

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2018</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information		
For calendar plan year 2018 or fiscal plan year beginning <u>01/01/2018</u> and ending <u>12/31/2018</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 ☐ special extension (enter description)	☐ the DFVC program

Part II	Basic Plan Information —enter all requested information		
1a	Name of plan <u>VSOLVIT LLC 401(K) PROFIT SHARING PLAN & TRUST</u>	1b	Three-digit plan number (PN) ▶ <u>001</u>
		1c	Effective date of plan <u>12/31/2013</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>VSOLVIT LLC</u> <u>4171 MARKET ST. SUITE #2</u> <u>VENTURA, CA 93003</u>	2b	Employer Identification Number (EIN) <u>20-5402388</u>
		2c	Plan Sponsor's telephone number <u>805-850-1257</u>
		2d	Business code (see instructions) <u>541512</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.	09/23/2019	PAYAL KAMDAR
	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

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3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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	5 525
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 441 6a(2) 353 6b 0 6c 261 6d 614 6e 0 6f 614 6g 495 6h 186
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: 2G 2K 2T 3D 3H 2E 2J 2F 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

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)** ☐ 0 **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 2018 Form M-1 annual report. If the plan was not required to file the 2018 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 H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 2018 This Form is Open to Public Inspection
For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018		
A Name of plan VSOLVIT LLC 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 VSOLVIT LLC	D Employer Identification Number (EIN) 20-5402388	

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	0	
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions.....	1b(1)	0	0
	(2) Participant contributions	1b(2)	0	0
	(3) Other.....	1b(3)	0	0
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	0	60535
	(2) U.S. Government securities	1c(2)	0	
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)	0	
	(B) All other.....	1c(3)(B)	0	
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)	0	
	(B) Common.....	1c(4)(B)	0	
	(5) Partnership/joint venture interests	1c(5)	0	
	(6) Real estate (other than employer real property).....	1c(6)	0	
	(7) Loans (other than to participants)	1c(7)	0	
	(8) Participant loans.....	1c(8)	138221	109152
	(9) Value of interest in common/collective trusts	1c(9)	0	0
	(10) Value of interest in pooled separate accounts	1c(10)	0	0
	(11) Value of interest in master trust investment accounts	1c(11)	0	0
	(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	3962079	4062074
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	
(2) Employer real property	1d(2)	0	
e Buildings and other property used in plan operation	1e	0	
f Total assets (add all amounts in lines 1a through 1e)	1f	4100300	4231761

Liabilities

g Benefit claims payable	1g	0	
h Operating payables	1h	0	
i Acquisition indebtedness	1i	0	
j Other liabilities	1j	0	
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	4100300	4231761
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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)	177617	
(B) Participants	2a(1)(B)	1042303	
(C) Others (including rollovers)	2a(1)(C)	46656	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1266576
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	72	
(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)	6822	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		6894
(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)	285684	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		285684
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-573735
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		985419

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	779361	
(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)		779361
f Corrective distributions (see instructions)	2f		51003
g Certain deemed distributions of participant loans (see instructions)	2g		19337
h Interest expense	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	4257	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		4257
j Total expenses. Add all expense amounts in column (b) and enter total	2j		853958

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		131461
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: SUMMIT CPA GROUP

(2) EIN: 11-3730017

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.)		X	
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.).....		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?.....		X	
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?.....		X	
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.)	X		
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____. (See instructions.)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2018 This Form is Open to Public Inspection.
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For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan <u>VSOLVIT LLC 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VSOLVIT LLC</u>	D Employer Identification Number (EIN) <u>20-5402388</u>

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>16-1470238</u>		
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.)
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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
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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
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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.
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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

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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

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**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):

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

Audit Report of Financial Statements

For the years ended December 31, 2018 and 2017



Summit CPA Group

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VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

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Independent Auditor's Report

To the Administrative Committee of the
Vsolvit, LLC 401(k) Profit Sharing Plan & Trust
Ventura, CA

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Vsolvit, LLC 401(k) Profit Sharing Plan & Trust, which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statement of changes in net assets available for benefits for the year ended December 31, 2018, 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 Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, The plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note C, which was certified by Mid Atlantic 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, 2018 and 2017, 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 – Supplemental Schedule

The supplemental schedule, the schedule of assets held as of December 31, 2018, is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA) 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 this supplemental schedule.

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

The form and content of the information included in the financial statements and supplemental schedules, 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 ERISA.

Summit CPA Group

Summit CPA Group, LLC
Fort Wayne, Indiana
August 31, 2019

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2018 AND 2017

	2018	2017
ASSETS		
Investments at Fair Value, see Note C	\$ 4,077,715	\$ 3,941,413
Receivables		
Participant contributions	37,357	30,008
Employer contributions	6,726	5,968
Dividends receivable	-	269
Notes Receivable from Participants	109,152	139,227
Total Receivables	153,235	175,472
TOTAL ASSETS	4,230,950	4,116,885
LIABILITIES		
Excess Contributions Payable	43,916	46,322
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 4,187,034</u>	<u>\$ 4,070,563</u>

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEAR ENDED DECEMBER 31, 2018

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

INVESTMENT INCOME (LOSS)

Interest and dividend income	\$ 285,487
Net appreciation (depreciation) in fair value of investments	<u>(590,862)</u>
Total Investment Income (Loss)	<u>(305,375)</u>

Interest Income on Notes Receivable from Participants	6,822
---	-------

CONTRIBUTIONS

Participants	998,387
Rollovers	46,656
Employer	<u>177,617</u>
Total contributions	<u>1,222,660</u>

Total additions	<u>924,107</u>
-----------------	----------------

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Benefits paid to participants	803,379
Administrative expenses	<u>4,257</u>
Total deductions	<u>807,636</u>

NET INCREASE (DECREASE)	116,471
-------------------------	---------

NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	<u>4,070,563</u>
End of year	<u><u>\$ 4,187,034</u></u>

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

NOTE A – PLAN DESCRIPTION

The following description of the Vsolvit, LLC 401(k) Profit Sharing Plan & Trust (the “Plan”) provides only general information. Participants should refer to the plan document for a more complete description of the Plan’s provisions.

GENERAL

The Plan is a defined contribution 401(k) salary savings plan sponsored by Vsolvit, LLC (the “Company” and “Employer”) with a plan year end of December 31st. The original Plan became effective December 31, 2013 and was most recently amended December 30, 2016 noting the appointment of a custodian. The provisions of the Plan are included in the official Plan document, which legally governs the operations of the Plan and is available for more detailed information. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

ELIGIBILITY

The Plan covers substantially all employees of the Company who have a minimum of three months of service and are age twenty-one or older. In general, covered employees may enter the Plan on the first day of the month coinciding with or next following the date on which they satisfy the eligibility requirements.

PARTICIPANT AND COMPANY CONTRIBUTIONS

Each year, participants may elect to contribute a percentage of their eligible compensation to the Plan in pre-tax or Roth contributions from 1% to 92% in one percent increments up to the maximum allowed under the Internal Revenue Code (“IRC”). Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also rollover funds from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The plan provides for an Employer match of 25 percent of employee deferrals up to 8 percent of eligible compensation. This match is made each payroll period. In addition, the Plan allows for a discretionary employer profit sharing contribution each year. This contribution would be made to all employees employed at the end of the Plan year based upon a pro rata share of each employee’s compensation to total compensation. The plan also allows for a qualified non-elective discretionary contribution to the Plan for non-highly compensated employees. For 2018 and 2017, the Company elected to make no employer profit sharing contributions to the Plan. No non-elective Employer contributions were made to the Plan during 2018. \$6,850 of non-elective contributions were made to the Plan during 2017. Contributions are subject to Internal Revenue Service (“IRS”) limitations. Employer contributions are invested as directed by the participant.

PARTICIPANT ACCOUNTS

Each participant’s account is credited with the participant’s contribution and allocations of (a) the Company’s contributions, and (b) Plan earnings or losses and is charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

VESTING

Participants are immediately vested in their elective (voluntary) contributions and income or loss thereon. Vesting in the Company’s contribution portion of their account is based upon years of continuous service. A participant is 100 percent vested after 6 years of credited service.

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

NOTE A – PLAN DESCRIPTION – Cont.

FORFEITED ACCOUNTS

At December 31, 2018 and 2017, forfeited non-vested accounts totaled \$59,716 and \$24,566, respectively. \$24,566 was dispersed to participant accounts in 2018 based on a discretionary pro rata schedule. Funds can be used to reduce future employer contributions, dispersed to participant accounts based on a discretionary pro rata schedule, or to pay expenses.

NOTES RECEIVABLE FROM PARTICIPANTS

The Plan provides that participants can borrow funds up to a maximum equal to the lesser of 50 percent of their vested account balance or \$50,000. The loans are secured by the balance in the participant's account and bear interest at reasonable fixed rates. The term of the loan cannot exceed five years, except if the loan proceeds are used to finance the purchase of a primary residence, in which case the loan term may not exceed thirty years. Principal and interest is paid ratably through periodic payroll deductions.

BENEFIT PAYMENTS

On termination of service, a participant may elect to receive either a partial lump sum or a lump sum amount equal to the value of the vested balance in their account, an installment distribution or delay receipt of benefits. Withdrawals in case of a financial hardship are allowed under the Plan. In addition, participants age 59 ½ or older may receive in-service distributions.

NOTE B – SUMMARY OF ACCOUNTING POLICIES

BASIS OF ACCOUNTING

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

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 exit price). See Note D for a discussion of fair value measurements.

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

USE OF ESTIMATES

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

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 recorded as administrative expenses and are paid out of the participant's account when they are incurred. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant balance is reduced and a benefit payment is recorded. No allowance for credit losses has been recorded as of December 31, 2018 or 2017.

EXCESS CONTRIBUTIONS PAYABLE

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service are recorded as a liability with a corresponding reduction to contributions. The Plan distributed the 2018 excess contributions to the applicable participants before March 15, 2019.

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

NOTE B – SUMMARY OF ACCOUNTING POLICIES – Cont.

PAYMENT OF BENEFITS

Benefit payments to participants are recorded when paid.

OPERATING EXPENSES

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Investment related expenses are included in the net appreciation of the fair value of investments.

DATE OF MANAGEMENT REVIEW

Subsequent events were evaluated through August 31, 2019, which is the date the financial statements were available to be issued. Management is not required to and has not evaluated events or transactions that occurred after August 31, 2019.

NOTE C – UNAUDITED INVESTMENT INFORMATION CERTIFIED BY TRUSTEE

The Plan Administrator has elected the method of compliance permitted by 29 CFR Section 2520.103-8 of the Department of Labor Rules and Regulations and disclosure under ERISA. Accordingly, as permitted under such election, the following information was certified by the trustee, Mid Atlantic Trust Company, and was not subjected to any auditing procedures performed by the independent public accountants.

- a. All investments shown in the accompanying statements of net assets available for benefits.
- b. Net investment income from the investments, as shown in the accompanying statement of changes in net assets available for benefits, including dividends and interest income and net realized and unrealized appreciation (depreciation) in the fair value of assets.

NOTE D – FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
Level 2	Inputs to the valuation method include <ul style="list-style-type: none">• quoted prices for similar assets or liabilities in active markets;• quoted prices for identical or similar assets or liabilities in inactive markets;• inputs other than quoted prices that are observable for the asset and liability; and• inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

**VSOLVIT, LLC 401(k) PROFIT SHARING
PLAN & TRUST**

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2018 AND 2017

NOTE D – FAIR VALUE MEASUREMENTS – Cont.

Level 3

Inputs to the valuation methodology are unobservable and significant to the fair value measurement of the assets and liabilities.

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

There have been no transfers between levels in 2018 or 2017.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2018 and 2017.

Money Market Shares: Valued based on quoted prices in active markets for identical securities.

Mutual Fund Shares: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2018 and 2017. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

	Assets at Fair Value as of December 31, 2018			
	Level 1	Level 2	Level 3	Total
Money Market Funds	\$ 60,125	\$ -	\$ -	\$ 60,125
Mutual Funds	4,017,590	-	-	4,017,590
Investments at Fair Value	\$ 4,077,715	\$ -	\$ -	\$ 4,077,715

		Assets at Fair Value as of December 31, 2017			
		Level 1	Level 2	Level 3	Total
	Mutual Funds	\$ 3,941,413	\$ -	\$ -	\$ 3,941,413
Investments at Fair Value		\$ 3,941,413	\$ -	\$ -	\$ 3,941,413

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

NOTE E – RELATED-PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Plan investments are shares of a money market fund and mutual funds managed by various fund companies and sponsored by the trustee. These transactions, along with the transactions related to the notes receivable from participants, qualify as party-in-interest transactions. Fees incurred by the Plan for investment management services are included in the net appreciation in fair value of investments and are paid through revenue sharing, rather than a direct payout..

Certain administrative expenses for legal, accounting and other services are rendered by parties in interest and are paid by the Company. The Company provides certain accounting and administrative services to the Plan for which it receives no compensation.

NOTE F – TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated April 10, 2014 that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the opinion letter, the Plan's management 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.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2015.

NOTE G – 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 H – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100 percent vested in their accounts including employer contributions.

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

NOTE I – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for the benefits per the financial statements to the Form 5500 as of and the for year ended December 31, 2018 and 2017:

	2018	2017
Net assets available for benefits per the financial statements	\$ 4,187,034	\$ 4,070,563
Less: Dividends posted to trust in 2017 but not reflected on the 5500	-	(9,735)
Add: 2017 loan payment not posted to the trust till 2018	811	-
Less: Qualified non-elective contribution	-	(6,850)
Add: Excess contributions payable 2017	-	46,322
Add: Excess contributions payable 2018	43,916	-
Net assets available for benefits per the Form 5500	<u>\$ 4,231,761</u>	<u>\$ 4,100,300</u>

The following is a reconciliation of contributions per the financial statements to the Form 5500 as of and for the year ended December 31, 2018:

Contributions per the financial statements	\$ 1,222,660
Add: 2018 excess contributions payable	43,916
Contributions per the Form 5500	<u>\$ 1,266,576</u>

The following is a reconciliation of deductions per the financial statements to the Form 5500 as of and for the year ended December 31, 2018:

Deductions per the financial statements	\$ 807,636
Add: 2017 excess contributions payable	46,322
Deductions per the Form 5500	<u>\$ 853,958</u>

SUPPLEMENTAL SCHEDULE

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2018

EIN: 20-5402388 PLAN NUMBER: 001

INFORMATION IN SUPPORT OF FORM 5500, SCHEDULE H, PART IV, LINE 4(i)

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	Cost	Current Value	
Mutual Funds:				
American Century Small Company Fund	Registered Investment Company Shares	**	\$ 73,830	
BlackRock Mid Cap Growth Equity Portfolio	Registered Investment Company Shares	**	198,340	
Columbia Disciplined Value Fund	Registered Investment Company Shares	**	62,108	
Columbia Disciplined Core Fund	Registered Investment Company Shares	**	95,391	
Columbia Mid Cap Index Fund	Registered Investment Company Shares	**	86,465	
Columbia Small Cap Index Fund	Registered Investment Company Shares	**	114,396	
Dreyfus/The Boston Company Small/Mid CapGrowth Fund	Registered Investment Company Shares	**	45,999	
Federated Kaufmann Large Cap Fund	Registered Investment Company Shares	**	291,529	
Fidelity Advisor Mid Cap Value Fund	Registered Investment Company Shares	**	120,568	
Franklin Focused Core Equity Fund	Registered Investment Company Shares	**	16,791	
Janus Enterprise Fund	Registered Investment Company Shares	**	102,468	
JP Morgan Value Advantage Fund	Registered Investment Company Shares	**	108,247	
JP Morgan Intrepid Mid Cap Fund	Registered Investment Company Shares	**	29,941	
JP Morgan Growth Advantage Fund	Registered Investment Company Shares	**	174,294	
Prudential QMA Small Cap Value Fund	Registered Investment Company Shares	**	9,725	
Wells Fargo Small Company Growth Fund	Registered Investment Company Shares	**	73,410	
Wells Fargo Opportunity Fund	Registered Investment Company Shares	**	55,650	
Wells Fargo Special Mid Cap Value Fund	Registered Investment Company Shares	**	7,087	
Franklin Mutual International Fund	Registered Investment Company Shares	**	60,072	
Goldman Sachs Emerging Markets Equity Insights Fund	Registered Investment Company Shares	**	42,360	
Ivy International Core Equity Fund	Registered Investment Company Shares	**	16,625	
Oppenheimer International Growth Fund	Registered Investment Company Shares	**	76,874	
Alliance Bernstein High Income Fund	Registered Investment Company Shares	**	91,512	
BlackRock Total Return Fund	Registered Investment Company Shares	**	54,739	
Eaton Vance Short Duration Strategic Income Fund	Registered Investment Company Shares	**	13,544	
JP Morgan Government Bond Fund	Registered Investment Company Shares	**	197,154	
JP Morgan Limited Duration Bond Fund	Registered Investment Company Shares	**	9,374	
Nuveen Inflation Protected Securities Fund	Registered Investment Company Shares	**	24,713	
Templeton Global Total Return Fund	Registered Investment Company Shares	**	12,626	
Wells Fargo Core Bond Fund	Registered Investment Company Shares	**	113,743	
BlackRock Global Allocation Fund	Registered Investment Company Shares	**	50,659	
Fidelity Advisor Balanced Fund	Registered Investment Company Shares	**	186,744	
Ivy Asset Strategy Fund	Registered Investment Company Shares	**	6,165	
JP Morgan Smart Retirement Income Fund	Registered Investment Company Shares	**	61,417	
JP Morgan Smart Retirement 2055 Fund	Registered Investment Company Shares	**	39,488	
JP Morgan Smart Retirement 2035 Fund	Registered Investment Company Shares	**	261,185	
JP Morgan Smart Retirement 2025 Fund	Registered Investment Company Shares	**	152,683	
JP Morgan Smart Retirement 2020 Fund	Registered Investment Company Shares	**	117,644	

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2018

EIN: 20-5402388 PLAN NUMBER: 001

INFORMATION IN SUPPORT OF FORM 5500, SCHEDULE H, PART IV, LINE 4(i)

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	Cost	Current Value	
JP Morgan Smart Retirement 2040 Fund	Registered Investment Company Shares	**	255,903	
JP Morgan Smart Retirement 2030 Fund	Registered Investment Company Shares	**	328,021	
JP Morgan Smart Retirement 2045 Fund	Registered Investment Company Shares	**	119,382	
JP Morgan Smart Retirement 2050 Fund	Registered Investment Company Shares	**	50,917	
JP Morgan Smart Retirement 2060 Fund	Registered Investment Company Shares	**	7,807	
Total Mutual Funds				4,017,590
Federated U.S. Treasury Cash Reserves Service Shares	Money Market Fund	-		60,125
* Notes Receivable from Participants	Maturity dates through 2046 Interest rates of 4.25% through 5.75%	-		109,152
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR				<u><u>\$ 4,186,867</u></u>

(*) Denotes parties in interest

(**) Cost omitted for participant-directed investments

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2018

EIN: 20-5402388 PLAN NUMBER: 001

INFORMATION IN SUPPORT OF FORM 5500, SCHEDULE H, PART IV, LINE 4(i)

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	Cost	Current Value	
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American Century Small Company Fund	Registered Investment Company Shares	**	\$ 73,830	
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Columbia Disciplined Core Fund	Registered Investment Company Shares	**	95,391	
Columbia Mid Cap Index Fund	Registered Investment Company Shares	**	86,465	
Columbia Small Cap Index Fund	Registered Investment Company Shares	**	114,396	
Dreyfus/The Boston Company Small/Mid CapGrowth Fund	Registered Investment Company Shares	**	45,999	
Federated Kaufmann Large Cap Fund	Registered Investment Company Shares	**	291,529	
Fidelity Advisor Mid Cap Value Fund	Registered Investment Company Shares	**	120,568	
Franklin Focused Core Equity Fund	Registered Investment Company Shares	**	16,791	
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JP Morgan Growth Advantage Fund	Registered Investment Company Shares	**	174,294	
Prudential QMA Small Cap Value Fund	Registered Investment Company Shares	**	9,725	
Wells Fargo Small Company Growth Fund	Registered Investment Company Shares	**	73,410	
Wells Fargo Opportunity Fund	Registered Investment Company Shares	**	55,650	
Wells Fargo Special Mid Cap Value Fund	Registered Investment Company Shares	**	7,087	
Franklin Mutual International Fund	Registered Investment Company Shares	**	60,072	
Goldman Sachs Emerging Markets Equity Insights Fund	Registered Investment Company Shares	**	42,360	
Ivy International Core Equity Fund	Registered Investment Company Shares	**	16,625	
Oppenheimer International Growth Fund	Registered Investment Company Shares	**	76,874	
Alliance Bernstein High Income Fund	Registered Investment Company Shares	**	91,512	
BlackRock Total Return Fund	Registered Investment Company Shares	**	54,739	
Eaton Vance Short Duration Strategic Income Fund	Registered Investment Company Shares	**	13,544	
JP Morgan Government Bond Fund	Registered Investment Company Shares	**	197,154	
JP Morgan Limited Duration Bond Fund	Registered Investment Company Shares	**	9,374	
Nuveen Inflation Protected Securities Fund	Registered Investment Company Shares	**	24,713	
Templeton Global Total Return Fund	Registered Investment Company Shares	**	12,626	
Wells Fargo Core Bond Fund	Registered Investment Company Shares	**	113,743	
BlackRock Global Allocation Fund	Registered Investment Company Shares	**	50,659	
Fidelity Advisor Balanced Fund	Registered Investment Company Shares	**	186,744	
Ivy Asset Strategy Fund	Registered Investment Company Shares	**	6,165	
JP Morgan Smart Retirement Income Fund	Registered Investment Company Shares	**	61,417	
JP Morgan Smart Retirement 2055 Fund	Registered Investment Company Shares	**	39,488	
JP Morgan Smart Retirement 2035 Fund	Registered Investment Company Shares	**	261,185	
JP Morgan Smart Retirement 2025 Fund	Registered Investment Company Shares	**	152,683	
JP Morgan Smart Retirement 2020 Fund	Registered Investment Company Shares	**	117,644	

VSOLVIT, LLC 401(k) PROFIT SHARING PLAN & TRUST

SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2018

EIN: 20-5402388 PLAN NUMBER: 001

INFORMATION IN SUPPORT OF FORM 5500, SCHEDULE H, PART IV, LINE 4(i)

(a)	(b)	(c)	(d)	(e)
Identity of Issue, Borrower, Lessor, or Similar Party	Description of investment, including maturity date, rate of interest, collateral, and par or maturity value	Cost	Current Value	
JP Morgan Smart Retirement 2040 Fund	Registered Investment Company Shares	**	255,903	
JP Morgan Smart Retirement 2030 Fund	Registered Investment Company Shares	**	328,021	
JP Morgan Smart Retirement 2045 Fund	Registered Investment Company Shares	**	119,382	
JP Morgan Smart Retirement 2050 Fund	Registered Investment Company Shares	**	50,917	
JP Morgan Smart Retirement 2060 Fund	Registered Investment Company Shares	**	7,807	
Total Mutual Funds				4,017,590
Federated U.S. Treasury Cash Reserves Service Shares	Money Market Fund	-		60,125
* Notes Receivable from Participants	Maturity dates through 2046 Interest rates of 4.25% through 5.75%	-		109,152
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR				<u><u>\$ 4,186,867</u></u>

(*) Denotes parties in interest

(**) Cost omitted for participant-directed investments