	m 5500-SF	Short Form Annu	of Small Emplo	oyee		DMB Nos. 1210-0110 1210-0089		
	tment of the Treasury nal Revenue Service	This form is required to be file	d unde					2017
	partment of Labor enefits Security Administration	Income Security Act of 1974		A), and sections 605 nue Code (the Code)		Internal		orm is Open to ic Inspection
Pension Be	nefit Guaranty Corporation	Complete all entries in a		ance with the instru	uctions to the Form 55	500-SF.	1 0.01	ie inspection
Part I		Identification Information						
For calenda	ar plan year 2017 or fi	scal plan year beginning 01/01/2		multiple, employer pla		2/31/2017	alving this has	v must sttash s
A This retu	urn/report is for:	X a single-employer plan	lis		in (not multiemployer) (ployer information in ac		-	
D This sector		a one-participant plan	a	loreign plan				
B This retu	im/report is	the first return/report	the	e final return/report				
		an amended return/report	as	short plan year return	/report (less than 12 m	onths)		
C Check b	oox if filing under:	X Form 5558	au	utomatic extension		DFVC	program	
		special extension (enter descr	ription)					
Part II	Basic Plan Info	prmation—enter all requested inf	formatio	on				
1a Name o	•					1b Thr		
AMEDEX, LF	P DEFINED BENEFIT	RETIREMENT PLAN				•	n number I) ▶	001
						1c Effe	ective date of	f plan /1998
		oyer, if for a single-employer plan) m, apt., suite no. and street, or P.C) Box)			2b Emp (EIN	oloyer Identif	ication Number
City or	City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) XCEL REALTY ADVISORS LP							164638 hone number
							516-365	
100 GARDEN	100 GARDEN CITY PLAZA - SUITE 432							see instructions)
GARDEN CIT							5313	90
0						2h		-1.
Ja Plan ad	aministrator's name a	nd address X Same as Plan Spor	nsor.			JD Adn	ninistrator's I	EIN
						3c Adn	ninistrator's t	elephone number
		e plan sponsor or the plan name ha				4b EIN		
a Sponso	· · ·	nisor s name, Env, the plan name a		plan number nom in	e last return/report.	4d PN		
C Plan Na	ame							
5a Total n	number of participants	at the beginning of the plan year				5a		2
		at the end of the plan year				5b		2
		account balances as of the end of	•			5c		
d(1) Tota	al number of active pa	rticipants at the beginning of the pla	an yea	r		5d(1)		2
d(2) Total number of active participants at the end of the plan year								2
		terminated employment during the				5e		0
Caution: A	penalty for the late	or incomplete filing of this return	n/repor	t will be assessed u	unless reasonable cau			
SB or Sche		ther penalties set forth in the instruct nd signed by an enrolled actuary, a ploto						
		l/valid electronic signature.		10/11/2018	IVAN DOCHTER			
HERE	Signature of plan a	Ŭ		Date	Enter name of individ	ual signing	i as nlan adr	ninistrator
SIGN				Duio				
HERE	Signature of omet	wer/nlan sponsor		Date	Enter name of individ	ual signing	as omelous	ar or plan sponsor
	Signature of emplo	yen/pian sponsor		Date	Enter name of individe	uai siyiiing	i as employe	a or plan sponsor

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

Form 5500-SF (2017) v.170203

-	6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.)b Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA)										
	under 29 CFR 2520.104-46? (See instructions on waiver eligibility a	and condit	tions.)		·····	·····		X Yes No			
	If you answered "No" to either line 6a or line 6b, the plan cann										
С	If the plan is a defined benefit plan, is it covered under the PBGC ir							Not determined			
	If "Yes" is checked, enter the My PAA confirmation number from th	ne PBGC p	premium filing for this p	lan yea	r		(Se	e instructions.)			
Pa	rt III Financial Information										
7	Plan Assets and Liabilities		(a) Beginning	of Year			(b) End of Y	'ear			
а	Total plan assets	. 7a		79760				87290			
b	Total plan liabilities	. 7b		0				0			
С	Net plan assets (subtract line 7b from line 7a)	. 7c	16	79760			18	87290			
8	Income, Expenses, and Transfers for this Plan Year		(a) Amour	nt			(b) Total				
а	Contributions received or receivable from: (1) Employers	8a(1)		56578							
	(2) Participants	. 8a(2)									
	(3) Others (including rollovers)	. 8a(3)									
b	Other income (loss)	. 8b	1	54242							
С	Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c					2	210820			
d	Benefits paid (including direct rollovers and insurance premiums to provide benefits)	. 8d		3290							
е	Certain deemed and/or corrective distributions (see instructions)	. 8e									
f	Administrative service providers (salaries, fees, commissions)	. 8f									
g	Other expenses	. 8g									
h	Total expenses (add lines 8d, 8e, 8f, and 8g)	. 8h						3290			
i	Net income (loss) (subtract line 8h from line 8c)	. 8i					2	207530			
j	Transfers to (from) the plan (see instructions)	- 8j									
Pa	rt IV Plan Characteristics		-								
9a	If the plan provides pension benefits, enter the applicable pension 1A 1I	feature co	odes from the List of Pl	an Cha	racteri	stic Co	des in the instructi	ons:			
b	If the plan provides welfare benefits, enter the applicable welfare for	eature coo	des from the List of Pla	n Chara	acterist	tic Cod	les in the instructio	ns:			
Par	t V Compliance Questions										
10	During the plan year:				Yes	No	Amo	ount			
а	Was there a failure to transmit to the plan any participant contribu										
	described in 29 CFR 2510.3-102? (See instructions and DOL's V Program)	•	•	10a		x					
b	Were there any nonexempt transactions with any party-in-interest			104							
	reported on line 10a.)			10b		Х					
C	Was the plan covered by a fidelity bond?			10c	Х			115000			
d	Did the plan have a loss, whether or not reimbursed by the plan's by fraud or dishonesty?		10d		x						
e	Were any fees or commissions paid to any brokers, agents, or oth carrier, insurance service, or other organization that provides som the plan? (See instructions.)	ne or all of	the benefits under	10e		x					
f	Has the plan failed to provide any benefit when due under the pla	ın?		10f		Х					

Х

10g

10h

10i

g Did the plan have any participant loans? (If "Yes," enter amount as of year-end.)

h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)

i,

If 10h was answered "Yes," check the box if you either provided the required notice or one of the

exceptions to providing the notice applied under 29 CFR 2520.101-3.....

r

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Page 3- 1

Part	VI	Pension Funding Compliance				
11		nis a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Scl rm 5500) and line 11a below)	nedule	SB		Yes 🗌 No
11a	Ent	er the unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40	. 11a			0
12	ERI	his a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or sectio SA? "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.)	on 302 (of		Yes X No
а	lf a	waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions, ar nting the waiver.	d enter Da		of the lette Year	
lf y	you d	completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.				
b	Ente	r the minimum required contribution for this plan year	12b			
С	Ente	r the amount contributed by the employer to the plan for this plan year	12c			
d		tract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a ative amount)	12d			
е	Will	the minimum funding amount reported on line 12d be met by the funding deadline?		Yes	No	N/A
Part '	VII	Plan Terminations and Transfers of Assets				
13a	Has	a resolution to terminate the plan been adopted in any plan year?		X Yes	, <u></u> р	lo
	lf "Y	es," enter the amount of any plan assets that reverted to the employer this year	. 13a			(
b		re all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the trol of the PBGC?			Yes	K No
С		luring this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s ch assets or liabilities were transferred. (See instructions.)	s) to			
1	3c(1) Name of plan(s): 13c(2) EIN(s)	13c(3	3) PN(s)

	601		,	Oin als. En					Diam			OMB 1	No. 1210-0110	
	-	EDULE SB orm 5500)		Single-Em		ial Inform			Plan					
	•	ment of the Treasury		A	cluar		alioi					2	2017	
	Intern	al Revenue Service		This schedule is req										
	Employee Ber	efits Security Administ		Retirement Income S		ct of 1974 (ERI evenue Code (th			6059 of	the	TI		is Open to Po spection	ublic
	Pension Ber	nefit Guaranty Corporat	tion	File as a	an attach	hment to Form	5500 or	· 5500-8	SF.				-	
Fo	or calendar p	lan year 2017 or	fiscal plan	year beginning 01/	/01/2017			a	nd endin	g 12/	31/20 ⁻	17		
		amounts to nea		-										
	Name of pla		0 will be as	sessed for late filing of	this repo	rt unless reasor	nable cau							
~		.P DEFINED BEN	NEFIT RETI	IREMENT PLAN					Three-dig plan num		1)	•	001	
									plannan		•)	, I		
~	Dian an ana				0.05					ا ما م مدانا م		Niuma ha n (l		
C		ALTY ADVISORS		2a of Form 5500 or 5500	0-5F			DE	mpioyer	11-31		Number (E	=11N)	
					1						0.000	·		
Е	Type of plan	: X Single	Multiple-A	Multiple-B		F Prior year pla	an size:	X 100	or fewer	101	-500	More th	nan 500	
	Part I	Basic Informa	ation											
1		valuation date:		Month Da	ay <u>01</u>	Year 20	017	_						
2														
	_									2a			-	6865
<u> </u>							(1)	Numbe	r of	2b	stod F	unding	167 (3) Total F	76865 unding
							articipar		(2) VE	Targe	-	(3) Total P Targe		
	a For ret	red participants a	and benefic	iaries receiving paymen	nt				0			0		0
	b For ter	minated vested p	articipants.						0			0		0
	C For act	ive participants					·		2			2023708		2023708
							<u> </u>		2		_	2023708		2023708
4	•			ne box and complete line	. ,	()	L							
		0 0 0	01	bed at-risk assumptions						4a	_			
				umptions, but disregard nsecutive years and disr						4b				
5										5				6.07 %
6	Target no	ormal cost								6				4790
Sta	To the best of accordance wit	h applicable law and re	rmation supplie	ed in this schedule and accompany ny opinion, each other assumpti- sperience under the plan.										
	SIGN HERE											10/06/201	8	
			Sigr	nature of actuary								Date		
	MARK SHE	MTOB, F.S.A.						_				17-0376	7	
			Type or p	print name of actuary						Most			nt number	
	LAIKEN ASS	SOCIATES, INC.		Firm name				_	To	lonhond		12-661-44	ing area code	2)
		TH STREET NY 10036-4202									e num		ang area coue	=)
			Ad	Idress of the firm				_						
	e actuary ha	s not fully reflecte	ed any regu	ulation or ruling promulg	jated und	ler the statute ir	n complet	ting this	schedule	e, check	the b	ox and se	e	
Fo	or Paperwor	k Reduction Act	Notice, se	ee the Instructions for	Form 55	00 or 5500-SF.					S	chedule S	B (Form 550) v.	0) 2017 170203

Pa	art II	Begin	ning of Year	Carryov	er and Prefunding B	alar	nces						
								(a) Ca	arryover balanc	e	(b)	Prefundir	ng balance
7					able adjustments (line 13 fro					0			68
8				5	nding requirement (line 35 f					0			68
9	Amount	remaining	g (line 7 minus line	e 8)						0			0
10	Interest	on line 9 ι	using prior year's	actual retui	m of <u>4.12</u> %					0			0
11	Prior yea	ar's exces	s contributions to	be added t	o prefunding balance:								
	a Presei	nt value o	f excess contribut	ions (line 3	8a from prior year)								0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>6.27</u> %								0					
	b(2) Int	erest on l	ine 38b from prior	year Sche	dule SB, using prior year's	actua	al 🚽						
					r to add to prefunding balanc	 æ							0
	d Portio	n of (c) to	be added to pref	unding bala	ance								0
12	12 Other reductions in balances due to elections or deemed elections										0		
13	13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)0											0	
Р	art III	Fun	ding Percenta	ages							•		
				-								. 14	82.86%
												. 15	82.86%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement								uce current	16	84.09%			
17					less than 70 percent of the							. 17	%
Р	Part IV Contributions and Liquidity Shortfalls												
18				1 3	ar by employer(s) and empl	oyee							
()	(a) Dat MM-DD-Y		(b) Amount p employer		(c) Amount paid by employees	((a) Da (MM-DD-)		(b) Amount employe		у	c) Amoui emplo	nt paid by ovees
· · · ·	9/13/2018	,		56578	0	Ì		,		()			,
								_				-	
						То	otals 🕨	18(b)		56	5578 18(c)		0
19	Discount	ed emplo	over contributions	 see instru 	uctions for small plan with a	a valu	ation date	e after the l	beginning of the				
	a Contri	butions a	llocated toward ur	npaid minin	num required contributions	from	prior year	rs		19a	-		0
					usted to valuation date					19b	-		0
	C Contributions allocated toward minimum required contribution for current year adjusted to valuation date												
20			tions and liquidity										
		•	-		e prior year?								Yes No
	b If line	20a is "Y	es," were required	l quarterly i	installments for the current	year	made in a	a timely ma	anner?				Yes X No
	C If line	20a is "Ye	es," see instructio	ns and con	nplete the following table as	s appl	licable:						
		(1) 1~	+		Liquidity shortfall as of en	d of d	quarter of	. ,				(1) 1+4	
	(1) 1st (2) 2nd (3) 3rd (4) 4th												

Page 3

P	Part V Assumptions Used to Determine Funding Target and Target Normal Cost										
21	Discount	rate:									
	a Segm	ent rates:	1st segment: 4.16%	2nd segment: 5.72%	3rd segment: 6.48 %			N/A, fu	l yield o	curve	used
	b Applica	able month (er	nter code)			21	b		0		
22	Weighted	d average retire	ement age			22	2		65		
23	Mortality	table(s) (see i	instructions) X Pres	scribed - combined	escribed - separate	Sub	ostitute				
Pa	art VI	Miscellane	ous Items								
24		-	•	arial assumptions for the curren					·	Yes	X No
25	Has a me	ethod change b	been made for the current pla	n year? If "Yes," see instruction	s regarding required attacl	hment				Yes	X No
26	Is the pla	in required to p	provide a Schedule of Active F	Participants? If "Yes," see instru	ctions regarding required	attach	ment			Yes	× No
27			alternative funding rules, ente	r applicable code and see instru	ctions regarding	27	7				
Pa	art VII	Reconcilia	ation of Unpaid Minim	um Required Contributi	ons For Prior Years						
28	Unpaid m	ninimum requir	ed contributions for all prior ye	ears		28	3				0
29				unpaid minimum required contri		29	•				0
30	Remainir	ng amount of u	inpaid minimum required cont	ributions (line 28 minus line 29)		. 30)				0
Pa	art VIII	Minimum	Required Contribution	n For Current Year							
31	31 Target normal cost and excess assets (see instructions):										
	a Target	normal cost (lii	ne 6)			31	а			4	1790
	b Excess assets, if applicable, but not greater than line 31a										
32	32 Amortization installments: Outstanding Balance Installment										
	a Net she	ortfall amortiza	tion installment			34684	3			44	494
	b Waiver	r amortization i	installment				0				0
33				er the date of the ruling letter gra) and the waived amount		33	3				
34	Total fun	ding requireme	ent before reflecting carryover	/prefunding balances (lines 31a	- 31b + 32a + 32b - 33)	. 34	1			49	9284
				Carryover balance	Prefunding bala	nce		To	al bala	nce	
35			e to offset funding	0		C)				0
36	Additiona	al cash require	ment (line 34 minus line 35)		•	36	5			49	9284
37			•	ntribution for current year adjust	•	37	,			49	9309
38	Present	value of excess	s contributions for current yea	r (see instructions)							
	a Total (e	excess, if any,	of line 37 over line 36)			38	а				25
	b Portion	n included in lin	ne 38a attributable to use of pr	refunding and funding standard	carryover balances	38	b				0
39	Unpaid m	ninimum requir	ed contribution for current yea	ar (excess, if any, of line 36 ove	[.] line 37)	39	•				0
40	Unpaid m	ninimum requir	ed contributions for all years.			40)				0
Pa	rt IX	Pension	Funding Relief Under	Pension Relief Act of 20	10 (See Instructions	s)					
41	If an elec	tion was made	e to use PRA 2010 funding reli	ef for this plan:							
	a Schedu	ule elected					🗌 2	plus 7 yea	rs	15 y	ears
	b Eligible	e plan year(s) f	or which the election in line 4	1a was made			2008	2009	2010		2011
42	Amount c	of acceleration	adjustment			42	2		-	_	
43	Excess in	stallment acce	eleration amount to be carried	over to future plan years		43	3				

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

- a. <u>Mortality</u>: The 2017 Static Mortality Tables were used for the period after retirement age. The optional combined tables for small plans were used, separately for male and female lives. To value benefits subject to IRC Section 417(e), the 2017 Applicable Mortality Table was used
- b. <u>Interest</u>: Benefits were discounted by 4.16% (first segment rate) for payments expected from January 1, 2017 December 31, 2021, by 5.72% (second segment rate) for payments expected from January 1, 2022 December 31, 2036, and by 6.48% (third segment rate) for payments expected on or after January 1, 2037.
- c. <u>Salary Scale</u>: Not applicable.
- d. <u>Severance of Employment</u>: No discount for severance of employment was included in the factors on which costs were based.
- e. <u>Assumed Retirement Age</u>: It was assumed that all employees would retire at their Normal Retirement Age, or in one year if at or past Normal Retirement Age.
- f. <u>Form of Benefit Payment</u>: It was assumed that there would be a 100% probability of electing lump sum payments and a 0% probability of electing monthly annuity payments.
- g. <u>Actuarial Value of Asset Valuation Method</u>: The fair market value of assets was used.
- h. <u>Expenses</u>: The Target Normal Cost was increased by \$6,795 to reflect anticipated expenses to be paid from the plan in the current year.
- j. <u>Actuarial Cost Method</u>: The method prescribed by IRC Section 430 was used.
- k. <u>Plan Termination</u>: The Plan has been terminated effective August 31, 2017.

SCHEDULE SB	SCHEDULE SB Single-Employer Defined Benefit Plan						
(Form 5500)	Actuarial Inform					2047	
Department of the Treasury Internal Revenue Service	This school do is nonvited to be filed under a	action 101	of the Employee		,	2017	
Department of Labor Employee Benefits Security Administration	This schedule is required to be filed under se Retirement Income Security Act of 1974 (ERI Internal Revenue Code (th	SA) and se				s Open to Public	
Pension Benefit Guaranty Corporation					Ins	pection	
For calendar plan year 2017 or fiscal pla	File as an attachment to Form an year beginning 01/01/2017	5500 of 55	and ending		12/31/20	017	
Round off amounts to nearest doll			3				
Caution: A penalty of \$1,000 will be	assessed for late filing of this report unless reasor	hable cause	e is established.	ē			
A Name of plan		1	B Three-digi	it	20		
AMEDEX, LP DEFINED BEN	NEFIT RETIREMENT PLAN		plan numb	per (PN) 🕨	001	
C Plan sponsor's name as shown on lin	e 2a of Form 5500 or 5500-SF	1	D Employer le	dentific	ation Number (E	IN)	
EXCEL REALTY ADVISORS	LP	1	1-3164638	3			
E Type of plan: X Single I Multiple-	A Multiple-B F Prior year pla	an size: 🛛	100 or fewer [] 101-	500 🗌 More th	an 500	
Part I Basic Information							
1 Enter the valuation date:	Month 01 Day 01 Year	2017					
2 Assets:			12		一支公共的		
a Market value				2a		1,676,865	
b Actuarial value				2b		1,676,865	
3 Funding target/participant count bro	eakdown		umber of cipants		sted Funding Target	(3) Total Funding Target	
a For retired participants and bene	ficiaries receiving payment		0		0	0	
b For terminated vested participan	ts		0		0	C	
			2		2,023,708	2,023,708	
d Total			2		2,023,708	2,023,708	
4 If the plan is in at-risk status, check	the box and complete lines (a) and (b)						
a Funding target disregarding pres	cribed at-risk assumptions			. 4a			
b Funding target reflecting at-risk a status for fewer than five consec	assumptions, but disregarding transition rule for pla utive years and disregarding loading factor	ans that hav	ve been in at-ris	4b			
_				. 5		6.07%	
6 Target normal cost				. 6		4,790	
	oplied in this schedule and accompanying schedules, statements ar In my opinion, each other assumption is reasonable (taking into acc dexperience under the plan.						
SIGN HERE	IX			10	-6-20,	18	
MARK SHEMTOB, F.S.A.	ignature of actuary				Date 1703765	1	
			-				
LAIKEN ASSOCIATES, INC.	or print name of actuary			Most	recent enrollmer 212-661-4		
	Firm name		Tel	ephone	number (includ	ing area code)	
56 WEST 45TH STREET							
NEW YORK NY 10	0036-4202						
	Address of the firm						
If the actuary has not fully reflected any re instructions	egulation or ruling promulgated under the statute ir	n completin	g this schedule	, check	the box and see	e []	
the second se	see the Instructions for Form 5500 or 5500-SF				Schedule S	B (Form 5500) 2017	

Schedule SB (Form 5500) 2017

Page 2

Part III Descinning of Year Carryover and Prefunding Balances (a) Carryover balance (b) Prefunding balances 7 Balance at beginning of year after applicable significances (inc 13 from park year) 0 568 8 Potion detected for use to fister prior year's funding requirement (inc 35 from prior year) 0 568 9 Amount remaining (line 7 mouse line 9) 0 568 9 Amount remaining (line 7 mouse line 9) 0 568 10 Interest on the sous, farry, or and state from prior year) 0 568 10 Interest on the sous diff or the source in any state from prior year) 0 0 0 10 Interest on the sous diff or the source in any state from prior year 0 0 0 0 12 Other modulate at sogning of current plan year to add to prefunding balance. 0 </th <th></th> <th>0111 0000) 2017</th> <th></th> <th></th> <th>1 age</th> <th>-</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>		0111 0000) 2017			1 age	-						
7 Datace at beginning of price year after applicable adjustments (line 13 from prior year) 0 68 8 Potion elocide for use to files prior years funding requirement (line 25 from prior year) 0 0 10 Interest on the Susing prory year's actual remaining (line 7 minus line 8)	Part II Begin	ining of Year C	Carryove	er and Prefunding Ba	lances	(a) C	arrvover balance		(b) Pre	fundin	a balar	ice
year) 0 668 9 Amount remaining (ine 2 minus line 8) 0 0 10 Interest on line 9 using prior year's notus intum of	And the second s				Contraction of the Contraction o	(4) 0			(5	255
10 Interest on line 5 using provide a club return of128		이 같은 사람이 집에 가지 않는 것이 같이 많이 많이 많이 많이 많이 했다.	and the second second second second		and the second			o				68
11 Procreating access contributions to be added to prefunding balance: a Present value of access contributions (the 28a from prior year) 0 01(1) Integent value of access contributions (the 28a from prior year) 0 0 02(2) Integent value of access contributions (the 28a from prior year) 0 0 02(2) Integent on the costs, if any on the 23b from prior year's actual return 0 0 03 Balance at beginning of current plan year's to add to prefunding balance. 0 0 12 Other reductions in balances due to elections or deemed elections . 0 0 0 13 Balance at beginning of current year (the 24 hine 10 = time 11d - time 12,	9 Amount remaining	(line 7 minus line	8)					0				0
a Present value of excess contributions (in a 38a from pick year) b(1) Interest on the cases, if any, of line 38a rore line 38b from pick year b(2) Interest on line 38b from pick year is detected interest rise of	10 Interest on line 9	using prior year's a	ctual return	n of <u>4.12</u> %				0				0
b(1) Interest on the excess, if any, of the 38a over line 38b from prior year Scheduk 65, using prior year's effective interest rate of <u>6.27%</u> b(2) Interest on line 38b from prior year's detective interest rates of <u>6.27%</u> of Teld svallable at beginning of current plan year to add to prefunding balance	11 Prior year's exces	s contributions to b	e added to	o prefunding balance:								
Schedule SB, using prior year's effective interest rate of	a Present value o	f excess contribution	ons (line 38	8a from prior year)								0
b (2) Interest on line 38b from prior year's Schedule SB, using prior year's actual returns the sector of a current plan year to add to prefunding balance.	b(1) Interest on t Schedule St	he excess, if any, o 3, using prior year's	of line 38a s effective i	over line 38b from prior yea interest rate of <u>6.27</u> %	r 6							0
d Portion of (c) to be added to prefunding balance. 0 12 Other reductions in balances due to elections or deemed elections. 0 0 13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12). 0 0 0 14 Funding Percentages 14 92.86% 15 82.86% 15 Algusted funding target attainment percentage 15 82.86% 16 Prior year's funding requirement. 16 84.09% 17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage. 17 % 18 Contributions and Liquidity Shortfalls (a) Date (b) Amount paid by (c) Amount paid by (c) Amount paid by (c) Amount paid by (c) Amount paid by employee(s) 0 0 0 0 0 0 0 0 18 Contributions and to the plan to the plan year by employer(s) and employees: (a) Date (b) Amount paid by (c) Amount paid	The second construction of the second			Contraction of the Contract Beneficial Contraction of the Contract Contract	ctual							
12 Other reductions in balances due to elections or deemed elections 0 0 13 Balance at beginning of current year (line 9 + line 10 + line 112) 0 0 14 Funding target atlainment percentage 14 82.865% 15 Adjusted funding target atlainment percentage 15 82.865% 16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current 16 84.0.9% 17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage. 17 % 18 Contributions and o the plan year by employer(s) and employees: (a) Date (b) Amount paid by employer(s) (c) Amount paid by employer(s) (b) Amount paid by employer(s) (c) Amount paid by em	c Total available a	t beginning of currer	nt plan year	to add to prefunding balance	•	出品规则						0
10 Under to be decide a set beginning of urent year (line 9 + line 11d - line 12)	d Portion of (c) to	be added to prefu	nding bala	nce						194 (194 - 197 (197 (197 (197 (197 (197 (197 (197		0
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16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year and a sested of the plan is less than 70 percent of the funding target, enter such percentage. 17 84 ± 0.9% 17 17 % Part IV Contributions and Liquidity Shortfalls 18 Contributions and Liquidity Shortfalls 18 Contributions and Liquidity Shortfalls 19 (a) Date (b) Amount paid by (c) Amount p	Second Se											
year's funding requirement	16 Prior year's fundir	ng percentage for p	urposes of	f determining whether carryo	over/prefundir	ng balance	es may be used to	reduce curr	ent	20.000	6402.0008 6400.000	
Part IV Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(a) and employees: (a) Date (b) Amount paid by (c) Amount paid by (d) Date (b) Amount paid by (e) Amount paid by (f) Amount paid by (f) Amount paid by (g) Date (h) Amount paid by (g) Date (g) Date	· · · · · · · · · · · · · · · · · · ·	the second s	and the second second second second							1451	84	
18 Contributions made to the plan for the plan year by employer(s) and employees: (a) Date (b) Amount paid by employees (b) Amount paid by employer(s) (c) Amoun	disconcerna services				unung larget,	enter suc	an percentage			17		%
(a) Date (MM-DD-YYYY) (b) Amount paid by employer(s) (c) Amount paid by (MM-DD-YYYY) (b) Amount paid by employer(s) (c) Amount paid by employer(s) 09/13/2018 56,578 0 0 100 56,578 0 0 100 56,578 0 0 100 56,578 0 0 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100					Web and the second second			No.				
(MM-DD-YYYY) employer(s) employees (MM-DD-YYYY) employer(s) employees 09/13/2018 56,578 0 0 0 0 0 0 09/13/2018 56,578 0 </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>te</td> <td>(b) Amount n</td> <td>aid by</td> <td>(c)</td> <td>Amour</td> <td>nt naid l</td> <td></td>						te	(b) Amount n	aid by	(c)	Amour	nt naid l	
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19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years	09/13/2018	5	56,578	0								
19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years												
19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years												
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19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years												
19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years												
19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years												
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19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum required contributions from prior years			STATE STATE		Totale N	18/b)		EC E70 1	19/0)			
a Contributions allocated toward unpaid minimum required contributions from prior years	Participan and an angle of the				Constanting the				0(0)			0
b Contributions made to avoid restrictions adjusted to valuation date 19b 0 c Contributions allocated toward minimum required contribution for current year adjusted to valuation date 19c 49,309 20 Quarterly contributions and liquidity shortfalls: 19c 49,309 a Did the plan have a "funding shortfall" for the prior year? X Yes No b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No c If line 20a is "Yes," see instructions and complete the following table as applicable: Liquidity shortfall as of end of quarter of this plan year	in the second strike strike is			•			_					-
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date							-			A.		
20 Quarterly contributions and liquidity shortfalls: Image: Contribution of the plan have a "funding shortfall" for the prior year?												
a Did the plan have a "funding shortfall" for the prior year?				ea contribution for current yea	ar adjusted to v	aluation d	ate	190	Statistics.	Tell Travella	4	9,309
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?		107968 NO. 101 TA		prior voor?				122		5	Ver [
C If line 20a is "Yes," see instructions and complete the following table as applicable: Liquidity shortfall as of end of quarter of this plan year		and dealer many bases and the rest of the second		AND A CONTRACT OF SECOND AND A CONTRACT AND A CONTRACT AND								
Liquidity shortfall as of end of quarter of this plan year						a uniely ma	anner (res [2	7 140
	U IT line 20a is "Y	es, see instruction	is and com			this plan	/ear	in the second				
	(1) 1s	t							(4) 4th		

Schedule SB (Form 5500) 2017

Page 3

Part V A	sumptions Us	ed to Determine	Funding Target and Targ	et Normal Cost		
21 Discount rate			g	,		
a Segment		1st segment: 4.16 %	2nd segment: 5 . 72 %	3rd segment: 6.48%		N/A, full yield curve used
b Applicable	month (enter code)				21b	ः (
22 Weighted av	erage retirement ag	e			22	65
23 Mortality tab	e(s) (see instruction	ns) X Pres	cribed - combined	cribed - separate	Substitu	te
CONTRACTOR OF CONTRACT	cellaneous Ite					
dissing and an						and a second second
HORDER OF STREET, STRE			arial assumptions for the current p			
25 Has a metho	d change been mad	le for the current plan	year? If "Yes," see instructions r	egarding required attach	nment	Yes 🗴 No
26 Is the plan re	quired to provide a	Schedule of Active P	articipants? If "Yes," see instructi	ons regarding required a	attachment	Yes 🛛 No
			applicable code and see instructi		27	
Part VII R	econciliation of	f Unpaid Minimu	Im Required Contribution	s For Prior Years		
28 Unpaid mini	num required contril	butions for all prior ye	ears		28	(
	지 않는 것 같은 것 같은 것 같아요. 이렇게 집에서 집에서 가지 않는 것 같아.		Inpaid minimum required contribu		29	1
30 Remaining a	mount of unpaid min	nimum required contr	ibutions (line 28 minus line 29)		30	(
Part VIII M	inimum Requir	ed Contribution	For Current Year			
		assets (see instructio				
a Target nor	mal cost (line 6)				31a	4,790
b Excess as	sets, if applicable, b	ut not greater than lir	ne 31a		31b	
32 Amortization	installments:			Outstanding Bala	ince	Installment
a Net shortf	II amortization insta	Ilment		. 34	46,843	44,494
b Waiver an	ortization installme	nt			0	
33 If a waiver h (Month			r the date of the ruling letter grant) and the waived amount		33	
34 Total funding	requirement before	e reflecting carryover/	prefunding balances (lines 31a - 3	31b + 32a + 32b - 33)	34	49,28
			Carryover balance	Prefunding bala	nce	Total balance
0.000	cted for use to offse	177				
		A CONTRACT OF A	(0 36	49,284
			tribution for current year adjusted			45,20
			andulion for current year adjusted		37	49,30
38 Present valu	e of excess contribu	itions for current year	(see instructions)			
2007.0					38a	2
Contraction of the second seco			efunding and funding standard ca		38b	
39 Unpaid mini	num required contri	bution for current yea	r (excess, if any, of line 36 over li	ne 37)	39	
La vott construction of an angel specific for	man and a state	UNK STATISTICS IN A		245462300 NO 10 2000 NO 10 10 10	40	
Part IX F	ension Fundin	g Relief Under I	Pension Relief Act of 2010) (See Instructions	5)	
41 If an election	was made to use P	RA 2010 funding reli	ef for this plan:			
a Schedule	elected					2 plus 7 years
b Eligible pla	in year(s) for which	the election in line 41	a was made		20	08 2009 2010 2011
42 Amount of a	celeration adjustme	ent			42	
43 Excess insta	Iment acceleration	amount to be carried	over to future plan years		43	

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

- a. <u>Mortality</u>: The 2017 Static Mortality Tables were used for the period after retirement age. The optional combined tables for small plans were used, separately for male and female lives. To value benefits subject to IRC Section 417(e), the 2017 Applicable Mortality Table was used
- b. <u>Interest</u>: Benefits were discounted by 4.16% (first segment rate) for payments expected from January 1, 2017 December 31, 2021, by 5.72% (second segment rate) for payments expected from January 1, 2022 December 31, 2036, and by 6.48% (third segment rate) for payments expected on or after January 1, 2037.
- c. <u>Salary Scale</u>: Not applicable.
- d. <u>Severance of Employment</u>: No discount for severance of employment was included in the factors on which costs were based.
- e. <u>Assumed Retirement Age</u>: It was assumed that all employees would retire at their Normal Retirement Age, or in one year if at or past Normal Retirement Age.
- f. <u>Form of Benefit Payment</u>: It was assumed that there would be a 100% probability of electing lump sum payments and a 0% probability of electing monthly annuity payments.
- g. <u>Actuarial Value of Asset Valuation Method</u>: The fair market value of assets was used.
- h. <u>Expenses</u>: The Target Normal Cost was increased by \$6,795 to reflect anticipated expenses to be paid from the plan in the current year.
- j. <u>Actuarial Cost Method</u>: The method prescribed by IRC Section 430 was used.
- k. <u>Plan Termination</u>: The Plan has been terminated effective August 31, 2017.

Schedule SB, Part V - Summary of Plan Provisions

- a. Plan Status: Terminated August 31, 2017. Frozen, eligibility/service as of December 31, 2007.
- b. <u>Eligibility</u>: All employees are eligible for membership in the Plan as of January 1 or July 1 following the completion of a year of service and attainment of age 21.
- c. <u>Normal Retirement</u>: Later of age 65, or the 5th anniversary of plan participation.
- d. <u>Considered Compensation</u>: Average total pay during the highest consecutive 36 months of employment during the last ten (10) years of employment.
- e. <u>Normal Retirement Benefits</u>: Monthly benefit equal to 8.5% of average compensation for each year of service since January 1, 1993, to a maximum of 10 years. *Benefit accruals are frozen as of December 31, 2007.*
- f. Standard Retirement Benefit: Life Annuity.
- g. Death Benefits: Full actuarial value of the accrued benefit.
- h. <u>Severance Benefits</u>: Vested in the accrued benefit based on years of service. Less than 2 years of service, 0%, for 2 years of service 20%, 20% for the next 4 years to 100% after 6 years of service. Years of service prior to the Plan's effective date shall be disregarded.
- i. <u>Disability Benefits</u>: Based upon physician determination and eligibility for Social Security disability benefits; the annual benefit is the reduced value of the accrued benefit.
- j. <u>Deferred Retirement</u>: Benefit calculated as of Normal Retirement Date actuarial increased to reflect the period that the commencement of the benefit is deferred. Not less than the benefit calculated through actual retirement date.
- j. Accrued Benefit: Unit Accrual Rule based on plan formula.
- k. <u>Actuarial Equivalence</u>: Applicable Mortality Table for the period after retirement and the 30year Treasury rate for the November preceding the year of determination. Subject to mortality and interest rates under IRC 415 for lump sums.
- I. <u>Optional Forms of Benefits</u>: Life annuities with and without guaranteed periods, joint & survivor annuities.

Significant Events: None.

Changes in Provisions: None

Amedex LP Defined Benefit Retirement Plan

EIN/PN: 11-3164638 / 001

Schedule SB, line 19 - Discounted Employer Contributions

Date	Contribution	<u>Application</u>	Late Quarterly <u>Rate</u>	Effective <u>Rate</u>	Interest Adjusted <u>Contribution</u>
9/13/2018	11,089	1st Quarter	11.07%	6.07%	9,399
9/13/2018	11,089	2nd Quarter	11.07%	6.07%	9,508
9/13/2018	11,089	3rd Quarter	11.07%	6.07%	9,618
9/13/2018	11,089	4th Quarter	11.07%	6.07%	9,729
9/13/2018	12,222	2017 Plan Year	N/A	6.07%	11,055
Totals	56,578				49,309

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

The Weighted Average Retirement Age is equal to the straight average of the participants' normal retirement ages.

Amedex LP Defined Benefit Retirement Plan

EIN/PN: 11-3164638 / 001

Schedule SB, line 32 - Schedule of Amortization Bases

Date <u>Established</u>	Type of <u>Base</u>	Shortfall Amortization <u>Installment</u>	Present Value of Future Amortization <u>Installments</u>	Years <u>Remaining</u>
01/01/2011	Shortfall	N/A	N/A	1
01/01/2012	Shortfall	N/A	N/A	2
01/01/2013	Shortfall	N/A	N/A	3
01/01/2014	Shortfall	2,838	10,690	4
01/01/2015	Shortfall	23,684	109,331	5
01/01/2016	Shortfall	25,267	135,771	6
01/01/2017	Shortfall	14,952	91,051	7
Totals		66,741	346,843	
	_	x 8/12		
Adjusted Sho	ortfall Amortization Installment:	44,494 (1)		

⁽¹⁾ prorated to reflect Plan Termination effective August 31, 2017.

Amedex LP Defined Benefit Retirement Plan

EIN/PN: 11-3164638 / 001

Schedule SB, line 19 - Discounted Employer Contributions

<u>Date</u>	<u>Contribution</u>	<u>Application</u>	Late Quarterly <u>Rate</u>	Effective <u>Rate</u>	Interest Adjusted <u>Contribution</u>
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9/13/2018	11,089	4th Quarter	11.07%	6.07%	9,729
9/13/2018	12,222	2017 Plan Year	N/A	6.07%	11,055
Totals	56,578				49,309

<u>Schedule SB, line 22 – Description of Weighted Average Retirement Age</u>

The Weighted Average Retirement Age is equal to the straight average of the participants' normal retirement ages.

Schedule SB, Part V – Summary of Plan Provisions

- a. <u>Plan Status</u>: Terminated August 31, 2017. Frozen, eligibility/service as of December 31, 2007.
- b. <u>Eligibility</u>: All employees are eligible for membership in the Plan as of January 1 or July 1 following the completion of a year of service and attainment of age 21.
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- d. <u>Considered Compensation</u>: Average total pay during the highest consecutive 36 months of employment during the last ten (10) years of employment.
- e. <u>Normal Retirement Benefits</u>: Monthly benefit equal to 8.5% of average compensation for each year of service since January 1, 1993, to a maximum of 10 years. *Benefit accruals are frozen as of December 31, 2007.*
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- i. <u>Disability Benefits</u>: Based upon physician determination and eligibility for Social Security disability benefits; the annual benefit is the reduced value of the accrued benefit.
- j. <u>Deferred Retirement</u>: Benefit calculated as of Normal Retirement Date actuarial increased to reflect the period that the commencement of the benefit is deferred. Not less than the benefit calculated through actual retirement date.
- j. <u>Accrued Benefit</u>: Unit Accrual Rule based on plan formula.
- k. <u>Actuarial Equivalence</u>: Applicable Mortality Table for the period after retirement and the 30year Treasury rate for the November preceding the year of determination. Subject to mortality and interest rates under IRC 415 for lump sums.
- 1. <u>Optional Forms of Benefits:</u> Life annuities with and without guaranteed periods, joint & survivor annuities.

Significant Events: None.

Changes in Provisions: None

Amedex LP Defined Benefit Retirement Plan

EIN/PN: 11-3164638 / 001

Schedule SB, line 32 - Schedule of Amortization Bases

Date <u>Established</u>	Type of <u>Base</u>	Shortfall Amortization <u>Installment</u>	Present Value of Future Amortization <u>Installments</u>	Years <u>Remaining</u>
01/01/2011	Shortfall	N/A	N/A	1
01/01/2012	Shortfall	N/A	N/A	2
01/01/2013	Shortfall	N/A	N/A	3
01/01/2014	Shortfall	2,838	10,690	4
01/01/2015	Shortfall	23,684	109,331	5
01/01/2016	Shortfall	25,267	135,771	6
01/01/2017	Shortfall	14,952	91,051	7
Totals		66,741	346,843	
		x 8/12		
Adjusted Shortfall Amortization Installment:		44,494 ⁽¹⁾		

⁽¹⁾ prorated to reflect Plan Termination effective August 31, 2017.