

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
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Part I	Annual Report Identification Information
For calendar plan year 2017 or fiscal plan year beginning <u>01/01/2017</u> and ending <u>12/31/2017</u>	
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 <u>THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/2003</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan <u>01/01/2003</u>	
1b Three-digit plan number (PN) ▶	001				
1c Effective date of plan <u>01/01/2003</u>					
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) <u>THE SYNERGY PLAN, LLC</u> <u>230 WEST MONROE</u> <u>SUITE 2400</u> <u>CHICAGO, IL 60606</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>76-0721383</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>312-589-3641</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>561110</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>76-0721383</u>	2c Plan Sponsor's telephone number <u>312-589-3641</u>	2d Business code (see instructions) <u>561110</u>	
2b Employer Identification Number (EIN) <u>76-0721383</u>					
2c Plan Sponsor's telephone number <u>312-589-3641</u>					
2d Business code (see instructions) <u>561110</u>					

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.	12/06/2018	MATTHEW S JARZYNSKI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2017)
v. 170203

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 2075
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) 1930
a(2) Total number of active participants at the end of the plan year	6a(2) 1698
b Retired or separated participants receiving benefits	6b 0
c Other retired or separated participants entitled to future benefits	6c 292
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 1990
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 1
f Total. Add lines 6d and 6e	6f 1991
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 1280
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h 17
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 3D 2G 2J 2K 2F 2T	
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) ☒ 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) ☒ Trust (4) ☐ General assets of the sponsor
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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 _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information 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.	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 THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 THE SYNERGY PLAN, LLC	D Employer Identification Number (EIN) 76-0721383	

Part I	Service Provider Information (see instructions)
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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
MERRILL LYNCH,PIERCE,FENNER & SMITH
13-5674085

(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)

ASCENSUS

11-3665754

(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 37 50 60 64 99	NONE	122838	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

MERRILL LYNCH,PIERCE,FENNER & SMITH

13-5674085

(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 50	NONE	76925	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE SYNERGY PLAN, LTD

76-0721383

(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?
20 50	TRUSTEE	52811	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information 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.	OMB No. 1210-0110 2017 This Form is Open to Public Inspection.
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For calendar plan year 2017 or fiscal plan year beginning 01/01/2017 and ending 12/31/2017

A Name of plan <u>THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>THE SYNERGY PLAN, LLC</u>	D Employer Identification Number (EIN) <u>76-0721383</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: FEDERATED

b Name of sponsor of entity listed in (a): FEDERATED CAPITAL PRESERVATION TRUST

c EIN-PN <u>22-2712853-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2360029</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

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 <u>01/01/2017</u> and ending <u>12/31/2017</u>		
A Name of plan <u>THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>THE SYNERGY PLAN, LLC</u>	D Employer Identification Number (EIN) <u>76-0721383</u>	

	Part I Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	458434	320058
	(2) Participant contributions	1b(2)	178594	138539
	(3) Other	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	92	1980
	(2) U.S. Government securities	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)	899991	864962
	(9) Value of interest in common/collective trusts	1c(9)	2928607	2360029
	(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)	64941875	76059621
	(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
	(15) Other	1c(15)	56002	86253

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	69463595	79831442

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 through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	69463595	79831442
---	-----------	----------	----------

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)	1811225	
(B) Participants	2a(1)(B)	5179152	
(C) Others (including rollovers)	2a(1)(C)	57881	
(2) Noncash contributions	2a(2)		7048258
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	46129	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		46129
(2) Dividends: (A) Preferred stock	2b(2)(A)		1361750
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1361750	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1361750
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		0
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		0
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		48448
(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)		10031859
c Other income	2c		15370
d Total income. Add all income amounts in column (b) and enter total.....	2d		18551814

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	8119920	
(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)		8119920
f Corrective distributions (see instructions)	2f		59412
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)	252574	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		252574
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		8431906

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		10119908
l Transfers of assets:			
(1) To this plan.....	2l(1)		333390
(2) From this plan	2l(2)		85451

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

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

(1) Name: MUELLER & CO., LLP

(2) EIN: 36-2658780

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:

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.).....

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.)

	Yes	No	Amount
4a		X	
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)
JEXET TECHNOLOGIES 401(K) P/S PLAN	45-2429361	001

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 THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 THE SYNERGY PLAN, LLC		D Employer Identification Number (EIN) 76-0721383
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 45-0404698		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2017 v. 170203		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

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

- a** Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%
- b** Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more
- c** What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____



MUELLER & CO., LLP

Certified Public Accountants – Business & Financial Advisors

ASSURANCE

**THE SYNERGY MULTIPLE EMPLOYER
RETIREMENT SAVINGS PLAN**

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2017

MUELLER

Elgin/Orland Park/Chicago
www.muellercpa.com
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847.888.0635 Fax

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

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14300 Ravinia Avenue ■ Orland Park, Illinois ■ 60462

Ph: 708.349.6999 ■ Fax: 708.349.6639 ■ www.muellercpa.com

To the Board of Directors of
The Synergy Plan, LLC
Chicago, Illinois

INDEPENDENT AUDITOR'S REPORT

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of The Synergy Multiple Employer Retirement Savings 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.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information listed in Note 4, which was certified by Ascensus Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2017 and 2016, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

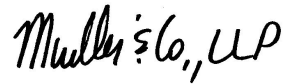
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2017 is required by the Department of Labor'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 trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in black ink that reads "Mullin & Co., LLP". The signature is written in a cursive, flowing style.

Orland Park, Illinois
October 2, 2018

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
Assets:		
Investments at fair value	\$ 78,505,903	\$ 67,926,484
Receivables:		
Employers' contributions	320,058	458,434
Participants' contributions	138,539	178,594
Notes receivable from participants	<u>864,962</u>	<u>899,991</u>
Total receivables	<u>1,323,559</u>	<u>1,537,019</u>
Cash	<u>1,980</u>	<u>92</u>
Total assets	79,831,442	69,463,595
Liabilities:		
Excess contributions payable	<u>56,033</u>	<u>58,977</u>
Net assets available for benefits	<u>\$ 79,775,409</u>	<u>\$ 69,404,618</u>

See notes to financial statements.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2017

Additions to net assets attributed to:

Investment income:

Net appreciation in fair value of investments	\$ 10,046,794
Interest and dividend income from investments	<u>1,410,198</u>

Total investment income \$ 11,456,992

Interest income on notes receivable from participants 46,129

Contributions:

Participants	5,123,119
Employers	1,811,225
Rollover	<u>57,881</u>

Total contributions 6,992,225

Total additions 18,495,346

Deductions from net assets attributed to:

Benefits paid to participants	8,119,920
Administrative expenses	<u>252,574</u>

Total deductions 8,372,494

Net increase 10,122,852

Transfers in from other plans 333,390

Transfers out to other plans (85,451)

Net assets available for benefits at beginning of year 69,404,618

Net assets available for benefits at end of year \$ 79,775,409

See notes to financial statements.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

NOTE 1. DESCRIPTION OF PLAN

The following description of The Synergy Multiple Employer Retirement Savings Plan ("Plan") provides only general information. Participants should refer to the Plan agreement and Recipient Employers' Adoption Agreements for a more complete description of the Plan's provisions.

General

The sponsor of the Plan, The Synergy Plan, LLC ("Company"), is a Professional Employer Organization. Each of its clients is considered a Recipient Employer under the Plan and has executed a Recipient Employer Adoption Agreement, each with its own effective date. The Plan is a defined contribution plan covering the employees of Recipient Employers who have attained the age and eligibility requirements in accordance with the Recipient Employers' Adoption Agreements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Company's Board of Directors oversees governance of the Plan and appoints the Plan's Retirement Savings Plan Committee. The Plan's Retirement Savings Plan Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Board of Directors.

Contributions

Each year, participants may contribute a percentage of pretax annual compensation, as elected in the Recipient Employers' Adoption Agreements. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Recipient Employer contributions are at the discretion of Recipient Employers' management and are set forth in the Recipient Employers' Adoption Agreements.

The Plan allows participants to contribute a percentage of their taxable annual compensation as a Roth 401(k) contribution in lieu of all or a portion of the elective deferrals the participant is otherwise eligible to make to the Plan. Each Recipient Employers' Adoption Agreement may have its own effective date, if elected.

The Plan currently offers various mutual funds, self-directed investments and common trust stable value funds as investment options for participants. The investment of participant and Recipient Employers' contributions into various options offered by the Plan is determined by each participant. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contribution and an allocation of (a) the Recipient Employers' contributions, (b) Plan earnings (losses), (c) forfeitures of terminated participants' nonvested accounts, and charged with an allocation of any administrative expenses paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in Recipient Employers' contribution portion of their account is in accordance with the Recipient Employers' Adoption Agreements.

Notes Receivable from Participants

Participants may borrow from their fund accounts any amount up to 50% of their vested account balance and no more than \$50,000 minus the participant's highest outstanding loan amount during the prior 12 months. Additionally, no more than one loan is to be initiated in any 24-month period. An advisory committee of the Plan determines the amount of the loan, repayment terms, the rate of interest to be charged, and all other terms of the loan. A \$100 loan origination fee is charged on new loans. The loans are collateralized by the balance in the participant's account and bear interest at fixed rates. Principal and interest are repaid through automatic payroll deduction. A participant can prepay all of the unpaid principal balance without penalty.

Excess Contributions

Amounts payable to participants totaling \$56,033 for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to participants' contributions for 2017. The Plan distributed the 2017 excess contributions to the applicable participants prior to March 15, 2018. Excess contributions payable at December 31, 2016 were \$58,977.

Payment of Benefits

On termination of service, a participant receives an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount in accordance with the Plan document.

The Plan provides for hardship withdrawals from a participant's contribution account. The IRS safe harbor definition of a hardship will apply.

The Plan also provides for in-service distributions from a participant's account in which the participant is 100% vested. The participant must have attained the age of 59 1/2.

Forfeited Accounts

Forfeited nonvested account balances will be used to reduce Recipient Employers' contributions to the Plan, subject to Internal Revenue Service limitations. Forfeited nonvested accounts as of December 31, 2017 and 2016 totaled \$47,328 and \$49,615, respectively. For the year ended December 31, 2017, Recipient Employers' contributions of \$50,693 were paid out of the forfeited nonvested accounts.

**THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review of Subsequent Events

Subsequent events were evaluated through October 2, 2018, which is the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Retirement Savings Plan Committee determines the Plan's valuation policies utilizing information provided by the investment advisor and trustee. See Note 3 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2017 and 2016, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

Payment of Benefits

Benefits are recorded when paid.

**THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

Administrative Expenses

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

NOTE 3. FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There are no Plan assets requiring the use of Level 2 or Level 3 inputs for the periods presented.

Assets measured at fair value for the Plan are as follows:

Mutual Funds

The fair value of mutual funds is based on quoted net asset values ("NAV") of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Self-directed investments

The fair value of the self-directed investments is based on the closing price reported on the active market where the individual securities are traded and the quoted net asset values of the shares held by the Plan at year-end.

Common Trust Stable Value Funds

The fair value of the common trust stable value funds is valued using the NAV, as provided by the administrator of the fund. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund (including guaranteed investment contracts issued by insurance companies, synthetic wrap contracts, and cash and cash equivalents), less its liabilities. The common trust stable value funds had no unfunded commitments as of December 31, 2017, and can be redeemed daily with no redemption price notice period or other redemption restrictions.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

The following table presents the Plan's investments at fair value at December 31, 2017 and 2016.

		Fair Value Measurements at the End of the Reporting Period Using:		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Fair Value			
December 31, 2017:				
Mutual funds	\$ 76,059,621	\$ 76,059,621	\$ -	\$ -
Self-directed investments	<u>86,253</u>	<u>86,253</u>	<u>-</u>	<u>-</u>
Total assets in fair value hierarchy	76,145,874	<u>\$ 76,145,874</u>	<u>\$ -</u>	<u>\$ -</u>
Common trust stable value funds (a)	<u>2,360,029</u>			
Investments at fair value	<u>\$ 78,505,903</u>			
December 31, 2016:				
Mutual funds	\$ 64,941,875	\$ 64,941,875	\$ -	\$ -
Self-directed investments	<u>56,002</u>	<u>56,002</u>	<u>-</u>	<u>-</u>
Total assets in fair value hierarchy	64,997,877	<u>\$ 64,997,877</u>	<u>\$ -</u>	<u>\$ -</u>
Common trust stable value funds (a)	<u>2,928,607</u>			
Investments at fair value	<u>\$ 67,926,484</u>			

(a) In accordance with subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

Gains and losses (realized and unrealized) included in the statement of changes in net assets available for benefits for the year ended December 31, 2017 are reported in net appreciation in fair value of investments.

**THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

NOTE 4. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by the trustee.

Investments
Notes receivable from participants
Investment income
Interest income on notes receivable from participants
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

NOTE 5. PARTY-IN-INTEREST TRANSACTIONS

Transactions in the Plan's notes receivable from participants qualify as party-in-interest transactions which are exempt from prohibited transaction rules.

NOTE 6. PLAN TERMINATION

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

Any participating Recipient Employer shall be permitted to discontinue or revoke its participation in the Plan. In such an event, the assets allocable to the participants of the Recipient Employer shall be transferred to the participants of the Recipient Employer or to the new trustee designated by such Recipient Employer if it has established a separate plan for its employees. If no separate plan has been established, the Plan shall proceed as though the Plan had been terminated with respect to the participants of such Recipient Employer.

NOTE 7. TAX STATUS

The Plan obtained its latest determination letter on November 29, 2013, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC").

Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress. The plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2014.

NOTE 8. 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 statement of net assets available for benefits.

NOTE 9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2017 and 2016 to Form 5500.

	<u>2017</u>	<u>2016</u>
Net assets available for benefits per the financial statements	\$ 79,775,409	\$ 69,404,618
Plus amount accrued for excess contributions payable	<u>56,033</u>	<u>58,977</u>
Net assets available for benefits per Form 5500	<u>\$ 79,831,442</u>	<u>\$ 69,463,595</u>

The following is a reconciliation of the net increase in net assets available for benefits for the year ended December 31, 2017 per the financial statements to net income per Form 5500.

Net increase in net assets available for benefits per the financial statements	\$ 10,122,852
Less excess contributions payable at December 31, 2016	(58,977)
Plus excess contributions payable at December 31, 2017	<u>56,033</u>
Net income per Form 5500	<u>\$ 10,119,908</u>

SUPPLEMENTAL SCHEDULE

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
Investments at fair value:				
Mutual funds:				
	American Funds	American Funds AMCAP Fund - Class R3	X	\$ 759,470
	American Funds	American Funds Capital Income Builder Fund - Class R3	X	749,936
	American Funds	GM American Funds Capital Income Builder Fund - Class R3	X	3,023,956
	American Funds	American Funds Europacific Growth Fund - Class R3	X	888,343
	American Funds	GM American Funds Europacific Growth Fund - Class R3	X	6,715,939
	American Funds	American Funds Fundamental Investors Fund - Class R3	X	1,624,330
	BlackRock	BlackRock Health Sciences Opportunities Portfolio - Investor A Shares	X	1,596,977
	BlackRock	BlackRock Inflation Protected Bond Portfolio - Investor A Shares	X	397,933
	BlackRock	GM BlackRock Inflation Protected Bond Portfolio - Investor A Shares	X	1,528,958
	BlackRock	iShares MSCI EAFE International Index Fund - Institutional Shares	X	215,959
	BlackRock	iShares Russell 2000 Small-Cap Index Fund - Institutional Shares	X	677,107
	BlackRock	iShares S&P 500 Index Fund - Institutional Shares	X	4,972,167
	Columbia	Columbia Mid Cap Index Fund - Institutional 2 Class	X	223,639
	Franklin Templeton	Franklin Gold and Precious Metals Fund - Class A	X	295,347
	Franklin Templeton	GM Franklin Gold and Precious Metals Fund - Class A	X	1,881,022
	Franklin Templeton	Templeton Global Bond Fund - Class A	X	831,025
	Goldman Sachs	Goldman Sachs International Small Cap Insights Fund - Class A	X	407,595
	Invesco	Diversified Dividend Fund - Class A	X	682,375
	Invesco	Invesco Energy Fund - Class A	X	543,679
	Invesco	Invesco Growth and Income Fund - Class A	X	2,188,958
	Invesco	GM Invesco Growth and Income Fund - Class A	X	5,165,980
	Invesco	Invesco Small Cap Value Fund - Class A	X	917,246
	Invesco	GM Invesco Small Cap Value Fund - Class A	X	2,191,591

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
	Ivy Funds	Ivy Science and Technology Fund - Class Y	X	521,048
	John Hancock	John Hancock Disciplined Value Mid Cap Fund - Class A	X	1,560,286
	John Hancock	GM John Hancock Disciplined Value Mid Cap Fund - Class A	X	3,960,906
	JPMorgan	JPMorgan Government Bond Fund - Class A	X	632,121
	JPMorgan	GM JPMorgan Government Bond Fund - Class A	X	6,039,040
	Loomis Sayles	Loomis Sayles Growth Fund - Class A	X	1,053,556
	Loomis Sayles	GM Loomis Sayles Growth Fund - Class A	X	4,334,256
	Lord Abbett	Lord Abbett Developing Growth Fund - Class R3	X	704,841
	Lord Abbett	GM Lord Abbett Developing Growth Fund - Class R3	X	1,289,691
	MFS Investments	MFS International Value Fund - Class A	X	534,525
	MFS Investments	MFS Utilities Fund - Class A	X	357,813
	Oppenheimer	Oppenheimer Developing Markets Fund - Class A	X	1,249,304
	Oppenheimer	GM Oppenheimer Developing Markets Fund - Class A	X	2,862,944
	Oppenheimer	Oppenheimer International Growth Fund - Class A	X	365,582
	PIMCO Funds	GM PIMCO Total Return Fund - Class A	X	89
	Pioneer Investments	Pioneer Bond Fund - Class A	X	1,294,997
	Pioneer Investments	GM Pioneer Bond Fund - Class A	X	2,775,123
	Principal Funds	Principal High Yield Fund - Class A	X	515,154
	Principal Funds	GM Principal High Yield Fund - Class A	X	917,642
	Principal Funds	Principal Real Estate Securities Fund - Class A	X	909,840
	Principal Funds	GM Principal Real Estate Securities Fund - Class A	X	1,665,705
	Prudential Investments	Prudential Jennison Mid Cap Growth Fund - Class A	X	1,197,323
	Prudential Investments	GM Prudential Jennison Mid Cap Growth Fund - Class A	X	2,838,303
	Self-directed investments	Self-directed investments	X	86,253

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
	Common trust stable value funds:			
	Federated Investors, Inc.	Capital Preservation Fund	X	2,018,847
	Federated Investors, Inc.	GM Capital Preservation Fund	X	<u>341,182</u>
	Total investments at fair value			<u>\$ 78,505,903</u>
*	Notes receivable from participants	Various maturity dates; 4.75% - 8.75%	\$0	<u>\$ 864,962</u>

* - Party-in-interest

X - Investments are in individual participant-directed accounts

Form 5500 Multiple Employer Plan Participating Employer Information

Plan Name : The Synergy Multiple Employer Retirement Savings

Plan Sponsor Name: The Synergy Plan, LLC

EIN: 76-0721383

PN: 001

Name of participating employer	EIN	Percentage of Total Contributions
ALLANT GROUP, LLC	81-1048282	11.04%
MADISON WELLS PARTNERS, INC.	30-0554766	7.83%
FUNKHOUSER VEGOSEN LIEBMAN & DUNN LTD.	36-3106449	6.83%
EMBRACE LIVING COMMUNITIES	36-3487477	6.51%
RELIABLE OF MILWAUKEE	36-2414931	4.24%
HEIDOLPH NORTH AMERICA, LLC	26-2819897	4.13%
ACCREDITATION COUNCIL FOR CONTINUING MED ED	47-0941683	4.11%
KDI DESIGN, INC.	20-1365643	3.58%
COMMUNITY STATE BANK	36-2800497	3.41%
RUBBER, INC.	36-2547969	3.26%
THE SYNERGY PLAN, LLC	76-0721383	3.20%
ARLINGTON PLATING COMPANY	36-2886391	2.81%
NUANCE SOLUTIONS	36-2858787	2.68%
VOITH-MERI ENVIRONMENTAL SOLUTIONS, INC.	04-3302625	2.66%
WEDGEWOOD BUILDING COMPANY	27-3605596	2.62%
ALGUS PACKAGING, INC.	36-3760273	2.41%
BROWN & BROWN, L. L. C.	36-4160073	2.33%
ARGENTUM MEDICAL, LLC	36-4427015	2.28%
HEALY, BENDER & ASSOCIATES, INC.	36-2696955	1.60%
LODESTAR SOLUTIONS, INC.	20-1377573	1.45%
MIDLAND STAMPING AND FABRICATING, LLC.	27-3442767	1.31%
THREE RIVERS MANUFACTURES ASSOCIATION	36-2414931	1.27%
ALL AMERICAN WASHER WERKS	36-4010867	1.16%
AUDINATE, INC.	80-0353637	1.14%
THE SKULLY GROUP	36-3995443	0.92%
PARTNERS IN HOUSING DEVELOPMENT CORPORATION	35-1917637	0.90%
ABILITY ENGINEERING TECHNOLOGY, INC.	36-3517867	0.84%
BROOK CAPITAL	20-1731664	0.82%
BECKER ARCHITECTS	36-3990261	0.76%
REACH COUNSELING SERVICES	39-1292277	0.71%
ADD ON STAFFING SOLUTIONS, INC	41-1698034	0.69%
GREENWOOD TOOL & DIE	36-3144353	0.68%
WAUKEGAN CORPORATE AVIATION FACILITIES	36-3366953	0.68%
MERRIMAC DENTAL LABORATORY, INC.	36-4250578	0.62%
AEG PARTNERS, LLC	36-4342564	0.61%
SHAW DEVELOPMENT COMPANY	36-4266706	0.61%
I A C E D	35-1695379	0.56%
PANTENE ELECTRONICS NA, INC	20-3399100	0.53%
NATIONAL ASSOC OF FIRE EQUIPMENT DISTRIBUTOR	36-2420809	0.51%
ELGIN AREA CHAMBER OF COMMERCE	36-1035380	0.50%
HISTOGENEX, LLC	47-3655252	0.48%
FORT SHERIDAN ADVISORS, LLC	27-0463256	0.47%
VAN NORMAN MOLDING, LLC	36-4208993	0.42%

Form 5500 Multiple Employer Plan Participating Employer Information

Plan Name : The Synergy Multiple Employer Retirement Savings

Plan Sponsor Name: The Synergy Plan, LLC

EIN: 76-0721383

PN: 001

Name of participating employer	EIN	Percentage of Total Contributions
PROFESSIONAL ENGINEERING TECH CONSULTANT	36-4205109	0.36%
LOYAL MANUFACTURING CORPORATION	35-1358320	0.33%
LA CHEMICAL, LTD.	37-1037667	0.33%
MCFARLAINE MEDICAL, INC.	20-8412005	0.31%
LIFETIME CHIROPRACTIC CENTERS, LLC.	45-4176479	0.25%
NATIONAL HOME HEALTH SERVICES, LLC	20-2451380	0.24%
RENEW INDIANAPOLIS	80-0619587	0.22%
INVARION, INC	20-0205523	0.20%
KURT VONNEGUT MEMORIAL LIBRARY, INC.	27-0825749	0.20%
HAMILTON COUNTY AREA NEIGHBORHOOD DEVELOPMENT	32-0080849	0.19%
INDIANA ASSOC. OF AREA AGENCIES ON AGING	35-2122608	0.18%
MR. SHIMS	36-3523154	0.17%
LA PLAZA, INC	35-1743525	0.14%
VLM MEDICAL, LLC	47-3092829	0.13%
ELECTRONIC MANUFACTURING SOLUTIONS, INC.	35-1910951	0.10%
NEAR EAST AREA RENEWAL, INC	20-0146547	0.08%
JEXET TECHNOLOGIES	45-2429361	0.08%
WINDLAB DEVELOPMENTS USA LTD.	98-0588398	0.06%
CARLSON-STI, INC.	27-3908888	0.06%
E P P CORPORATION	36-2891247	0.05%
THE BUSINESS SECTION, INC	36-4262420	0.04%
ARGON CREDIT	46-4459264	0.02%
CHRISTIAN LIFE RETIREMENT CENTER PLAN	36-3038261	0.02%
CARLTON MANAGEMENT COMPANY, LLC	27-4755568	0.02%
HEILO CRANE & HOIST, INC	36-3436613	0.01%
PROPERTY SOLUTIONS GROUP, LLC	36-4157425	0.01%
TIME PILOT CORPORATION	56-4444987	0.00%
LOGISERVE, INC.	36-3864067	0.00%
COE FINANCIAL GROUP, INC	36-4406275	0.00%



MUELLER & CO., LLP

Certified Public Accountants – Business & Financial Advisors

ASSURANCE

SYNERGY EMPLOYEE BENEFIT PLAN

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2017

MUELLER

Elgin/Orland Park/Chicago
www.muellercpa.com
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**THE SYNERGY EMPLOYEE BENEFIT PLAN
FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

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To the Board of Directors of
The Synergy Plan, LLC
Chicago, Illinois

INDEPENDENT AUDITOR'S REPORT

We have audited the accompanying financial statements of The Synergy Employee Benefit Plan, which comprise the statements of net assets available for benefits and of benefit obligation as of December 31, 2017 and 2016, and the related statements of changes in net assets available for benefits and of changes in benefit obligation 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.

Auditor's Responsibility

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

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of The Synergy Employee Benefit Plan as of December 31, 2017 and 2016, and the changes in its financial status for the year ended December 31, 2017, in accordance with accounting principles generally accepted in the United States of America.

Muller & Co., LLP

Burr Ridge, Illinois
October 5, 2018

THE SYNERGY EMPLOYEE BENEFIT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
Assets:		
Cash	<u>\$ 435,161</u>	<u>\$ 1,828,261</u>
Net assets available for benefits	<u>\$ 435,161</u>	<u>\$ 1,828,261</u>

See notes to financial statements.

THE SYNERGY EMPLOYEE BENEFIT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2017

Additions to net assets attributed to:

Contributions:

Employer	\$ 14,845,764
Participants	<u>3,499,354</u>

Total additions	\$ 18,345,118
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Deductions from net assets attributed to:

Benefits paid to participants	18,629,076
Insurance premiums	1,103,959
Bank charges	<u>5,183</u>

Total deductions	<u>19,738,218</u>
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Net decrease	(1,393,100)
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Net assets available for benefits at beginning of year	<u>1,828,261</u>
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Net assets available for benefits at end of year	<u><u>\$ 435,161</u></u>
--	--------------------------

See notes to financial statements.

THE SYNERGY EMPLOYEE BENEFIT PLAN
STATEMENTS OF BENEFIT OBLIGATION
DECEMBER 31, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
Amounts currently payable:		
Claims currently payable and claims incurred but not reported	<u>\$ 2,105,000</u>	<u>\$ 1,985,000</u>
Total benefit obligation	<u>\$ 2,105,000</u>	<u>\$ 1,985,000</u>

See notes to financial statements.

THE SYNERGY EMPLOYEE BENEFIT PLAN
STATEMENT OF CHANGES IN BENEFIT OBLIGATION
YEAR ENDED DECEMBER 31, 2017

Amounts currently payable:

Total benefit obligation at beginning of year	\$ 1,985,000
Claims reported and approved for payment and change in claims incurred but not reported	18,749,076
Claims paid	<u>(18,629,076)</u>
Total benefit obligation at end of year	<u>\$ 2,105,000</u>

See notes to financial statements.

THE SYNERGY EMPLOYEE BENEFIT PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

NOTE 1. DESCRIPTION OF PLAN

The following description of The Synergy Employee Benefit Plan ("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 provides health benefits covering substantially all full-time employees of The Synergy Plan, LLC ("Plan Sponsor") and its affiliates. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The Board of Directors of the Plan Sponsor oversees governance of the Plan.

Benefits

The Plan provides health benefits under several component parts, which are described in the Master Policies, Summary Plan Descriptions, and the plan document for The Synergy Plan, LLC Flexible Benefits Plan, which have been incorporated into the Plan document. Each participant's eligibility date, eligible hours requirement, deductible and co-pay, out-of-pocket maximum and medical lifetime maximum is shown on a Schedule of Benefits which is provided to the participant.

Insurance premiums are paid to an insurance provider under a stop-loss insurance contract. Claims are submitted to and processed by a third party administrator. The Plan then pays the claims directly to the provider.

Contributions

Except to the extent that employee coverage costs are a required subject of collective bargaining, the Plan Sponsor will establish the costs required of each participant. On an annual basis prior to the start of the Plan year, the Plan Sponsor consults with the stop-loss insurance carrier and third party health care consultants to determine the anticipated costs related to the participants. The Plan Sponsor will make the benefit and premium payments and pay the administrative expenses of the Plan to the extent these payments and expenses exceed the participant costs.

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires the Plan Sponsor to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

**THE SYNERGY EMPLOYEE BENEFIT PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

Date of Management's Review of Subsequent Events

Subsequent events were evaluated through October 5, 2018, which is the date the financial statements were available to be issued.

Benefit Obligation

The Plan's obligation for claims incurred but not reported is estimated by actuaries retained by the Plan Sponsor. Such estimated amount is reported in the accompanying statement of benefit obligation. All such claims are reported as currently payable, as claims generally are reported and paid within 90 days from the date the expense is incurred.

Cash

The Plan maintains its bank balance at a financial institution located in northern Illinois. Bank balances are insured by the Federal Deposit Insurance Corporation ("FDIC") up to \$250,000. The Plan has not experienced any losses on this account.

NOTE 3. PLAN AMENDMENT AND TERMINATION

The Plan Sponsor may at any time amend any or all of the provisions of the Plan.

Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan to terminate the Plan at any time. In the event of Plan termination, benefits will be paid in accordance with the Plan as soon as administratively possible after the termination date.

NOTE 4. RISKS AND UNCERTAINTIES

The actuarial present value of the benefit obligation is reported based on certain assumptions pertaining to interest rates, health care inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

NOTE 5. TAX STATUS

The Plan is required to operate in conformity with the Internal Revenue Code ("IRC") to maintain its tax-exempt status. The Plan Sponsor believes that the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes that it is tax-exempt.

THE SYNERGY EMPLOYEE BENEFIT PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Accounting principles generally accepted in the United States of America require the Plan Sponsor to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if it has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.



MUELLER & CO., LLP

Certified Public Accountants – Business & Financial Advisors

ASSURANCE

**THE SYNERGY MULTIPLE EMPLOYER
RETIREMENT SAVINGS PLAN**

FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2017

MUELLER

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THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

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To the Board of Directors of
The Synergy Plan, LLC
Chicago, Illinois

INDEPENDENT AUDITOR'S REPORT

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of The Synergy Multiple Employer Retirement Savings 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.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information listed in Note 4, which was certified by Ascensus Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2017 and 2016, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

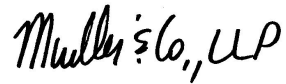
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2017 is required by the Department of Labor'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 trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in black ink that reads "Mullin & Co., LLP". The signature is written in a cursive, stylized font.

Orland Park, Illinois
October 2, 2018

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2017 AND 2016

	<u>2017</u>	<u>2016</u>
Assets:		
Investments at fair value	\$ 78,505,903	\$ 67,926,484
Receivables:		
Employers' contributions	320,058	458,434
Participants' contributions	138,539	178,594
Notes receivable from participants	<u>864,962</u>	<u>899,991</u>
Total receivables	<u>1,323,559</u>	<u>1,537,019</u>
Cash	<u>1,980</u>	<u>92</u>
Total assets	79,831,442	69,463,595
Liabilities:		
Excess contributions payable	<u>56,033</u>	<u>58,977</u>
Net assets available for benefits	<u>\$ 79,775,409</u>	<u>\$ 69,404,618</u>

See notes to financial statements.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2017

Additions to net assets attributed to:

Investment income:

Net appreciation in fair value of investments	\$ 10,046,794
Interest and dividend income from investments	<u>1,410,198</u>

Total investment income \$ 11,456,992

Interest income on notes receivable from participants 46,129

Contributions:

Participants	5,123,119
Employers	1,811,225
Rollover	<u>57,881</u>

Total contributions 6,992,225

Total additions 18,495,346

Deductions from net assets attributed to:

Benefits paid to participants	8,119,920
Administrative expenses	<u>252,574</u>

Total deductions 8,372,494

Net increase 10,122,852

Transfers in from other plans 333,390

Transfers out to other plans (85,451)

Net assets available for benefits at beginning of year 69,404,618

Net assets available for benefits at end of year \$ 79,775,409

See notes to financial statements.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

NOTE 1. DESCRIPTION OF PLAN

The following description of The Synergy Multiple Employer Retirement Savings Plan ("Plan") provides only general information. Participants should refer to the Plan agreement and Recipient Employers' Adoption Agreements for a more complete description of the Plan's provisions.

General

The sponsor of the Plan, The Synergy Plan, LLC ("Company"), is a Professional Employer Organization. Each of its clients is considered a Recipient Employer under the Plan and has executed a Recipient Employer Adoption Agreement, each with its own effective date. The Plan is a defined contribution plan covering the employees of Recipient Employers who have attained the age and eligibility requirements in accordance with the Recipient Employers' Adoption Agreements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Company's Board of Directors oversees governance of the Plan and appoints the Plan's Retirement Savings Plan Committee. The Plan's Retirement Savings Plan Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Board of Directors.

Contributions

Each year, participants may contribute a percentage of pretax annual compensation, as elected in the Recipient Employers' Adoption Agreements. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Recipient Employer contributions are at the discretion of Recipient Employers' management and are set forth in the Recipient Employers' Adoption Agreements.

The Plan allows participants to contribute a percentage of their taxable annual compensation as a Roth 401(k) contribution in lieu of all or a portion of the elective deferrals the participant is otherwise eligible to make to the Plan. Each Recipient Employers' Adoption Agreement may have its own effective date, if elected.

The Plan currently offers various mutual funds, self-directed investments and common trust stable value funds as investment options for participants. The investment of participant and Recipient Employers' contributions into various options offered by the Plan is determined by each participant. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contribution and an allocation of (a) the Recipient Employers' contributions, (b) Plan earnings (losses), (c) forfeitures of terminated participants' nonvested accounts, and charged with an allocation of any administrative expenses paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in Recipient Employers' contribution portion of their account is in accordance with the Recipient Employers' Adoption Agreements.

Notes Receivable from Participants

Participants may borrow from their fund accounts any amount up to 50% of their vested account balance and no more than \$50,000 minus the participant's highest outstanding loan amount during the prior 12 months. Additionally, no more than one loan is to be initiated in any 24-month period. An advisory committee of the Plan determines the amount of the loan, repayment terms, the rate of interest to be charged, and all other terms of the loan. A \$100 loan origination fee is charged on new loans. The loans are collateralized by the balance in the participant's account and bear interest at fixed rates. Principal and interest are repaid through automatic payroll deduction. A participant can prepay all of the unpaid principal balance without penalty.

Excess Contributions

Amounts payable to participants totaling \$56,033 for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to participants' contributions for 2017. The Plan distributed the 2017 excess contributions to the applicable participants prior to March 15, 2018. Excess contributions payable at December 31, 2016 were \$58,977.

Payment of Benefits

On termination of service, a participant receives an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount in accordance with the Plan document.

The Plan provides for hardship withdrawals from a participant's contribution account. The IRS safe harbor definition of a hardship will apply.

The Plan also provides for in-service distributions from a participant's account in which the participant is 100% vested. The participant must have attained the age of 59 1/2.

Forfeited Accounts

Forfeited nonvested account balances will be used to reduce Recipient Employers' contributions to the Plan, subject to Internal Revenue Service limitations. Forfeited nonvested accounts as of December 31, 2017 and 2016 totaled \$47,328 and \$49,615, respectively. For the year ended December 31, 2017, Recipient Employers' contributions of \$50,693 were paid out of the forfeited nonvested accounts.

**THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017**

NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review of Subsequent Events

Subsequent events were evaluated through October 2, 2018, which is the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Retirement Savings Plan Committee determines the Plan's valuation policies utilizing information provided by the investment advisor and trustee. See Note 3 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2017 and 2016, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

Payment of Benefits

Benefits are recorded when paid.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Administrative Expenses

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

NOTE 3. FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There are no Plan assets requiring the use of Level 2 or Level 3 inputs for the periods presented.

Assets measured at fair value for the Plan are as follows:

Mutual Funds

The fair value of mutual funds is based on quoted net asset values ("NAV") of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Self-directed investments

The fair value of the self-directed investments is based on the closing price reported on the active market where the individual securities are traded and the quoted net asset values of the shares held by the Plan at year-end.

Common Trust Stable Value Funds

The fair value of the common trust stable value funds is valued using the NAV, as provided by the administrator of the fund. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund (including guaranteed investment contracts issued by insurance companies, synthetic wrap contracts, and cash and cash equivalents), less its liabilities. The common trust stable value funds had no unfunded commitments as of December 31, 2017, and can be redeemed daily with no redemption price notice period or other redemption restrictions.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

The following table presents the Plan's investments at fair value at December 31, 2017 and 2016.

		Fair Value Measurements at the End of the Reporting Period Using:		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Fair Value			
December 31, 2017:				
Mutual funds	\$ 76,059,621	\$ 76,059,621	\$ -	\$ -
Self-directed investments	<u>86,253</u>	<u>86,253</u>	<u>-</u>	<u>-</u>
Total assets in fair value hierarchy	76,145,874	<u>\$ 76,145,874</u>	<u>\$ -</u>	<u>\$ -</u>
Common trust stable value funds (a)	<u>2,360,029</u>			
Investments at fair value	<u>\$ 78,505,903</u>			
December 31, 2016:				
Mutual funds	\$ 64,941,875	\$ 64,941,875	\$ -	\$ -
Self-directed investments	<u>56,002</u>	<u>56,002</u>	<u>-</u>	<u>-</u>
Total assets in fair value hierarchy	64,997,877	<u>\$ 64,997,877</u>	<u>\$ -</u>	<u>\$ -</u>
Common trust stable value funds (a)	<u>2,928,607</u>			
Investments at fair value	<u>\$ 67,926,484</u>			

(a) In accordance with subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

Gains and losses (realized and unrealized) included in the statement of changes in net assets available for benefits for the year ended December 31, 2017 are reported in net appreciation in fair value of investments.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

NOTE 4. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by the trustee.

Investments
Notes receivable from participants
Investment income
Interest income on notes receivable from participants
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

NOTE 5. PARTY-IN-INTEREST TRANSACTIONS

Transactions in the Plan's notes receivable from participants qualify as party-in-interest transactions which are exempt from prohibited transaction rules.

NOTE 6. PLAN TERMINATION

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

Any participating Recipient Employer shall be permitted to discontinue or revoke its participation in the Plan. In such an event, the assets allocable to the participants of the Recipient Employer shall be transferred to the participants of the Recipient Employer or to the new trustee designated by such Recipient Employer if it has established a separate plan for its employees. If no separate plan has been established, the Plan shall proceed as though the Plan had been terminated with respect to the participants of such Recipient Employer.

NOTE 7. TAX STATUS

The Plan obtained its latest determination letter on November 29, 2013, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC").

Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
YEAR ENDED DECEMBER 31, 2017

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress. The plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2014.

NOTE 8. 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 statement of net assets available for benefits.

NOTE 9. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2017 and 2016 to Form 5500.

	<u>2017</u>	<u>2016</u>
Net assets available for benefits per the financial statements	\$ 79,775,409	\$ 69,404,618
Plus amount accrued for excess contributions payable	<u>56,033</u>	<u>58,977</u>
Net assets available for benefits per Form 5500	<u>\$ 79,831,442</u>	<u>\$ 69,463,595</u>

The following is a reconciliation of the net increase in net assets available for benefits for the year ended December 31, 2017 per the financial statements to net income per Form 5500.

Net increase in net assets available for benefits per the financial statements	\$ 10,122,852
Less excess contributions payable at December 31, 2016	(58,977)
Plus excess contributions payable at December 31, 2017	<u>56,033</u>
Net income per Form 5500	<u>\$ 10,119,908</u>

SUPPLEMENTAL SCHEDULE

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
Investments at fair value:				
Mutual funds:				
	American Funds	American Funds AMCAP Fund - Class R3	X	\$ 759,470
	American Funds	American Funds Capital Income Builder Fund - Class R3	X	749,936
	American Funds	GM American Funds Capital Income Builder Fund - Class R3	X	3,023,956
	American Funds	American Funds Europacific Growth Fund - Class R3	X	888,343
	American Funds	GM American Funds Europacific Growth Fund - Class R3	X	6,715,939
	American Funds	American Funds Fundamental Investors Fund - Class R3	X	1,624,330
	BlackRock	BlackRock Health Sciences Opportunities Portfolio - Investor A Shares	X	1,596,977
	BlackRock	BlackRock Inflation Protected Bond Portfolio - Investor A Shares	X	397,933
	BlackRock	GM BlackRock Inflation Protected Bond Portfolio - Investor A Shares	X	1,528,958
	BlackRock	iShares MSCI EAFE International Index Fund - Institutional Shares	X	215,959
	BlackRock	iShares Russell 2000 Small-Cap Index Fund - Institutional Shares	X	677,107
	BlackRock	iShares S&P 500 Index Fund - Institutional Shares	X	4,972,167
	Columbia	Columbia Mid Cap Index Fund - Institutional 2 Class	X	223,639
	Franklin Templeton	Franklin Gold and Precious Metals Fund - Class A	X	295,347
	Franklin Templeton	GM Franklin Gold and Precious Metals Fund - Class A	X	1,881,022
	Franklin Templeton	Templeton Global Bond Fund - Class A	X	831,025
	Goldman Sachs	Goldman Sachs International Small Cap Insights Fund - Class A	X	407,595
	Invesco	Diversified Dividend Fund - Class A	X	682,375
	Invesco	Invesco Energy Fund - Class A	X	543,679
	Invesco	Invesco Growth and Income Fund - Class A	X	2,188,958
	Invesco	GM Invesco Growth and Income Fund - Class A	X	5,165,980
	Invesco	Invesco Small Cap Value Fund - Class A	X	917,246
	Invesco	GM Invesco Small Cap Value Fund - Class A	X	2,191,591

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
	Ivy Funds	Ivy Science and Technology Fund - Class Y	X	521,048
	John Hancock	John Hancock Disciplined Value Mid Cap Fund - Class A	X	1,560,286
	John Hancock	GM John Hancock Disciplined Value Mid Cap Fund - Class A	X	3,960,906
	JPMorgan	JPMorgan Government Bond Fund - Class A	X	632,121
	JPMorgan	GM JPMorgan Government Bond Fund - Class A	X	6,039,040
	Loomis Sayles	Loomis Sayles Growth Fund - Class A	X	1,053,556
	Loomis Sayles	GM Loomis Sayles Growth Fund - Class A	X	4,334,256
	Lord Abbett	Lord Abbett Developing Growth Fund - Class R3	X	704,841
	Lord Abbett	GM Lord Abbett Developing Growth Fund - Class R3	X	1,289,691
	MFS Investments	MFS International Value Fund - Class A	X	534,525
	MFS Investments	MFS Utilities Fund - Class A	X	357,813
	Oppenheimer	Oppenheimer Developing Markets Fund - Class A	X	1,249,304
	Oppenheimer	GM Oppenheimer Developing Markets Fund - Class A	X	2,862,944
	Oppenheimer	Oppenheimer International Growth Fund - Class A	X	365,582
	PIMCO Funds	GM PIMCO Total Return Fund - Class A	X	89
	Pioneer Investments	Pioneer Bond Fund - Class A	X	1,294,997
	Pioneer Investments	GM Pioneer Bond Fund - Class A	X	2,775,123
	Principal Funds	Principal High Yield Fund - Class A	X	515,154
	Principal Funds	GM Principal High Yield Fund - Class A	X	917,642
	Principal Funds	Principal Real Estate Securities Fund - Class A	X	909,840
	Principal Funds	GM Principal Real Estate Securities Fund - Class A	X	1,665,705
	Prudential Investments	Prudential Jennison Mid Cap Growth Fund - Class A	X	1,197,323
	Prudential Investments	GM Prudential Jennison Mid Cap Growth Fund - Class A	X	2,838,303
	Self-directed investments	Self-directed investments	X	86,253

THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
EIN: 76-0721383
PLAN NUMBER: 001
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2017

a.	b. Identity of Issue, Borrower Lessor, or Similar Party	c. Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	d. Cost	e. Current Value
	Common trust stable value funds:			
	Federated Investors, Inc.	Capital Preservation Fund	X	2,018,847
	Federated Investors, Inc.	GM Capital Preservation Fund	X	<u>341,182</u>
	Total investments at fair value			<u><u>\$ 78,505,903</u></u>
* Notes receivable from participants		Various maturity dates; 4.75% - 8.75%	\$0	<u><u>\$ 864,962</u></u>

* - Party-in-interest

X - Investments are in individual participant-directed accounts

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 _____ and ending _____		
A Name of plan	B Three-digit plan number (PN) ►	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	

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 Total noninterest-bearing cash	1a
b Receivables (less allowance for doubtful accounts):	
(1) Employer contributions.....	1b(1)
(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)
(2) U.S. Government securities	1c(2)
(3) Corporate debt instruments (other than employer securities):	
(A) Preferred	1c(3)(A)
(B) All other.....	1c(3)(B)
(4) Corporate stocks (other than employer securities):	
(A) Preferred	1c(4)(A)
(B) Common.....	1c(4)(B)
(5) Partnership/joint venture interests	1c(5)
(6) Real estate (other than employer real property).....	1c(6)
(7) Loans (other than to participants)	1c(7)
(8) Participant loans.....	1c(8)
(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)
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)
(15) Other.....	1c(15)

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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		

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 through 1j)	1k		

Net Assets

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

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		
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)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		
j Total expenses. Add all expense amounts in column (b) and enter total	2j		

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

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

(1) Name:

(2) EIN:

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:

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.)

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.)

	Yes	No	Amount
4a			
4b			

	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			
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			
e Was this plan covered by a fidelity bond?			
4e			
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			
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			
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			
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			
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			
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			
l Has the plan failed to provide any benefit when due under the plan?.....			
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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.)

Attachment to 2017 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name THE SYNERGY MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN
Plan Sponsor's Name THE SYNERGY PLAN, LLC

EIN: 76-0721383
PN: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Templeton	Templeton Global Bond A	0	831,025
	BlackRock	BlackRock Inflation Protected Bond Inv A	0	397,933
	Principal	Principal High Yield A	0	515,154
	Invesco	Invesco Growth and Income A	0	2,188,958
	American Funds	American Funds Fndmtl InvR3	0	1,624,330
	Invesco	(CL) Invesco Small Cap Value Fund A	0	917,246
	Prudential Jennison	PGIM Jennison Mid-Cap Growth CL A	0	1,197,323

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(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	American Funds	American Funds EuroPacific GrowthR3	0	888,343
	Oppenheimer	Oppenheimer Developing Markets Fund A	0	1,249,304
	MFS	MFS Utilities Fund A	0	357,813
	Invesco	Invesco Energy Fund A	0	543,679
	BlackRock	BlackRock Health Sciences Opp Port A	0	1,596,977
	Invesco	GM Invesco Growth and Income A	0	5,165,980
	Prudential Jennison	GM PGIM Jennison Mid-Cap Growth CL A	0	2,838,303

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	Invesco	GM (CL) Invesco Small Cap Value Fund A	0	2,191,591
	American Funds	GM American Funds EuroPacific GrowthR3	0	6,715,939
	Federated	Federated Capital Preservation	0	2,018,847
	Federated	GM Federated Capital Preservation	0	341,182
	Lord Abbett	Lord Abbett Developing Growth Fund	0	704,841
	Lord Abbett	GM Lord Abbett Developing Growth Fu	0	1,289,691
	JPMorgan	JPMorgan Government Bond A	0	632,121

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EIN: 76-0721383
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(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	JPMorgan	GM JPMorgan Government Bond A	0	6,039,040
	Invesco	Invesco Diversified Dividend A	0	682,375
	Oppenheimer	Oppenheimer International Growth A	0	365,582
	Oppenheimer	GM Oppenheimer Developing Markets Fund A	0	2,862,944
	Principal	GM Principal High Yield A	0	917,642
	BlackRock	GM BlackRock Inflation Protected Bond In	0	1,528,958
	iShares	iShares S&P 500 Index Institutional	0	4,972,167

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PN: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Ivy	Ivy Science and Technology Y	0	521,048
	Principal	Principal Real Estate Securities A	0	909,840
	John Hancock	(CL) John Hancock III Disc Val Mid CapA	0	1,560,286
	American Funds	American Funds AMCAP Fund R3	0	759,470
	MFS	MFS International Value A	0	534,525
	Principal	GM Principal Real Estate Securities A	0	1,665,705
	John Hancock	(CL)GM JohnHancock III Disc Val Mid CapA	0	3,960,906

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EIN: 76-0721383
PN: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Pioneer	Pioneer Bond A	0	1,294,997
	Pioneer	GM Pioneer Bond A	0	2,775,123
	Franklin	Franklin Gold and Precious Metals Fund A	0	295,347
	Goldman Sachs	Goldman Sachs Intl Sm Cap Insights A	0	407,595
	Loomis Sayles	Loomis Sayles Growth A	0	1,053,556
	American Funds	American Funds Cap Income BuilderR3	0	749,936
	Franklin	GM Franklin Gold and Precious Metals A	0	1,881,022

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EIN: 76-0721383
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(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Loomis Sayles	GM Loomis Sayles Growth A	0	4,334,256
	American Funds	GM American Funds Cap Income BuilderR3	0	3,023,956
	Columbia	Columbia Mid Cap Index I2	0	223,639
	iShares	iShares MSCI EAFE Intl Index I	0	215,959
	iShares	iShares Russell 2000 Small-Cap Index I	0	677,107
	PIMCO	GM PIMCO Total Return A	0	89
	Self-Direct	Self-Direct Investment fund	0	82,405

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EIN: 76-0721383
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(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Self-Direct	Self-Direct Cash Fund	0	3,848
	Participant's Loan Account	Various Rates and Maturities	0	864,962
	Ascensus Trust Company	Contribution Account	0	1,980