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

2017

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
F. GAVINA & SONS, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 04/01/1985

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)

F. GAVINA & SONS, INC.

2700 FRUITLAND AVE
VERNON, CA 90058

2b Employer Identification Number (EIN)
95-2922751

2c Plan Sponsor's telephone number
323-582-0671

2d Business code (see instructions)
311900

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2018	JOSE GAVINA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2018	JOSE GAVINA
	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

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 or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	233
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)**	212
a(2) Total number of active participants at the end of the plan year	**6a(2)**	235
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	31
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	266
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	2
f Total. Add lines **6d** and **6e**.	**6f**	268
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	268
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	5
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 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)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] ___ **A** (Insurance Information)
- **(4)** [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 2017 Form M-1 annual report. If the plan was not required to file the 2017 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.**	**2017** **This Form is Open to Public Inspection.**

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
F. GAVINA & SONS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
F. GAVINA & SONS, INC.

D Employer Identification Number (EIN)
95-2922751

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)

MASSACHUSSETS MUTUAL LIFE INSURANCE

04-1590850

(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 23 37 38 54 55 59 60 62 63 64 65 66 99 50	RECORDKEEPER		Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

SNOWDEN ACCOUNT SVSC INC

94-3467207

(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?
33	BROKER		Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

MORGAN STANLEY SMITH BARNEY LLC

26-4310632

(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?
19 33 49 50 71 72 99	BROKER		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)

MESIROW FINANCIAL INVESTMENT MANAGE

36-3429599

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISORY		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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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)

Department of the Treasury
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

2017

This Form is Open to Public Inspection

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
F. GAVINA & SONS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
F. GAVINA & SONS, INC.

D Employer Identification Number (EIN)
95-2922751

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	9849	10082
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	977924	1093197
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2278425	1953662
(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)	3114244	3669296
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	1306905	1317274
(B) Common	1c(4)(B)	5539658	7200531
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(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)	7186098	9278057
(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	20413103	24522099
	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	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	20413103	24522099

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)	1149662	
	(B) Participants	2a(1)(B)	566731	
	(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)		1716393
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9310	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)	189474	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)	60	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		198844
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	676218	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		676218
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	1757719	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	1685802	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		71917
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	1762486	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		1762486

		(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)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		4425858
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	254323	
(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)		254323
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)		
(3) Investment advisory and management fees	2i(3)	62539	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		62539
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		316862
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4108996
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: WHITE NELSON DIEHL EVANS, LLP **(2)** EIN: 33-0686301

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		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			

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

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.)

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

2017

This Form is Open to Public Inspection.

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan
F. GAVINA & SONS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
F. GAVINA & SONS, INC.

D Employer Identification Number (EIN)
95-2922751

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): _____ _____

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** 9

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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): _____

---

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):

F. GAVIÑA & SONS, INC.
401(k) PROFIT SHARING PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

YEAR ENDED DECEMBER 31, 2017

WITH INDEPENDENT AUDITORS' REPORT

EMPLOYER I.D. NUMBER: 95-2922751
PLAN NUMBER: 002

F. GAVIÑA & SONS, INC.
401(k) PROFIT SHARING PLAN
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INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of
F. Gaviña & Sons, Inc. 401(k) Profit Sharing Plan
Vernon, California

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of F. Gaviña & Sons, Inc. 401(k) Profit Sharing Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2017 and 2016, and the related statement of changes in net assets available for benefits for the year ended December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Mass Mutual Life Insurance Company, the administrative services provider of the Plan as agent for Hartford Life Insurance Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executed investment transactions. The plan administrator has obtained a certification from the agent acting on behalf of the custodian as of December 31, 2017 and 2016, and for the year ended December 31, 2017, that the information provided to the plan administrator by the agent for the custodian is complete and accurate.

2875 Michelle Drive, Suite 300, Irvine, CA 92606 • Tel: 714.978.1300 • Fax: 714.978.7893

Offices located in Orange and San Diego Counties

Disclaimer of Opinion

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

Other Matter

The supplemental schedule, Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2017, is required by the DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule referred to above.

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 agent acting on behalf of the custodian, 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 DOL's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

White Nelson Diehl Evans LLP

Irvine, California
September 27, 2018

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2017 AND 2016

ASSETS

	2017	2016
Investments at Fair Value	$ 23,117,891	$ 19,173,492
Investments at Contract Value	300,929	251,838
Total Investments	23,418,820	19,425,330
Noninterest-bearing Cash	10,082	9,849
Employer Contributions Receivable	1,093,197	977,924
Net Assets Available For Benefits	$ 24,522,099	$ 20,413,103

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

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2017

Additions to Net Assets Attributed to:	
Contributions:	
Participant	$ 566,731
Employer	1,149,662
Total Contributions	1,716,393
Earnings on Investments:	
Dividends	676,218
Interest income	198,844
Net appreciation in fair value of investments	1,834,403
Net Earnings on Investments	2,709,465
Total Additions to Net Assets Available for Benefits	4,425,858
Deductions from Net Assets Attributed to:	
Benefits paid to participants	254,323
Administrative expenses	62,539
Total Deductions from Net Assets Available for Benefits	316,862
Increase in Net Assets Available for Benefits	4,108,996
Net Assets Available for Benefits, December 31, 2016	20,413,103
Net Assets Available for Benefits, December 31, 2017	$ 24,522,099

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

F. GAVIÑA & SONS, INC.
401(k) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2017

Note 1: Description of the Plan

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

General

The Plan is a defined contribution plan that was adopted by F. Gaviña & Sons, Inc. (the "Company" or the "Plan Sponsor") effective April 1, 1985, and is subject to the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA") and the Internal Revenue Code of 1986 ("IRC"), as amended. The purpose of the Plan is to provide retirement benefits for employees who have completed one year of employment and 1,000 hours of service.

Contributions

Participants may elect to contribute to the Plan a portion of their pretax or posttax annual compensation not to exceed the maximum deferral limitation, as defined in the IRC. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions to their 401(k) account. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans into their 401(k) account. Participants direct the investment of their 401(k) contributions into various investment options offered by the Plan. Each Plan year, the Company may make contributions into each participant's profit-sharing account based on net profits of current year or prior years at the discretion of the Board of Directors. For the year ended December 31, 2017, employer contributions to the profit-sharing plan totaled $1,093,197. The Company may also elect to make contributions to each participant's 401(k) account based on the participant's level of contributions each pay period and level in the Company. Managers of the Company receive a $10 employer match each pay period if a $40 contribution is made, and nonmanagers receive a $5 employer match each pay period if a $20 contribution is made. For the year ended December 31, 2017, employer contributions to the 401(k) account totaled $56,465.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution, (b) Plan earnings, and (c) forfeitures of terminated participants' nonvested accounts, and charged with 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.

Note 1: Description of the Plan (Continued)

Vesting

Participants are vested immediately in their contributions, plus actual earnings thereon. Vesting in the Company's discretionary contribution portion of their account, plus actual earnings thereon, is based on years of continuous service. A participant is vested at the rate of 20 percent each year after two years of service and is considered to be 100 percent vested after six years of credited service.

Benefit Payments

Upon termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum distribution equal to the vested portion of his or her account or an annuity over the life of the participant or designated beneficiary, as defined in the Plan document. For termination of service for other reasons, a participant will receive the value of the vested interest in his or her account as a lump-sum distribution. Additionally, under certain circumstances of financial hardship or upon meeting normal retirement age, participants are allowed to withdraw their funds from the Plan.

Forfeitures

Forfeiture of the employee's nonvested portion of the Company's contributions are used to pay Plan expenses or allocated to participants who met the eligibility requirements and are employed on the last day of the Plan year. For the year ended December 31, 2017, the Plan elected to allocate forfeitures totaling $6,304 to eligible participants.

Administrative Expenses

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee received compensation from the Plan. Most investment expenses are paid directly by the Plan, and all other administrative expenses are absorbed by the Plan Sponsor. Certain administrative expenses, such as benefit payment requests, are charged directly to the participant requesting them and are deducted from the applicable participant's account.

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned on a daily basis and are reflected as a component of net appreciation in fair value of investments.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

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

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value (except for the fully benefit-responsive investment contract, which is reported at contract value) at December 31, 2017 and 2016. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 10 for discussion of fair value measurements. Additionally, as further disclosed in Note 11, fair value of the Plan's pooled separate accounts is measured at net asset value per share ("NAV") as a practical expedient.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Capital gains and/or losses are reported the day after the trade date.

Net realized and unrealized appreciation is recorded in the accompanying statement of changes in net assets available for benefits as net appreciation in fair value of investments.

Brokerage fees are added to the acquisition costs of assets purchased and subtracted from the proceeds of assets sold.

Payment of Benefits

Benefits are recorded when paid.

Use of Estimates

The process of preparing financial statements in accordance with accounting principles generally accepted in the United States of America requires the use of estimates and assumptions regarding certain types of assets, liabilities, revenues and gains, and expenses and losses. Such estimates primarily relate to unsettled transactions and events as of the date of the financial statements. Accordingly, upon settlement, actual results may differ from estimated amounts.

Note 3: Concentrations, Risks, and Uncertainties

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

The Plan maintains cash balances, money market accounts, and certificates of deposit at several financial institutions and brokerage firms. Accounts at these institutions are insured by the Federal Deposit Insurance Corporation for up to $250,000, per institution. The Plan regularly maintains cash balances in excess of federally insured limits.

Note 4: Information Prepared and Certified by Agent on Behalf of Custodian

Certain information disclosed in the accompanying financial statements and supplemental schedule, including investments held at December 31, 2017 and 2016, totaling $5,933,398 and $4,525,321, respectively, and net appreciation in fair value of investments of $513,681 and dividends of $310,451 for the year ended December 31, 2017, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Mass Mutual Life Insurance Company, the administrative services provider of the Plan as agent for Hartford Life Insurance Company, the custodian of the Plan.

Note 5: Nonparticipant-Directed Investments

Information about the net assets relating to nonparticipant-directed investments is as follows at December 31, 2017 and 2016:

	2017	2016
Corporate bonds	$ 3,669,296	$ 3,114,246
Corporate stocks	7,200,531	5,539,655
Preferred stocks	1,317,274	1,306,905
Mutual funds	2,823,606	2,227,453
Closed-end funds	521,054	433,323
Money market funds	1,617,805	1,472,688
Certificates of deposit	109,242	320,878
Cash	236,697	494,710
Employer contribution receivable	1,093,197	977,924
Nonparticipant-Directed Net Assets	$ 18,588,702	$ 15,887,782

Note 5: Nonparticipant-Directed Investments (Continued)

Information about the significant components of the changes in net assets relating to nonparticipant-directed investments is as follows for the year ended December 31, 2017:

Employer contributions	$ 1,093,197
Dividends	365,767
Interest	198,844
Net appreciation	1,330,592
Benefits paid	(224,932)
Administrative fees	(62,548)
Change in Nonparticipant-Directed Net Assets	$ 2,700,920

Note 6: Plan Termination

Although it has not expressed any intent to do so, the Company has the right, under the Plan, to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, all participants would become fully vested.

Note 7: Withdrawn Participants

At December 31, 2017, there were no participants who had elected to withdraw from the Plan but have not been paid.

Note 8: Tax Status

The Plan is based on the Volume Submitter Defined Contribution Plan with Lang & Co., certified public accountants, the third-party administrator of the Plan, which received a determination letter from the Internal Revenue Service ("IRS") dated September 30, 2014, stating that the Volume Submitter Defined Contribution Plan was designed in accordance with the provisions of the IRC. The Plan has not yet filed for its own determination letter from the IRS. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. The related trust, therefore, is not subject to tax under present income tax law.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and to recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and it has concluded that as of December 31, 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 9: Party in Interest

Certain investments are managed by various custodians of Plan assets; therefore, these investments qualify as party-in-interest transactions. The Plan also has a number of service providers. Such providers are parties in interest under ERISA.

Note 10: Fair Value Measurements

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the 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 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 that the Plan has the ability to access.

Level 2: Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liabilities; or
- 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.

Note 10: Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2017 and 2016.

Certificates of Deposit and Money Market Funds: Valued at their historical cost plus any accrued interest, which approximates fair value.

Corporate Stocks, Preferred Stocks, and Corporate Bonds: Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual Funds and Closed-End Funds: Valued at the daily closing price as reported by the funds. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. Closed-end funds are investments in a publicly traded investment company, which is structured, listed, and traded like a stock on a stock exchange. The mutual funds and closed-end funds held by the Plan are deemed to be actively traded.

The preceding methods 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 on a recurring basis as of December 31, 2017:

	Level 1	Level 2	Level 3	Total
Cash	$ 226,614	$ -	$ -	$ 226,614
Corporate bonds	3,669,296	-	-	3,669,296
Corporate stocks	7,200,531	-	-	7,200,531
Preferred stocks	1,317,274	-	-	1,317,274
Money market funds	1,617,805	-	-	1,617,805
Certificate of deposits	109,242	-	-	109,242
Closed-end funds	521,054	-	-	521,054
Mutual funds	2,823,606	-	-	2,823,606
Total	$ 17,485,422	$ -	$ -	17,485,422
Investments measured using NAV (Note 11)				5,632,469
Total Investments at Fair Value				$ 23,117,891

Note 10: Fair Value Measurements (Continued)

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

	Level 1	Level 2	Level 3	Total
Cash	$ 484,861	$ -	$ -	$ 484,861
Corporate bonds	3,114,246	-	-	3,114,246
Corporate stocks	5,539,655	-	-	5,539,655
Preferred stocks	1,306,905	-	-	1,306,905
Money market funds	1,472,688	-	-	1,472,688
Certificate of deposits	320,878	-	-	320,878
Closed-end funds	433,323	-	-	433,323
Mutual funds	2,227,453	-	-	2,227,453
Total	$ 14,900,009	$ -	$ -	14,900,009
Investments measured using NAV (Note 11)				4,273,483
Total Investments at Fair Value				$ 19,173,492

Note 11: Investments Measured Using Net Asset Value per Share

The following table for December 31, 2017, sets forth a summary of the Plan's investments whose fair value is estimated using NAV (or its equivalent) as a practical expedient:

	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Pooled Separate Accounts	$ 5,632,469	None	Daily	Competing Funds	None

The following table for December 31, 2016, sets forth a summary of the Plan's investments whose fair value is estimated using NAV (or its equivalent) as a practical expedient:

	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Pooled Separate Accounts	$ 4,273,483	None	Daily	Competing Funds	None

Note 11: Investments Measured Using Net Asset Value per Share (Continued)

The pooled separate accounts are provided through the Group Funding Agreement (the "Agreement") with the custodian. The Agreement does not allow transfers of value directly between competing funds. If any value is transferred from any competing fund to a participant's subaccount, then no subsequent transfers will be allowed from any of that participant's subaccount to any competing fund for a period of 90 days. The pooled separate accounts seek to provide investment results approximating (before fees and expenses) the aggregate price and dividend performance of the underlying securities named by the pooled separate account.

Note 12: Investments at Contract Value

The fixed-account investment option is provided through the Agreement with the custodian. Under the terms of the Agreement, a crediting rate is established for amounts invested in the fixed account. The custodian credits new contributions with interest at a rate not less than the declared interest rate for the calendar quarter in which they are received. The declared interest rate applicable to any calendar quarter is guaranteed to the end of that calendar year. For each subsequent year, the custodian will credit the existing fixed-account value with interest at a rate not less than the declared interest rate for the calendar year. The declared interest rate as of December 31, 2017, was 1.50 percent.

This investment option is considered to be fully benefit responsive. Contract value is the relevant measure for this investment since this is the value that would be received by participants for initiating permitted transactions under the terms of the Agreement. Contract value represents contributions plus credited interest less participant withdrawals and fees.

The following represents the contract value of the traditional investment contract held by the Plan at December 31, 2017 and 2016:

	2017	2016
Fixed Account	$ 300,929	$ 251,838

The Agreement does not allow transfers and surrenders of the fixed-account values prior to the Agreement discontinuance if the amount of any transfer or surrender from the fixed account in any 12-month period exceeds 1/6th of fixed-account values under the Agreement. However, these restrictions do not apply to benefit payments. Upon discontinuance of the Agreement, it may be possible to receive the market value of assets held in the fixed account. No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that would also limit the ability of the Plan to transact at contract value with the participants.

Note 12: Investments at Contract Value (Continued)

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. These events include the following:

a) The Plan or Plan trust fails to maintain its special tax qualified or exempt status under 401(a) of the IRC.
b) The Plan fails to provide the information necessary for the issuer to perform the Agreement and the Plan fails to remedy the failure within 31 days from the date of notification.
c) The Plan trust is amended in a way that adversely affects obligations under the Agreement.
d) All group variable funding agreements in this class of business are amended, changed, or altered due to changes in any applicable laws, and the issuer determines that obligations under the Agreement or ability to maintain this class of business are thereby materially affected.
e) The assets held or the participants covered under the Agreement are less than the amount required for the Agreement to be a group funding agreement under any applicable insurance law.
f) A change occurs such that the Plan is no longer considered to be an entity that is authorized or eligible to sponsor the Agreement.
g) No contributions are made during any consecutive 12-month period.
h) At any time the contributions or balances are less than the amount required for this class of business under the underwriting standards in effect as of the Agreement effective date.

Note 13: Reclassifications

Certain reclassifications have been made to the 2017 financial statements in order to conform with the current year presentation.

Note 14: Subsequent Events

The Plan has evaluated subsequent events through September 27, 2018, the date the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Non-Interest-Bearing Cash (Nonparticipant Directed)			
*	Banc of California	General Cash Account	$ 10,082	$ 10,082
	Interest-Bearing Cash (Nonparticipant Directed)			
*	Snowden	General Cash Account	$ 77,306	$ 77,306
*	Morgan Stanley	General Cash Account	149,308	149,308
	Total Interest-Bearing Cash		226,614	226,614
	Corporate Bonds (Nonparticipant Directed)			
	Accrued Interest		-	3,018
	Alcoa, Inc.	200,000 shares 5.125% MAT 7/01/24	199,974	213,466
	Ally Financial, Inc.	50,000 shares 4.625% MAT 3/30/25	50,976	52,500
	AT&T, Inc.	300,000 shares 4.25% MAT 3/1/27	310,406	305,826
	Burlington North SF	200,000 shares 4.70% MAT 10/1/19	200,457	208,470
	CenturyTel Enterprises	50,000 shares 7.2% MAT 12/1/25	53,438	47,289
	Citigroup, Inc.	100,000 shares 5.50% MAT 9/13/25	108,325	112,654
	Discover Financial	100,000 shares 4.1% MAT 3/15/29	100,811	99,556
	EMC Corp.	163,000 shares 3.375% MAT 6/1/23	146,172	157,156
	Energizer Hldgs	150,000 shares 4.70% MAT 5/24/22	155,701	153,750
	Ford Motor	200,000 shares 4.389% MAT 1/8/26	207,291	209,840
	Freeport-McMoran Copper	100,000 shares 4.00% MAT 11/14/21	99,899	100,000
	Frontier Communications	35,000 shares 6.25% MAT 9/15/21	35,241	24,850
	GAP, Inc.	100,000 shares 5.95% MAT 4/12/21	102,464	107,829
	General Motors Company	100,000 shares 4.00% MAT 4/1/25	99,780	102,695
	General Motors Financial Co	100,000 shares 5.25% MAT 3/1/26	107,993	109,961
	Genworth	97,000 shares 4.900% MAT 8/15/23	98,986	82,693
	Hospitality	200,000 shares 5.25% MAT 2/15/26	214,895	214,804
	Liberty Media	40,000 shares 8.5% MAT 7/15/29	40,594	44,100
	Mercury	225,000 shares 4.4% MAT 3/15/27	229,563	231,350
*	Morgan Stanley	100,000 shares 4.875% MAT 11/01/22	102,184	107,682
	Newmont Mining	100,000 shares 5.125% MAT 10/01/19	100,655	104,205
	Pitney Bowes	140,000 shares 4.625% MAT 3/15/24	142,486	127,400
	Reliance Steel	100,000 shares 4.50% MAT 4/15/23	104,578	105,409
	Safeway 8/15/19	100,000 shares 5.00% MAT 8/15/19	101,080	101,000
	Safeway 8/15/20	100,000 shares 3.95% MAT 8/15/20	101,231	95,000
	Shell Intl Finl	125,000 shares 4.375% MAT 3/25/20	125,756	130,710
	Tenneco Packaging	10,000 shares 7.95% MAT 12/15/25	9,919	11,325
	Time Warner Cable	100,000 shares 5.00% MAT 2/10/20	100,561	104,361
	Viacom, Inc.	100,000 shares 3.875% MAT 4/1/24	102,952	99,772
	Yum Brands	100,000 shares 3.875% MAT 11/1/23	100,679	100,625
	Total Corporate Bonds		3,655,047	3,669,296
	Corporate Stocks (Nonparticipant Directed)	Number of Shares		
	AstraZeneca	1,218	35,188	42,265
	EBay, Inc.	185	5,775	6,982
	Johnson Controls	348	14,847	13,262
	Microsoft	626	30,814	53,548
	Suncor Energy	1,277	37,679	46,891
	3M	114	14,142	26,832
	Abb Ltd	1,250	32,948	33,525
	Abbott Labs	1,027	41,211	58,611

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Abbvie	1,045	$ 45,417	$ 101,062
	AIA Group Ltd.	584	14,677	19,993
	Alibaba Group	60	8,638	10,346
	Alibaba Group	250	29,705	43,108
	Air Products & Chemicals	100	14,620	16,408
	Ambev	1,971	10,894	12,733
	Amgen	200	16,813	34,780
	Apple, Inc.	280	25,259	47,384
	Apple, Inc.	159	16,649	26,908
	ASSA Abloy	1,118	10,164	11,538
	Carlsberg	625	11,643	15,050
	Chubb Ltd.	232	21,336	33,902
	Coca Cola	635	27,732	29,134
	Coca Cola	524	20,437	24,041
	Coca Cola European Partners	354	13,202	14,107
	Colgate Palmolive	512	33,776	38,630
	Comerica, Inc.	180	12,225	15,626
	DowDupont, Inc.	595	37,077	42,376
	DXC Technology	112	8,690	10,629
	Honeywell	308	22,697	47,235
	Honeywell	167	11,795	25,611
	Honeywell	198	16,906	30,365
	Hormel Foods	1,507	47,330	54,840
	International Business Machines	422	80,452	64,742
	Intl Paper	270	12,905	15,644
	Interpublic Group	727	15,126	14,656
	IQVIA Holdings	185	13,026	18,112
	Kao Corp	200	12,625	13,515
	KDDI Corp	1,364	16,156	16,873
	Kellogg Co	265	17,245	18,015
	Kinder Morgan	945	39,251	17,076
	Kroger	679	21,334	18,639
	Lockheed Martin	79	15,445	25,363
	Lowes	196	15,519	18,216
	Medtronic	179	14,159	14,454
	Medtronic	346	27,209	27,940
	Microsoft	332	17,819	28,399
*	Morgan Stanley	1,061	35,876	55,671
	Occidental Petroleum	363	27,721	26,717
	Oracle	1,389	55,074	65,672
	Plains All American Pipeline	1,000	32,425	20,640
	Relx NV	930	15,926	21,455
	Rockwell Automation	105	13,129	20,617
	South32 Ltd	200	1,800	2,705
	Unilever NV NY	341	15,330	19,205
	Unilever PLC	227	10,025	12,562
	Union Pacific	99	8,651	13,276
	United Technologies	257	26,456	32,785
	United Technologies	148	16,151	18,880
	UnitedHealth Group	121	15,478	26,676
	Vanguard Natural Resources	1	1,977	19

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Vodafone Group	1,000	$ 50,967	$ 31,900
	Walmart Stores	301	15,960	29,723
	Accenture	146	16,850	22,351
	Adobe Systems Inc.	261	23,036	45,738
	Aetna	233	2,770	42,031
	Altria Group	269	19,467	19,209
	Alexion Pharmaceuticals	151	25,851	18,058
	Align Technology	23	5,088	5,110
	Allergan	62	15,339	10,142
	Alphabet A	31	18,767	32,655
	Alphabet C	66	32,160	69,062
	AT&T	1,014	37,971	39,424
	Amazon	48	17,846	56,135
	American Tower REIT	355	30,077	50,648
	AON PLC	149	15,288	19,966
	Applied Materials	161	5,944	8,230
	Ashtead Group	165	12,820	17,953
	AutoZone	17	7,826	12,093
	BHP Billiton	554	26,126	25,456
	Biogen	52	15,314	16,566
	British American Tob	383	21,495	25,657
	CAE Inc.	567	9,808	10,524
	Canadian National Railway	204	12,618	16,830
	Cielo	368	10,396	10,438
	Citigroup	279	16,798	20,760
	Celgene	302	23,039	31,517
	Comcast	904	24,822	36,205
	Commerce, Inc.	157	8,927	8,767
	Compass Group	883	17,065	19,386
	Continental Ag Spons	340	14,367	18,319
	Costco Wholesale	135	15,733	25,126
	Costco Wholesale	105	11,466	19,543
	Crown Holdings	203	11,042	11,419
	Daiwa House	516	11,851	19,807
	Diageo PLC	143	16,023	20,882
	Diageo PLC	188	22,578	27,454
	Dollar General	122	9,423	11,347
	Dr. Pepper Snapple Group	239	22,330	23,197
	Facebook	353	27,037	62,289
	Facebook	300	20,719	52,938
	HDFC Bank	139	12,306	14,132
	Hexagon	272	10,927	13,668
	Home Depot	122	20,414	23,123
	Illumina	67	11,663	14,639
	Intercontinental Exchange	328	13,138	23,144
	Israel Discount Bank	367	8,950	10,999
	Marsh & McLennan	197	13,224	16,034
	Mattel, Inc.	557	10,478	8,567
	McKesson Corp	128	21,441	19,962
	MasterCard, Inc.	164	17,728	24,823
	Monsanto	107	11,671	12,495

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Monster Beverage	438	$ 20,055	$ 27,721
	Nike	1,015	32,280	63,488
	Novo Nordisk	421	21,130	22,595
	PayPal Holdings, Inc.	508	19,798	37,399
	Qualcomm	500	32,341	32,010
	Qualcomm	396	22,989	25,352
	Ryohin Keikaku	364	16,442	22,779
	S&P Global, Inc.	126	14,194	21,344
	S&P Global, Inc.	99	14,190	16,771
	Salesforce	515	27,260	52,648
	Sanlam Ltd	1,205	15,071	16,906
	Schlumberger	239	21,425	16,106
	Schwab, Charles	386	11,979	19,829
	Schwab, Charles	611	12,899	31,387
	Schwab, Charles	342	15,693	17,569
	Shire PLC	139	26,392	21,562
	Smucker JM	115	12,362	14,288
	Smucker JM	301	30,117	37,396
	Splunk	374	19,441	30,982
	Starbucks	115	6,538	6,604
	Starbucks	551	20,493	31,644
	Taiwan Semiconductor Mfg	330	7,687	13,085
	Taiwan Semiconductor Mfg	708	22,122	28,072
	Tencent Holdings	360	10,576	18,691
	Thermo Fisher Scientific	98	13,885	18,608
	Transunion	300	12,099	16,488
	Ubisoft Entertainment	952	12,869	14,585
	Ulta Beauty	34	7,585	7,604
	United Parcel	117	11,346	13,941
	Visa	540	22,942	61,571
	Visa	184	10,955	20,980
	Waste Connections	277	18,336	19,714
	West Pharmaceutical	171	16,248	16,873
	Welbilt, Inc.	499	8,716	11,731
	Wolters Kluwer	413	14,903	21,550
	Yamaha Corp	281	10,211	10,473
	Zoetis	369	15,806	26,583
	Zoetis	259	16,455	18,658
	American Intl Group	739	44,094	44,030
	Anthem	203	32,005	45,677
	Bank of America	1,500	26,118	44,280
	Berkshire Hathaway	300	31,817	59,466
	Brighthouse Financial	48	2,887	2,815
	CenturyLink	4,639	150,321	77,379
	Chevron Corp	392	41,695	49,074
	Chevron Corp	253	27,110	31,666
	Cisco	437	10,396	14,094
	Citigroup	1,084	61,087	80,660
	CRH PLC	465	16,418	16,782
	Conoco Phillips	500	29,308	27,445
	Devon Energy	200	13,358	8,280

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Eaton Corporation	181	$ 10,576	$ 14,301
	Ecolab, Inc.	350	45,500	46,963
	Emerson Electric	521	31,419	36,518
	Energy Transfer Partners	929	36,852	16,648
	Enterprise Products	3,364	58,901	89,180
	Exelon	354	10,814	13,951
	Johnson & Johnson	778	61,927	108,702
	JP Morgan Chase	1,051	54,228	112,394
	Marathon Pete	274	14,133	18,079
	Merck	734	39,877	41,302
	MetLife	633	30,269	32,004
	Motorola Solutions	134	11,292	12,106
	Motorola Solutions	190	12,565	17,165
	NextEra Energy	224	20,825	34,987
	Nielsen Holdings	388	15,361	14,123
	Nordea	927	11,947	11,226
	Northrop Grumman	115	10,163	35,295
	Pfizer	2,401	73,534	86,964
	Pfizer	2,112	66,201	76,497
	Procter & Gamble	267	22,558	24,532
	PG&E Corp	756	44,483	33,891
	Prudential Finl	100	10,134	11,498
	Prudential PLC	396	19,523	20,109
	Public Svc Enterprise	632	27,069	32,548
	Shaw Communication	2,000	48,924	45,660
	Siemens AG	800	50,075	55,416
	Southern Co.	1,022	43,375	49,148
	SunTrust Bks	733	28,616	47,344
	Total S A Spon ADR	644	32,816	35,600
	Total S A Spon ADR	1,000	54,008	55,280
	Travelers Cos	119	10,631	16,141
	US Bancorp	668	24,973	35,791
	Verizon Communications	1,012	49,063	53,565
	Verizon Communications	884	43,673	46,790
	Walgreens Boots Alliance	603	47,616	43,790
	Amerisource Bergen	717	55,426	65,835
	Invesco LTD	283	9,079	10,341
	Julius Baer Group	874	8,603	10,663
	Snap On, Inc.	64	10,179	11,155
	Marine Harvest	1,500	19,836	25,425
	Quest Diagnostics	192	16,219	18,910
	Biomarin Pharmaceutical	231	17,460	20,598
	Equinox	75	16,455	33,992
	Fastenal	395	18,905	21,603
	Servicenow	284	17,270	37,031
	Symrise	958	14,082	20,444
	Royal Dutch Shell	894	52,284	59,639
	Vantiv Inc.	343	20,610	25,228
	Chicago Bridge & Iron	500	35,819	8,070
	Concho	115	15,680	17,275
	Hess Corp	480	20,771	22,786

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Key Corp	777	$ 10,009	$ 15,672
	Koninkluke Philips	1,048	36,521	39,614
	Masco	1,314	27,223	57,869
	Molson Coors Brewing	148	9,540	12,146
	Popular Inc.	3,000	72,397	106,470
	Starwood Property Trust	3,200	73,997	68,320
	Two Harbors Invt Corp	1,500	31,042	24,390
	Oversea Chinese	749	13,415	13,969
	Americas United Bank	25,000	250,000	295,000
	Penn Va Corp	9	-	352
	Rio Tinto PLC	195	9,633	10,321
	Sampo PLC	442	10,720	12,144
	Topbuild	144	3,243	10,907
	VNR Fin Corp	44	84	84
	Banc of California	1,000	10,721	20,650
	California Res Corp	3	41	58
	Five Below	170	7,342	11,274
	Wells Fargo	1,217	54,281	73,835
	W W Grainger	301	49,535	71,110
	Philip Morris	134	12,561	14,157
	Praxair	74	9,039	11,446
	Priceline	17	19,262	29,542
	Exxon Mobil	304	27,664	25,412
	First Energy Corp	852	26,513	26,088
	General Electric	880	22,554	15,356
	General Electric	730	20,387	12,739
	Granite Point Mortgage Trust	284	5,334	5,038
	Goldman Sachs	133	27,297	33,883
	Halliburton	350	15,567	17,105
	Flowers Foods, Inc.	3,167	50,200	61,155
	Total Corporate Stocks		5,720,685	7,200,531
	Preferred Stocks (Nonparticipant Directed):	Number of Shares		
	Annaly Capital Mgmt	1,000	25,357	25,360
	Bank of America	1,500	37,628	40,725
	Capital One	3,000	74,504	78,540
	Citigroup	1,250	33,060	35,663
	Regions Financial	1,000	22,133	25,340
	Bank Amer Corp DIV 6.20% FREQ-QTRLY	6,000	150,002	164,640
	General Elec Cap corp	4,400	100,992	109,824
	JP Morgan Chase	6,000	150,002	161,820
	ML PFD Capital Trust III	4,000	100,000	108,680
	Royal Bank Scotland Grp	8,000	200,000	203,600
	SCE Tr II Pfd Shs	4,600	100,229	111,182
	Wells Fargo New Dep Sh 5.25%	10,000	249,281	251,900
	Total Preferred Stocks		1,243,188	1,317,274

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Money Market Funds (Nonparticipant Directed):			
*	Snowden 242	General Money Market	$ 22,042	$ 22,042
*	Snowden 018	General Money Market	37,394	37,394
*	Snowden 005	General Money Market	96,552	96,552
*	Americas United Bank	Business Money Market	1,131,553	1,131,553
*	Banc of California	Business Money Market	330,264	330,264
	Total Money Market Funds		1,617,805	1,617,805
	Exchange-Traded and Closed-End Funds (Nonparticipant Directed):			
	First Trust	2,500 shares	51,007	50,025
	I Shares TR S&P U.S. PFD STK Index	2,500 shares	97,849	95,175
	I Shares TR Core S&P Small- Cap ETF	900 shares	52,272	69,129
	Vanguard Index Fds Growth ETF	950 shares	99,139	133,618
	Wisdomtree TR Midcap	3,600 shares	100,412	127,008
	Neuberger Berman	3,800 shares	76,120	35,644
	Western Asset High Inc. Fd II	1,500 shares	15,231	10,455
	Total Exchange-Traded and Closed-End Funds (Nonparticipant Directed)		492,030	521,054
	Certificates of Deposit (Nonparticipant Directed):			
	JP Morgan Chase BK NA	Variable 9/30/19	104,002	109,242
	Total Certificates of Deposit		104,002	109,242
	Mutual Funds (Nonparticipant Directed):	Number of Shares		
	American Cap World Growth & Income Fd	852	42,382	43,507
	American EuroPacific Growth	769	41,216	43,109
	American Fundamental Inv F2	703	42,601	43,750
	Blackstone GSO Strategic	6,292	119,059	98,848
	Eaton Vance Floating Rate Income Fund	12,385	231,585	202,003
	Doubleline Income Solutions	6,495	152,605	131,137
	First Eagle Global	711	41,812	42,140
	FPA Crescent Fd Instl	1,204	41,045	41,778
	Invesco Equal Wghtd S&P 500	724	41,263	43,821
	Loomis Sayles Strategic	27,838	413,601	404,758
	MFS Bond Fund	17,679	247,407	249,985
	Blackrock Taxable Muni Bd	10,395	237,875	241,052
	Nuveen Build Amer Bd Fd	11,374	239,332	249,997
	Oakmark I	522	41,717	44,057
	Oakmark International II	1,501	41,266	42,873
	Pimco All Asset	43,482	445,769	388,294
	Pimco Dynamic Credit Income Fund	12,984	301,932	291,368
	Pimco Foreign Bond	21,981	237,582	221,129
	Total Mutual Funds (Nonparticipant Directed)		2,960,049	2,823,606

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Pooled Separate Accounts (Participant Directed):			
*	Hartford Life Insurance Company	Europacific Growth Fund	**	$ 539,032
*	Hartford Life Insurance Company	New Perspective	**	5,621
*	Hartford Life Insurance Company	Franklin High Income A	**	49,366
*	Hartford Life Insurance Company	MFS Government Securities	**	179,210
*	Hartford Life Insurance Company	PIMCO Total Return A	**	887,051
*	Hartford Life Insurance Company	Invesco Equity and Income A	**	53,548
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2030 A	**	11,090
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2035 A	**	6,900
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2045 A	**	7,734
*	Hartford Life Insurance Company	Capital World Growth And Income Fund	**	155,828
*	Hartford Life Insurance Company	The Investment Company Of America	**	108,013
*	Hartford Life Insurance Company	Alger Capital	**	485,747
*	Hartford Life Insurance Company	Oppenheimer International Growth A	**	64,482
*	Hartford Life Insurance Company	The Growth Fund Of America	**	962,726
*	Hartford Life Insurance Company	BlackRock Equity Dividend A	**	174,243
*	Hartford Life Insurance Company	Washington Mutual Investors Fund	**	1,002,749
*	Hartford Life Insurance Company	MM S&P Mid Cap	**	256,830
*	Hartford Life Insurance Company	MM MSCI EAFE International Index R4	**	72,515
*	Hartford Life Insurance Company	BNY Mellon DL SM Cap	**	91,290
*	Hartford Life Insurance Company	Loomis Sayles Bond Admin	**	149,896
*	Hartford Life Insurance Company	MM Russell 2000 Small Cap Index R4	**	336,646
*	Hartford Life Insurance Company	JP Morgan Large Cap	**	31,952
	Total Pooled Separate Accounts (Participant Directed)			5,632,469
	Group Annuity Contract (Participant Directed):			
*	Hartford Life Insurance Company	Fixed Account	***	300,929
	Total Net Assets Held for Investment			$ 23,418,820

* Party-in-interest
** Cost information excluded as permitted for participant-directed accounts
*** Stated at contract value

(Continued)

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

2017

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
F. Gavina & Sons, Inc.
401(k) Profit Sharing Plan

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 04/01/1985

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)
F. Gavina & Sons, Inc.

2700 Fruitland Ave

Vernon CA 90058

2b Employer Identification Number (EIN) 95-2922751

2c Plan Sponsor's telephone number (323)582-0671

2d Business code (see instructions) 311900

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	Jose A. Gavina	10/10/18	Jose Gavina
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Jose A. Gavina	10/10/18	Jose Gavina
	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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: **a** Sponsor's name **c** Plan Name	**4b** EIN **4d** PN	
5 Total number of participants at the beginning of the plan year	**5**	233
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)**	212
a(2) Total number of active participants at the end of the plan year	**6a(2)**	235
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	31
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	266
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	2
f Total. Add lines **6d** and **6e**	**6f**	268
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	268
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	5
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 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)		**9b** Plan benefit arrangement (check all that apply)	
(1) ☐	Insurance	(1) ☐	Insurance
(2) ☐	Code section 412(e)(3) insurance contracts	(2) ☐	Code section 412(e)(3) insurance contracts
(3) ☒	Trust	(3) ☒	Trust
(4) ☐	General assets of the sponsor	(4) ☐	General assets of the sponsor

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

a Pension Schedules

(1) ☒ R (Retirement Plan Information)

(2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1) ☒ H (Financial Information)

(2) ☐ I (Financial Information – Small Plan)

(3) ☐ A (Insurance Information)

(4) ☒ C (Service Provider Information)

(5) ☐ D (DFE/Participating Plan Information)

(6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2017 Form M-1 annual report. If the plan was not required to file the 2017 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_____

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Non-Interest-Bearing Cash (Nonparticipant Directed)			
*	Banc of California	General Cash Account	$ 10,082	$ 10,082
	Interest-Bearing Cash (Nonparticipant Directed)			
*	Snowden	General Cash Account	$ 77,306	$ 77,306
*	Morgan Stanley	General Cash Account	149,308	149,308
	Total Interest-Bearing Cash		226,614	226,614
	Corporate Bonds (Nonparticipant Directed)			
	Accrued Interest		-	3,018
	Alcoa, Inc.	200,000 shares 5.125% MAT 7/01/24	199,974	213,466
	Ally Financial, Inc.	50,000 shares 4.625% MAT 3/30/25	50,976	52,500
	AT&T, Inc.	300,000 shares 4.25% MAT 3/1/27	310,406	305,826
	Burlington North SF	200,000 shares 4.70% MAT 10/1/19	200,457	208,470
	CenturyTel Enterprises	50,000 shares 7.2% MAT 12/1/25	53,438	47,289
	Citigroup, Inc.	100,000 shares 5.50% MAT 9/13/25	108,325	112,654
	Discover Financial	100,000 shares 4.1% MAT 3/15/29	100,811	99,556
	EMC Corp.	163,000 shares 3.375% MAT 6/1/23	146,172	157,156
	Energizer Hldgs	150,000 shares 4.70% MAT 5/24/22	155,701	153,750
	Ford Motor	200,000 shares 4.389% MAT 1/8/26	207,291	209,840
	Freeport-McMoran Copper	100,000 shares 4.00% MAT 11/14/21	99,899	100,000
	Frontier Communications	35,000 shares 6.25% MAT 9/15/21	35,241	24,850
	GAP, Inc.	100,000 shares 5.95% MAT 4/12/21	102,464	107,829
	General Motors Company	100,000 shares 4.00% MAT 4/1/25	99,780	102,695
	General Motors Financial Co	100,000 shares 5.25% MAT 3/1/26	107,993	109,961
	Genworth	97,000 shares 4.900% MAT 8/15/23	98,986	82,693
	Hospitality	200,000 shares 5.25% MAT 2/15/26	214,895	214,804
	Liberty Media	40,000 shares 8.5% MAT 7/15/29	40,594	44,100
	Mercury	225,000 shares 4.4% MAT 3/15/27	229,563	231,350
*	Morgan Stanley	100,000 shares 4.875% MAT 11/01/22	102,184	107,682
	Newmont Mining	100,000 shares 5.125% MAT 10/01/19	100,655	104,205
	Pitney Bowes	140,000 shares 4.625% MAT 3/15/24	142,486	127,400
	Reliance Steel	100,000 shares 4.50% MAT 4/15/23	104,578	105,409
	Safeway 8/15/19	100,000 shares 5.00% MAT 8/15/19	101,080	101,000
	Safeway 8/15/20	100,000 shares 3.95% MAT 8/15/20	101,231	95,000
	Shell Intl Finl	125,000 shares 4.375% MAT 3/25/20	125,756	130,710
	Tenneco Packaging	10,000 shares 7.95% MAT 12/15/25	9,919	11,325
	Time Warner Cable	100,000 shares 5.00% MAT 2/10/20	100,561	104,361
	Viacom, Inc.	100,000 shares 3.875% MAT 4/1/24	102,952	99,772
	Yum Brands	100,000 shares 3.875% MAT 11/1/23	100,679	100,625
	Total Corporate Bonds		3,655,047	3,669,296
	Corporate Stocks (Nonparticipant Directed)	Number of Shares		
	AstraZeneca	1,218	35,188	42,265
	EBay, Inc.	185	5,775	6,982
	Johnson Controls	348	14,847	13,262
	Microsoft	626	30,814	53,548
	Suncor Energy	1,277	37,679	46,891
	3M	114	14,142	26,832
	Abb Ltd	1,250	32,948	33,525
	Abbott Labs	1,027	41,211	58,611

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Abbvie	1,045	$ 45,417	$ 101,062
	AIA Group Ltd.	584	14,677	19,993
	Alibaba Group	60	8,638	10,346
	Alibaba Group	250	29,705	43,108
	Air Products & Chemicals	100	14,620	16,408
	Ambev	1,971	10,894	12,733
	Amgen	200	16,813	34,780
	Apple, Inc.	280	25,259	47,384
	Apple, Inc.	159	16,649	26,908
	ASSA Abloy	1,118	10,164	11,538
	Carlsberg	625	11,643	15,050
	Chubb Ltd.	232	21,336	33,902
	Coca Cola	635	27,732	29,134
	Coca Cola	524	20,437	24,041
	Coca Cola European Partners	354	13,202	14,107
	Colgate Palmolive	512	33,776	38,630
	Comerica, Inc.	180	12,225	15,626
	DowDupont, Inc.	595	37,077	42,376
	DXC Technology	112	8,690	10,629
	Honeywell	308	22,697	47,235
	Honeywell	167	11,795	25,611
	Honeywell	198	16,906	30,365
	Hormel Foods	1,507	47,330	54,840
	International Business Machines	422	80,452	64,742
	Intl Paper	270	12,905	15,644
	Interpublic Group	727	15,126	14,656
	IQVIA Holdings	185	13,026	18,112
	Kao Corp	200	12,625	13,515
	KDDI Corp	1,364	16,156	16,873
	Kellogg Co	265	17,245	18,015
	Kinder Morgan	945	39,251	17,076
	Kroger	679	21,334	18,639
	Lockheed Martin	79	15,445	25,363
	Lowes	196	15,519	18,216
	Medtronic	179	14,159	14,454
	Medtronic	346	27,209	27,940
	Microsoft	332	17,819	28,399
*	Morgan Stanley	1,061	35,876	55,671
	Occidental Petroleum	363	27,721	26,717
	Oracle	1,389	55,074	65,672
	Plains All American Pipeline	1,000	32,425	20,640
	Relx NV	930	15,926	21,455
	Rockwell Automation	105	13,129	20,617
	South32 Ltd	200	1,800	2,705
	Unilever NV NY	341	15,330	19,205
	Unilever PLC	227	10,025	12,562
	Union Pacific	99	8,651	13,276
	United Technologies	257	26,456	32,785
	United Technologies	148	16,151	18,880
	UnitedHealth Group	121	15,478	26,676
	Vanguard Natural Resources	1	1,977	19

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Vodafone Group	1,000	$ 50,967	$ 31,900
	Walmart Stores	301	15,960	29,723
	Accenture	146	16,850	22,351
	Adobe Systems Inc.	261	23,036	45,738
	Aetna	233	2,770	42,031
	Altria Group	269	19,467	19,209
	Alexion Pharmaceuticals	151	25,851	18,058
	Align Technology	23	5,088	5,110
	Allergan	62	15,339	10,142
	Alphabet A	31	18,767	32,655
	Alphabet C	66	32,160	69,062
	AT&T	1,014	37,971	39,424
	Amazon	48	17,846	56,135
	American Tower REIT	355	30,077	50,648
	AON PLC	149	15,288	19,966
	Applied Materials	161	5,944	8,230
	Ashtead Group	165	12,820	17,953
	AutoZone	17	7,826	12,093
	BHP Billiton	554	26,126	25,456
	Biogen	52	15,314	16,566
	British American Tob	383	21,495	25,657
	CAE Inc.	567	9,808	10,524
	Canadian National Railway	204	12,618	16,830
	Cielo	368	10,396	10,438
	Citigroup	279	16,798	20,760
	Celgene	302	23,039	31,517
	Comcast	904	24,822	36,205
	Commerce, Inc.	157	8,927	8,767
	Compass Group	883	17,065	19,386
	Continental Ag Spons	340	14,367	18,319
	Costco Wholesale	135	15,733	25,126
	Costco Wholesale	105	11,466	19,543
	Crown Holdings	203	11,042	11,419
	Daiwa House	516	11,851	19,807
	Diageo PLC	143	16,023	20,882
	Diageo PLC	188	22,578	27,454
	Dollar General	122	9,423	11,347
	Dr. Pepper Snapple Group	239	22,330	23,197
	Facebook	353	27,037	62,289
	Facebook	300	20,719	52,938
	HDFC Bank	139	12,306	14,132
	Hexagon	272	10,927	13,668
	Home Depot	122	20,414	23,123
	Illumina	67	11,663	14,639
	Intercontinental Exchange	328	13,138	23,144
	Israel Discount Bank	367	8,950	10,999
	Marsh & McLennan	197	13,224	16,034
	Mattel, Inc.	557	10,478	8,567
	McKesson Corp	128	21,441	19,962
	MasterCard, Inc.	164	17,728	24,823
	Monsanto	107	11,671	12,495

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Monster Beverage	438	$ 20,055	$ 27,721
	Nike	1,015	32,280	63,488
	Novo Nordisk	421	21,130	22,595
	PayPal Holdings, Inc.	508	19,798	37,399
	Qualcomm	500	32,341	32,010
	Qualcomm	396	22,989	25,352
	Ryohin Keikaku	364	16,442	22,779
	S&P Global, Inc.	126	14,194	21,344
	S&P Global, Inc.	99	14,190	16,771
	Salesforce	515	27,260	52,648
	Sanlam Ltd	1,205	15,071	16,906
	Schlumberger	239	21,425	16,106
	Schwab, Charles	386	11,979	19,829
	Schwab, Charles	611	12,899	31,387
	Schwab, Charles	342	15,693	17,569
	Shire PLC	139	26,392	21,562
	Smucker JM	115	12,362	14,288
	Smucker JM	301	30,117	37,396
	Splunk	374	19,441	30,982
	Starbucks	115	6,538	6,604
	Starbucks	551	20,493	31,644
	Taiwan Semiconductor Mfg	330	7,687	13,085
	Taiwan Semiconductor Mfg	708	22,122	28,072
	Tencent Holdings	360	10,576	18,691
	Thermo Fisher Scientific	98	13,885	18,608
	Transunion	300	12,099	16,488
	Ubisoft Entertainment	952	12,869	14,585
	Ulta Beauty	34	7,585	7,604
	United Parcel	117	11,346	13,941
	Visa	540	22,942	61,571
	Visa	184	10,955	20,980
	Waste Connections	277	18,336	19,714
	West Pharmaceutical	171	16,248	16,873
	Welbilt, Inc.	499	8,716	11,731
	Wolters Kluwer	413	14,903	21,550
	Yamaha Corp	281	10,211	10,473
	Zoetis	369	15,806	26,583
	Zoetis	259	16,455	18,658
	American Intl Group	739	44,094	44,030
	Anthem	203	32,005	45,677
	Bank of America	1,500	26,118	44,280
	Berkshire Hathaway	300	31,817	59,466
	Brighthouse Financial	48	2,887	2,815
	CenturyLink	4,639	150,321	77,379
	Chevron Corp	392	41,695	49,074
	Chevron Corp	253	27,110	31,666
	Cisco	437	10,396	14,094
	Citigroup	1,084	61,087	80,660
	CRH PLC	465	16,418	16,782
	Conoco Phillips	500	29,308	27,445
	Devon Energy	200	13,358	8,280

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Eaton Corporation	181	$ 10,576	$ 14,301
	Ecolab, Inc.	350	45,500	46,963
	Emerson Electric	521	31,419	36,518
	Energy Transfer Partners	929	36,852	16,648
	Enterprise Products	3,364	58,901	89,180
	Exelon	354	10,814	13,951
	Johnson & Johnson	778	61,927	108,702
	JP Morgan Chase	1,051	54,228	112,394
	Marathon Pete	274	14,133	18,079
	Merck	734	39,877	41,302
	MetLife	633	30,269	32,004
	Motorola Solutions	134	11,292	12,106
	Motorola Solutions	190	12,565	17,165
	NextEra Energy	224	20,825	34,987
	Nielsen Holdings	388	15,361	14,123
	Nordea	927	11,947	11,226
	Northrop Grumman	115	10,163	35,295
	Pfizer	2,401	73,534	86,964
	Pfizer	2,112	66,201	76,497
	Procter & Gamble	267	22,558	24,532
	PG&E Corp	756	44,483	33,891
	Prudential Finl	100	10,134	11,498
	Prudential PLC	396	19,523	20,109
	Public Svc Enterprise	632	27,069	32,548
	Shaw Communication	2,000	48,924	45,660
	Siemens AG	800	50,075	55,416
	Southern Co.	1,022	43,375	49,148
	SunTrust Bks	733	28,616	47,344
	Total S A Spon ADR	644	32,816	35,600
	Total S A Spon ADR	1,000	54,008	55,280
	Travelers Cos	119	10,631	16,141
	US Bancorp	668	24,973	35,791
	Verizon Communications	1,012	49,063	53,565
	Verizon Communications	884	43,673	46,790
	Walgreens Boots Alliance	603	47,616	43,790
	Amerisource Bergen	717	55,426	65,835
	Invesco LTD	283	9,079	10,341
	Julius Baer Group	874	8,603	10,663
	Snap On, Inc.	64	10,179	11,155
	Marine Harvest	1,500	19,836	25,425
	Quest Diagnostics	192	16,219	18,910
	Biomarin Pharmaceutical	231	17,460	20,598
	Equinox	75	16,455	33,992
	Fastenal	395	18,905	21,603
	Servicenow	284	17,270	37,031
	Symrise	958	14,082	20,444
	Royal Dutch Shell	894	52,284	59,639
	Vantiv Inc.	343	20,610	25,228
	Chicago Bridge & Iron	500	35,819	8,070
	Concho	115	15,680	17,275
	Hess Corp	480	20,771	22,786

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Corporate Stocks (Nonparticipant Directed) (Continued):	Number of Shares		
	Key Corp	777	$ 10,009	$ 15,672
	Koninkluke Philips	1,048	36,521	39,614
	Masco	1,314	27,223	57,869
	Molson Coors Brewing	148	9,540	12,146
	Popular Inc.	3,000	72,397	106,470
	Starwood Property Trust	3,200	73,997	68,320
	Two Harbors Invt Corp	1,500	31,042	24,390
	Oversea Chinese	749	13,415	13,969
	Americas United Bank	25,000	250,000	295,000
	Penn Va Corp	9	-	352
	Rio Tinto PLC	195	9,633	10,321
	Sampo PLC	442	10,720	12,144
	Topbuild	144	3,243	10,907
	VNR Fin Corp	44	84	84
	Banc of California	1,000	10,721	20,650
	California Res Corp	3	41	58
	Five Below	170	7,342	11,274
	Wells Fargo	1,217	54,281	73,835
	W W Grainger	301	49,535	71,110
	Philip Morris	134	12,561	14,157
	Praxair	74	9,039	11,446
	Priceline	17	19,262	29,542
	Exxon Mobil	304	27,664	25,412
	First Energy Corp	852	26,513	26,088
	General Electric	880	22,554	15,356
	General Electric	730	20,387	12,739
	Granite Point Mortgage Trust	284	5,334	5,038
	Goldman Sachs	133	27,297	33,883
	Halliburton	350	15,567	17,105
	Flowers Foods, Inc.	3,167	50,200	61,155
	Total Corporate Stocks		5,720,685	7,200,531
	Preferred Stocks (Nonparticipant Directed):	Number of Shares		
	Annaly Capital Mgmt	1,000	25,357	25,360
	Bank of America	1,500	37,628	40,725
	Capital One	3,000	74,504	78,540
	Citigroup	1,250	33,060	35,663
	Regions Financial	1,000	22,133	25,340
	Bank Amer Corp DIV 6.20% FREQ-QTRLY	6,000	150,002	164,640
	General Elec Cap corp	4,400	100,992	109,824
	JP Morgan Chase	6,000	150,002	161,820
	ML PFD Capital Trust III	4,000	100,000	108,680
	Royal Bank Scotland Grp	8,000	200,000	203,600
	SCE Tr II Pfd Shs	4,600	100,229	111,182
	Wells Fargo New Dep Sh 5.25%	10,000	249,281	251,900
	Total Preferred Stocks		1,243,188	1,317,274

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Money Market Funds (Nonparticipant Directed):			
*	Snowden 242	General Money Market	$ 22,042	$ 22,042
*	Snowden 018	General Money Market	37,394	37,394
*	Snowden 005	General Money Market	96,552	96,552
*	Americas United Bank	Business Money Market	1,131,553	1,131,553
*	Banc of California	Business Money Market	330,264	330,264
	Total Money Market Funds		1,617,805	1,617,805
	Exchange-Traded and Closed-End Funds (Nonparticipant Directed):			
	First Trust	2,500 shares	51,007	50,025
	I Shares TR S&P U.S. PFD STK Index	2,500 shares	97,849	95,175
	I Shares TR Core S&P Small- Cap ETF	900 shares	52,272	69,129
	Vanguard Index Fds Growth ETF	950 shares	99,139	133,618
	Wisdomtree TR Midcap	3,600 shares	100,412	127,008
	Neuberger Berman	3,800 shares	76,120	35,644
	Western Asset High Inc. Fd II	1,500 shares	15,231	10,455
	Total Exchange-Traded and Closed-End Funds (Nonparticipant Directed)		492,030	521,054
	Certificates of Deposit (Nonparticipant Directed):			
	JP Morgan Chase BK NA	Variable 9/30/19	104,002	109,242
	Total Certificates of Deposit		104,002	109,242
	Mutual Funds (Nonparticipant Directed):	Number of Shares		
	American Cap World Growth & Income Fd	852	42,382	43,507
	American EuroPacific Growth	769	41,216	43,109
	American Fundamental Inv F2	703	42,601	43,750
	Blackstone GSO Strategic	6,292	119,059	98,848
	Eaton Vance Floating Rate Income Fund	12,385	231,585	202,003
	Doubleline Income Solutions	6,495	152,605	131,137
	First Eagle Global	711	41,812	42,140
	FPA Crescent Fd Instl	1,204	41,045	41,778
	Invesco Equal Wghtd S&P 500	724	41,263	43,821
	Loomis Sayles Strategic	27,838	413,601	404,758
	MFS Bond Fund	17,679	247,407	249,985
	Blackrock Taxable Muni Bd	10,395	237,875	241,052
	Nuveen Build Amer Bd Fd	11,374	239,332	249,997
	Oakmark I	522	41,717	44,057
	Oakmark International II	1,501	41,266	42,873
	Pimco All Asset	43,482	445,769	388,294
	Pimco Dynamic Credit Income Fund	12,984	301,932	291,368
	Pimco Foreign Bond	21,981	237,582	221,129
	Total Mutual Funds (Nonparticipant Directed)		2,960,049	2,823,606

(Continued)

F. GAVIÑA & SONS, INC. 401(k) PROFIT SHARING PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

Form 5500, Schedule H, Line i
Employer I.D.: #95-2922751
Plan: #002

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including Maturity Base, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
	Pooled Separate Accounts (Participant Directed):			
*	Hartford Life Insurance Company	Europacific Growth Fund	**	$ 539,032
*	Hartford Life Insurance Company	New Perspective	**	5,621
*	Hartford Life Insurance Company	Franklin High Income A	**	49,366
*	Hartford Life Insurance Company	MFS Government Securities	**	179,210
*	Hartford Life Insurance Company	PIMCO Total Return A	**	887,051
*	Hartford Life Insurance Company	Invesco Equity and Income A	**	53,548
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2030 A	**	11,090
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2035 A	**	6,900
*	Hartford Life Insurance Company	JPMorgan Smart Retirement 2045 A	**	7,734
*	Hartford Life Insurance Company	Capital World Growth And Income Fund	**	155,828
*	Hartford Life Insurance Company	The Investment Company Of America	**	108,013
*	Hartford Life Insurance Company	Alger Capital	**	485,747
*	Hartford Life Insurance Company	Oppenheimer International Growth A	**	64,482
*	Hartford Life Insurance Company	The Growth Fund Of America	**	962,726
*	Hartford Life Insurance Company	BlackRock Equity Dividend A	**	174,243
*	Hartford Life Insurance Company	Washington Mutual Investors Fund	**	1,002,749
*	Hartford Life Insurance Company	MM S&P Mid Cap	**	256,830
*	Hartford Life Insurance Company	MM MSCI EAFE International Index R4	**	72,515
*	Hartford Life Insurance Company	BNY Mellon DL SM Cap	**	91,290
*	Hartford Life Insurance Company	Loomis Sayles Bond Admin	**	149,896
*	Hartford Life Insurance Company	MM Russell 2000 Small Cap Index R4	**	336,646
*	Hartford Life Insurance Company	JP Morgan Large Cap	**	31,952
	Total Pooled Separate Accounts (Participant Directed)			5,632,469
	Group Annuity Contract (Participant Directed):			
*	Hartford Life Insurance Company	Fixed Account	***	300,929
	Total Net Assets Held for Investment			$ 23,418,820

* Party-in-interest
** Cost information excluded as permitted for participant-directed accounts
*** Stated at contract value

(Continued)