treated like distributions and may be subject to income and penalty taxes.

Note:

1. DESCRIPTION OF THE PLAN (Continued):

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump sum amount, in annual installments over a period not longer than the participant's life expectancy, or a direct rollover distribution. In-service distributions from a participant's vested account are available to participants over the age of 59½ or in the event of financial hardship, as defined in the Plan.

Forfeitures

Forfeitures are the nonvested amounts left in the Plan by terminating participants. Forfeitures may be used to pay Plan expenses or to reduce amounts otherwise required to be contributed to the Plan. Forfeitures may also be reallocated to remaining participants in the Plan according to Plan documents. The plan administrator directs whether plan expenses are paid before either contributions are offset or forfeitures are re-allocated. During the year ended December 31, 2016, forfeitures amounted to $16,986.

Plan Termination

Although it has not expressed any intent to do so, the Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA and its related regulations. Upon termination of the Plan, participants become 100 percent vested in their account balances and assets will be distributed as described in the Plan document.

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES:

Significant accounting practices and policies followed in the preparation of the accompanying financial statements are as follows:

Method of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reported period. Actual results could differ from those estimates

Note:

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES (continued):

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The specific identification cost basis is used in determining the cost of investments sold.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2016 and 2015.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Net Appreciation (Depreciation) in the Fair Value of Investments

The Plan presents in the statement of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments.

Risks and Uncertainties

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

Note:

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES (continued):

Operating Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from the participants are charged directly to the participant's account and are included in the administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent Events

The Plan has evaluated subsequent events through December 11, 2017, the date the financial statements were available to be issued. Based on the evaluation, no additional material events have occurred requiring disclosure.

3. FAIR VALUE MEASUREMENTS:

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

The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets.

Level 2 Inputs to the valuation methodology include:

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

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

Note:

3. FAIR VALUE MEASUREMENTS (continued):

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 methodologies used for assets measured at fair value:

Investments in Registered Investment Companies: Valued at the daily closing price as reported by the fund.

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

	Fair Value Measurements as of December 31, 2016			
Investments	Level 1	Level 2	Level 3	Total
Registered Investment Companies	$14,374,605	$ -	$ -	$14,374,605

	Fair Value Measurements as of December 31, 2015			
Investments	Level 1	Level 2	Level 3	Total
Registered Investment Companies	$14,043,668	$ -	$ -	$14,043,668

There were no transfers between levels during the years ended December 31, 2016 and 2015.

Note:

4. TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated July 3, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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 for any uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

5. CONCENTRATIONS:

Three investment funds each have an account balance over 10% of the total net assets available for benefits.

6. PARTY-IN-INTEREST TRANSACTIONS:

Parties in interest are defined under Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. All plan investments at December 31, 2016, maintained by the trustee, T.Rowe Price, qualify as party-in-interest investments. Additionally, the plan's third party administrator and plan auditor would also qualify as party-in-interests.

Participants in the Plan are permitted to borrow funds from their vested balance as described in Note 1. These investments qualify as party-in-interest investments. Notes receivable from participants were $227,553 and $247,627 at December 31, 2016 and 2015, respectively.

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

SCHEDULE H, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

DECEMBER 31, 2016

Name of Plan Sponsor: Seymour of Sycamore, Inc.
Employer Identification Number: 36-2127718
Plan Number: 001

December 31, 2016	Total that Constitute Non-exempt Prohibited Transactions			
Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside of VCFP	Contributions Pending Correction in VCFP	Total Fully Corrected Under VCFP and PTE 2002-51
Check Here if Late Participant Loan Repayments are included: ■				
$14,860.39	----	----		$14,860.39

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2016

Name of Plan Sponsor: Seymour of Sycamore, Inc.
Employer Identification Number: 36-2127718
Plan Number: 001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
		Registered Investment Companies		
*	T. Rowe Price	Value Fund	**	$ 347,370
*	T. Rowe Price	International Stock Fund	**	223,807
*	T. Rowe Price	Growth Stock Fund	**	5,610,446
*	T. Rowe Price	New Income Fund	**	1,144,842
*	T. Rowe Price	Prime Reserve Fund	**	380,069
*	T. Rowe Price	Small Cap Stock Fund	**	693,202
*	T. Rowe Price	Spectrum Income	2,318,085	2,351,742
*	T. Rowe Price	Spectrum Growth	3,196,944	3,623,127
		Total investments in Registered Investment Companies		14,374,605
*	Participant loans	Participant notes receivable with interest rates of 4.25 to 4.50 percent	**	227,553
				$14,602,158

* Represents a party in interest to the Plan.
** Investment is participant-directed; therefore, historical cost is not required.

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

FINANCIAL STATEMENTS

Years Ended December 31, 2016 and 2015

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INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST:

Report on the Financial Statements

We have audited the accompanying financial statements of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust, which comprise the statements of net assets available for benefits as of December 31, 2016, and the related statements of changes in net assets available for benefits for the year 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 our audits. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust as of December 31, 2016, and the changes in its net assets available for benefits for the year ended December 31, 2016, in accordance with accounting principles generally accepted in the United States of America.

Other Matter – Supplemental Schedule

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Schedule H, Line 4a – Schedule of Delinquent Participant Contributions, and Schedule H, Line 4i – Schedule of Assets (Held at End of Year), as of or for the year ended December 31, 2016, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Other Matter – 2015 Financial Statements

The financial statements of Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust as of and for the year December 31, 2015, were audited by other auditors whose report dated August 9, 2016, expressed an unmodified opinion on those statements.

Pagliuco Ozalas & Associates, P.C.

December 11, 2017

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2016 AND 2015

	2016		
	Total	Participant Directed	Non-Participant Directed
ASSETS:			
INVESTMENTS AT FAIR VALUE	$14,374,605	$8,399,736	$5,974,869
RECEIVABLES:			
Employer contributions	154,029	9,029	145,000
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LIABILITIES	-	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$14,773,631	$8,653,762	$6,119,869

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LIABILITIES	-	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$14,508,718	$8,205,489	$6,303,229

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

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEAR ENDED DECEMBER 31, 2016

ADDITIONS:	
Investment Income:	
Net appreciation in fair value of investments	$ 155,785
Interest and dividends	524,419
Interest on notes receivable from participants	24,957
	705,161
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TOTAL DEDUCTIONS	1,084,705
NET INCREASE	264,913
NET ASSETS AVAILABLE FOR BENEFITS	
Beginning of year	14,508,718
End of year	$14,733,631

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

Note:

1. DESCRIPTION OF THE PLAN:

The following description of the Seymour of Sycamore, Inc. Employees' Profit Sharing Plan and Trust (the Plan) provides only general information. Reference should be made to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is sponsored and administered by Seymour of Sycamore, Inc. (the Company). The Plan was established July 1, 1961. The purpose of the Plan is to allow eligible employees to accumulate funds on a tax-deferred basis, thereby promoting future retirement security.

The Plan a defined contribution plan covering all full-time employees of the Company who have met certain service and age requirements. Each participant has a separate account to which employer contributions, individual participant contributions, investment income and loss, and forfeitures are allocated in accordance with Plan provisions. The Plan consists of a 401(k) pay deferral plan with annual discretionary employer matching contributions, as well as provisions for annual Company discretionary profit sharing contributions. All of the Plan's assets are held in a trust fund which is the sole source of all benefit payments. The assets of the trust fund are not commingled with Company assets. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participants may elect to contribute to the Plan a specific percentage or dollar amount of pretax annual compensation as a salary deferral, as defined by the Plan, up to the annual maximum limit established by the Internal Revenue Service. For 2016, the dollar amount is $18,000. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. For 2016, the maximum catch-up contribution is $6,000. A participant may also contribute a rollover contribution subject to approval, provided it represents a balance from a qualified plan under the IRC. The Company makes a matching contribution equal to 100% of each participant's elective deferrals up to 3% of that participant's annual compensation. Participant contributions and Company matching contributions are participant directed and are invested into various investment options offered by the Plan.

The Company may make discretionary profit sharing contributions to the Plan for the benefit of the participants. Contributions are limited to the amount deductible under the Internal Revenue Code. These contributions and earnings thereon are considered non-participant directed as the Plan management decides where to invest the contributions.

Note:

1. **DESCRIPTION OF THE PLAN (Continued):**

Participant Accounts

Each participant's account is credited with the participant's contributions, rollovers, the Company's matching and discretionary contributions and an allocation of the Plan's earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, 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 and rollover contributions, plus their actual earnings thereon. Participant directed company matching contributions and non-participant directed company discretionary contributions vest in accordance with the following schedule:

Year of Service	Percent Vested
Less than 1	0%
2	20%
3	40%
4	60%
5	80%
6	100%

Notwithstanding the foregoing, participants shall have a fully vested interest in their employer contribution, deferred and rollover accounts upon death, total and permanent disability, or upon attainment of normal retirement age.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of $1,000 up to a maximum amount equal to the lesser 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 Participants' Loans Receivable Fund. Loans must be repaid within five years, unless the loan is used to acquire a principal residence, in which case the loan may be repaid over a longer term at the Plan Administrator's discretion determined at the time the loan is made. The loans are secured by the balance in the participant's principal account and bear a reasonable rate of interest. The Plan requires that repayments on loan obligation be made by payroll deductions. Loans in default are treated like distributions and may be subject to income and penalty taxes.

Note:

1. DESCRIPTION OF THE PLAN (Continued):

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump sum amount, in annual installments over a period not longer than the participant's life expectancy, or a direct rollover distribution. In-service distributions from a participant's vested account are available to participants over the age of 59½ or in the event of financial hardship, as defined in the Plan.

Forfeitures

Forfeitures are the nonvested amounts left in the Plan by terminating participants. Forfeitures may be used to pay Plan expenses or to reduce amounts otherwise required to be contributed to the Plan. Forfeitures may also be reallocated to remaining participants in the Plan according to Plan documents. The plan administrator directs whether plan expenses are paid before either contributions are offset or forfeitures are re-allocated. During the year ended December 31, 2016, forfeitures amounted to $16,986.

Plan Termination

Although it has not expressed any intent to do so, the Organization has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA and its related regulations. Upon termination of the Plan, participants become 100 percent vested in their account balances and assets will be distributed as described in the Plan document.

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES:

Significant accounting practices and policies followed in the preparation of the accompanying financial statements are as follows:

Method of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reported period. Actual results could differ from those estimates

Note:

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES (continued):

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The specific identification cost basis is used in determining the cost of investments sold.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2016 and 2015.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Net Appreciation (Depreciation) in the Fair Value of Investments

The Plan presents in the statement of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments.

Risks and Uncertainties

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

Note:

2. SIGNIFICANT ACCOUNTING PRACTICES AND POLICIES (continued):

Operating Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from the participants are charged directly to the participant's account and are included in the administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent Events

The Plan has evaluated subsequent events through December 11, 2017, the date the financial statements were available to be issued. Based on the evaluation, no additional material events have occurred requiring disclosure.

3. FAIR VALUE MEASUREMENTS:

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

The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets.

Level 2 Inputs to the valuation methodology include:

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

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

Note:

3. FAIR VALUE MEASUREMENTS (continued):

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 methodologies used for assets measured at fair value:

Investments in Registered Investment Companies: Valued at the daily closing price as reported by the fund.

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

	Fair Value Measurements as of December 31, 2016			
Investments	Level 1	Level 2	Level 3	Total
Registered Investment Companies	$14,374,605	$ -	$ -	$14,374,605

	Fair Value Measurements as of December 31, 2015			
Investments	Level 1	Level 2	Level 3	Total
Registered Investment Companies	$14,043,668	$ -	$ -	$14,043,668

There were no transfers between levels during the years ended December 31, 2016 and 2015.

Note:

4. TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated July 3, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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 for any uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

5. CONCENTRATIONS:

Three investment funds each have an account balance over 10% of the total net assets available for benefits.

6. PARTY-IN-INTEREST TRANSACTIONS:

Parties in interest are defined under Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. All plan investments at December 31, 2016, maintained by the trustee, T.Rowe Price, qualify as party-in-interest investments. Additionally, the plan's third party administrator and plan auditor would also qualify as party-in-interests.

Participants in the Plan are permitted to borrow funds from their vested balance as described in Note 1. These investments qualify as party-in-interest investments. Notes receivable from participants were $227,553 and $247,627 at December 31, 2016 and 2015, respectively.

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

SCHEDULE H, LINE 4a - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

DECEMBER 31, 2016

Name of Plan Sponsor: Seymour of Sycamore, Inc.
Employer Identification Number: 36-2127718
Plan Number: 001

December 31, 2016	Total that Constitute Non-exempt Prohibited Transactions			
Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside of VCFP	Contributions Pending Correction in VCFP	Total Fully Corrected Under VCFP and PTE 2002-51
Check Here if Late Participant Loan Repayments are included: ■				
$14,860.39	----	----		$14,860.39

SEYMOUR OF SYCAMORE, INC. EMPLOYEES' PROFIT SHARING PLAN AND TRUST

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2016

Name of Plan Sponsor: Seymour of Sycamore, Inc.
Employer Identification Number: 36-2127718
Plan Number: 001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
		Registered Investment Companies		
*	T. Rowe Price	Value Fund	**	$ 347,370
*	T. Rowe Price	International Stock Fund	**	223,807
*	T. Rowe Price	Growth Stock Fund	**	5,610,446
*	T. Rowe Price	New Income Fund	**	1,144,842
*	T. Rowe Price	Prime Reserve Fund	**	380,069
*	T. Rowe Price	Small Cap Stock Fund	**	693,202
*	T. Rowe Price	Spectrum Income	2,318,085	2,351,742
*	T. Rowe Price	Spectrum Growth	3,196,944	3,623,127
		Total investments in Registered Investment Companies		14,374,605
*	Participant loans	Participant notes receivable with interest rates of 4.25 to 4.50 percent	**	227,553
				$14,602,158

* Represents a party in interest to the Plan.
** Investment is participant-directed; therefore, historical cost is not required.