# 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

**2018**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

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

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

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

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

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
SARGENT AND LUNDY LLC SAVINGS INVESTMENT PLAN

**1b** Three-digit plan number (PN) ▶ 003

**1c** Effective date of plan 01/01/1981

**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)
SARGENT AND LUNDY, L.L.C.

55 EAST MONROE STREET
CHICAGO, IL 60603

**2b** Employer Identification Number (EIN)
36-1729848

**2c** Plan Sponsor's telephone number
312-269-2130

**2d** Business code (see instructions)
541330

**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. | 09/30/2019 | DAWN MCMILLIN |
| | **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 |

| | | | |
|---|---|---|---|
| **3a** | Plan administrator's name and address [X] Same as Plan Sponsor | **3b** | Administrator's EIN |
| | | **3c** | Administrator's telephone number |
| **4** | If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:<br>**a** Sponsor's name<br>**c** Plan Name | **4b** | EIN |
| | | **4d** | PN |
| **5** | Total number of participants at the beginning of the plan year | **5** | 3805 |
| **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)** | 2044 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 1857 |
| **b** | Retired or separated participants receiving benefits | **6b** | 340 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 1484 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c** | **6d** | 3681 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 3 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 3684 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 3603 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 19 |
| **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 2F 2G 2J 2K 2R 2S 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) | | **9b** Plan benefit arrangement (check all that apply) | |
|---|---|---|---|
| **(1)** | [ ] Insurance | **(1)** | [ ] Insurance |
| **(2)** | [ ] Code section 412(e)(3) insurance contracts | **(2)** | [ ] Code section 412(e)(3) insurance contracts |
| **(3)** | [X] Trust | **(3)** | [X] Trust |
| **(4)** | [ ] General assets of the sponsor | **(4)** | [ ] General assets of the sponsor |

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

**a Pension Schedules**

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

**b General Schedules**

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **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 C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2018**<br>**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
SARGENT AND LUNDY LLC SAVINGS INVESTMENT PLAN

**B** Three-digit plan number (PN) ▶ 003

**C** Plan sponsor's name as shown on line 2a of Form 5500
SARGENT AND LUNDY, L.L.C.

**D** Employer Identification Number (EIN)
36-1729848

## Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] 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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

**(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)

FINANCIAL ENGINES

77-0473565

| (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 | ADVISOR | 502076 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

AON HEWITT

36-3109431

| (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 | INVESTMENT ADVISOR | 121355 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

| (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? |
|---|---|---|---|---|---|---|
| 37 60 64 65 71 | RECORDKEEPER | -82017 | Yes [X] No [ ] | Yes [X] No [ ] | 0 | Yes [X] 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 99 | 0 |

| **(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. |
|---|---|
| FINANCIAL ENGINES<br>1050 ENTERPRISE WAY 3RD FLOOR<br>SUNNYVALE, CA 94089 | AN ANNUAL FEE EQUALING THE GREATER OF: (I) 45% - 47% OF THE DISCRETIONARY ACCOUNT SERVICE FEES OR (II) 13 - 16 BASIS POINTS ON AUM AND A $1 ANNUAL FEE FOR ADVICE ELIGIBLE PARTICIPANTS WHERE CONTRACT INCLUDES SUCH FEE. |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ABF BALANCED INST - BOSTON FINANCI<br>P.O. BOX 8480<br>BOSTON, MA 02266 | 0.04% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ABF INTL EQUITY INST - BOSTON FINA<br>P.O. BOX 8480<br>BOSTON, MA 02266 | 0.04% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ABF LG CAP VAL INST - BOSTON FINAN<br>P.O. BOX 8480<br>BOSTON, MA 02266 | 0.04% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ABF SM CAP VAL INST - BOSTON FINAN<br>P.O. BOX 8480<br>BOSTON, MA 02266 | 0.04% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ALGER CAP APPREC I - DST ASSET MAN<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ALGER MIDCAP GRTH I - DST ASSET MA<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ALGER SM CAP GR IS I - DST ASSET M<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| AM CENT SM COMPANY I - AMERICAN CE<br><br>44-0619208 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| AMG M LS BOND I - BNY MELLON INVES<br>P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| AMG M SPECIAL EQ I - BNY MELLON IN<br>P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ARIEL APPREC INST - U.S. BANCORP F<br>P.O. BOX 701<br>MILWAUKEE, WI 53201 | 0.10% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ARIEL FUND - U.S. BANCORP FUND SER<br>P.O. BOX 701<br>MILWAUKEE, WI 53201 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ARIEL FUND INST - U.S. BANCORP FUN<br>P.O. BOX 701<br>MILWAUKEE, WI 53201 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ARTISAN INTL - DST ASSET MANAGER S<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| BARON ASSET INST - DST SYSTEMS INC<br><br>43-1581814 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| BARON GROWTH - DST SYSTEMS INC<br><br>43-1581814 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| BARON GROWTH INST - DST SYSTEMS IN<br><br>43-1581814 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| C&S INST REALTY SHS - BOSTON FINAN | P.O. BOX 8480<br>BOSTON, MA 02266 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| CALVERT BALANCED I - DST ASSET MAN | PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| CALVERT EQUITY I - DST ASSET MANAG | PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.10% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| CALVERT MID-CAP I - DST ASSET MANA<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| CB VALUE TR I - BNY MELLON INVESTM<br>P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.11% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| DWS CROCI EQ DIV IS - DWS SERVICE<br>DEAWM SERVICE COMPANY<br>210 W. 10TH STREET<br>KANSAS CITY, MO 64105 | 0.10% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| FPA CRESCENT - UMB FUND SERVICES I<br>39-1657495 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| HRDG LVNR INTL EQ IS - NORTHERN TR 50 SOUTH LASALLE STREET CHICAGO, IL 60603 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| INVS GBL SMMDCPGR R5 - INVESCO CAN 5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA | 0.35% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| J H GLB RESEARCH I - JANUS SERVICE<br><br>43-1804048 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF ACTIVE INTL I - DST ASSET MAN<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF CP FX INC I - DST ASSET MANAG<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF GLOBAL STRAT I - DST ASSET MA<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF GROWTH I - DST ASSET MANAGER<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF INTL EQUITY I - DST ASSET MAN<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MSIF MID CAP GRTH I - DST ASSET MA<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NB CORE BOND INST - STATE STREET B<br>04-0025081 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NB FOCUS INST - STATE STREET BANK<br>04-0025081 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NB GUARDIAN INST - STATE STREET BA<br><br>04-0025081 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NB LG CAP VAL INST - STATE STREET<br><br>04-0025081 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| PRMCP ODYSSEY STOCK - U.S. BANCORP P.O. BOX 701<br>MILWAUKEE, WI 53201 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| RHJ MICRO CAP - DST SYSTEMS INC<br><br>43-1581814 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ROYCE LOW PR STK INV - DST ASSET M<br>PO BOX 219432<br>KANSAS CITY, MO 64121 | 0.20% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| TCHSTN FOCUSED I - BNY MELLON INVE<br>P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.07% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| TCHSTN INTL SMCAP I - BNY MELLON I<br>P.O. BOX 9793<br>PROVIDENCE, RI 02940 | 0.07% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| TCW SELECT EQUITY I - U.S. BANCORP<br>P.O. BOX 701<br>MILWAUKEE, WI 53201 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| TRP GROWTH STOCK - T. ROWE PRICE S<br><br>52-2269240 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA CRNSTN MOD AGGR - USAA SHAREH<br><br>74-0959140 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA EMRG MKTS INST - USAA SHAREHO<br><br>74-0959140 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA GOVT SEC - USAA SHAREHOLDER A<br><br>74-0959140 | 0.25% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA GOVT SEC INST - USAA SHAREHOL<br><br>74-0959140 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA GROWTH INST - USAA SHAREHOLDE<br><br>74-0959140 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA INCOME INST - USAA SHAREHOLDE<br><br>74-0959140 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA INCOME STK INST - USAA SHAREH<br><br>74-0959140 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| USAA INTL INST - USAA SHAREHOLDER<br><br>74-0959140 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| VRS SMALL CAP GRTH Y - FIS INVESTO 4249 EASTON WAY, SUITE 400 COLUMBUS, OH 43219 | 0.10% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| WA CORE BOND I - BNY MELLON INVEST P.O. BOX 9793 PROVIDENCE, RI 02940 | 0.11% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| WF GOVT SECS IS - DST ASSET MANAGE PO BOX 219432 KANSAS CITY, MO 64121 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| WF OPPORTUNITY IS - DST ASSET MANA PO BOX 219432 KANSAS CITY, MO 64121 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| DOUBLELINE TOTAL RETURN BOND FD CL 777 EAST WISCONSIN AVENUE MILWAUKEE, WI 53202 | 0.06% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MATTHEWS CHINA FUND 4 EMBARCADERO CENTER SUITE 550 SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| T ROWE PRICE DIVIDEND GROWTH 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| WASATCH SMALL CAP GROWTH | 505 WAKARA WAY SUITE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| BUFFALO SMALL CAP GROWTH | 615 E. MICHIGAN STREET<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| CLIPPER | 2949 EAST ELVIRA ROAD SUITE 101<br>TUCSON, AZ 85706 | 0.35% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| GOLDMAN SACHS TECH OPPORTUNITIES C 71 S. WACKER DRIVE 4TH FLOOR CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| GUGGENHEIM INVESTMNTGRADE BOND CL 9601 BLACKWELL RD. STE. 500 ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NUVEEN SYMPHONY CREDIT OPPORTUNTS 333 WEST WACKER DRIVE CHICAGO, IL 60606 | 0.07% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| PERRITT MICROCAP OPPORTUNITIES FD<br>300 SOUTH WACKER DR. SUITE 2880<br>CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| T ROWE PRICE CAP APPRECIATION<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| SMEAD VALUE INSTL SHARE CLASS<br>1290 BROADWAY SUITE 1100<br>DENVER, CO 80203 | 0.12% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| VICTORY MUNDER MULTICAP FD CL A<br>127 PUBLIC SQUARE<br>CLEVELAND, OH 44114 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| DOUBLELINE CORE FIXED INCOME CL I<br>777 EAST WISCONSIN AVENUE<br>MILWAUKEE, WI 53202 | 0.06% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| EVENTIDE HEALTHCARE AND LIFE SCIEN<br>80 ARKAY SUITE 110<br>HAUPPAUGE, NY 11788 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| BTS TACTICAL FIXED INCOME FUND CLA | 420 BEDFORD ST. SUITE 340<br>LEXINGTON, MA 02420 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| PARNASSUS ENDEAVOR FUND | ONE MARKET STREET STEUART TOWER SUI<br>SAN FRANCISCO, CA 94105 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| PIMCO INCOME FUND CL A | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| T ROWE PRICE BLUE CHIP GROWTH INC<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| RYDEX INVERSE NASDAQ 1002X CL H<br>9601 BLACKWELL RD. STE. 500<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| FEDERATED HIGH YIELDTRUST SS<br>4000 ERICSSON DRIVE<br>WARRENDALE, PA 15086-7515 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| FIRST EAGLE GLOBAL CLASS C | 1345 AVENUE OF THE AMERICAS 48TH FL<br>NEW YORK, NY 10105 | 0.09% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| GOTHAM NEUTRAL FUND INSTITUTIONAL | 535 MADISON AVE 30TH FLR<br>NEW YORK, NY 10022 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| HARBOR INTL INV | 111 S. WACKER DR 34TH FLOOR<br>CHICAGO, IL 60606 | 0.35% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| JANUS HENDERSON ENTERPRISE T<br>151 DETROIT ST.<br>DENVER, CO 80206 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| JANUS HENDERSON U.S.MANAGED VOLATI<br>151 DETROIT ST.<br>DENVER, CO 80206 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| LEUTHOLD CORE INVESTMENT RETAIL<br>33 SOUTH SIXTH ST. SUITE 4600<br>MINNEAPOLIS, MN 55402 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MATTHEWS INDIA FUND<br>4 EMBARCADERO CENTER SUITE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| PAX ELLEVATE GLOBAL WOMENS LDERSP<br>1290 BROADWAY SUITE 1100<br>DENVER, CO 80203 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| T ROWE PRICE CAP OPPORTUNITY<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| AQR LONG SHORT EQUITY FUND CL I | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| DOUBLELINE LOW DURATION CL N | 777 EAST WISCONSIN AVENUE<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| EATON VANCE GREATER INDIA FUND CLA | TWO INTERNATIONAL PLACE<br>BOSTON, MA 02110 | $16.00 |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MFS INTERNATIONAL VALUE FD CL I<br>111 HUNTINGTON AVE<br>BOSTON, MA 02199 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ALTEGRIS FUTURES EVOLUTION CL I<br>1200 PROSPECT STREET SUITE 400<br>LAJOLLA, CA 92037 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| T ROWE PRICE HEALTH SCIENCES<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| AMERICAN WASHINGTON MUTUAL INVESTO 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321 | 0.37% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| GOTHAM ABSOLUTE RETURN FUND INSTL 535 MADISON AVE 30TH FLR NEW YORK, NY 10022 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| GUGGENHEIM TOTAL RETURN BOND CL P 9601 BLACKWELL RD. STE. 500 ROCKVILLE, MD 20850 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| MANNING & NAPIER DISCIPL VALUE SER | 290 WOODCLIFF DR.<br>FAIRPORT, NY 14450 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| MERGER FUND | 100 SUMMIT LAKE DRIVE #201<br>VALHALLA, NY 10595 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| AKRE FOCUS FUND RETAIL | 777 E. WISCONSIN AVE. 4TH FL<br>MILWAUKEE, WI 53202 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| AQR MANAGED FUTURES STRATEGY HV CL 1 GREENWICH PLAZA GREENWICH, CT 06830 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| IMAN FUND RETAIL SHARES 721 ENTERPRISE DRIVE OAKBROOK, IL 60523 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| ARTISAN INTL VALUE FUND INV CL 875 EAST WISCONSIN AVENUE SUITE 800 MILWAUKEE, WI 53202 | 0.39% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| BUFFALO DISCOVERY FUND 615 E. MICHIGAN STREET MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| HENNESSY FOCUS FUND INVESTOR CLASS 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MATTHEWS EMERGING ASIA FUND INVEST 4 EMBARCADERO CENTER SUITE 550 SAN FRANCISCO, CA 94111 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| MATTHEWS PACIFIC TIGER FUND | 4 EMBARCADERO CENTER SUITE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| FMI LARGE CAP FUND | 777 EAST WISCONSIN AVENUE MK WI T4M<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|---|
| MATTHEWS ASIA GROWTH FUND INV | 4 EMBARCADERO CENTER SUITE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| MORGAN STANLEY GLOBAL OPPORTUNITY 522 FIFTH AVENUE 4TH FLOOR NEW YORK, NY 10036 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| NUVEEN EQUITY MARKET NEUTRAL FD CL 333 WEST WACKER DRIVE CHICAGO, IL 60606 | 0.07% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| PRIMECAP ODYSSEY AGGRESSIVE GRWTH 2020 E. FINANCIAL WAY SUITE 100 GLENDORA, CA 91741 | 0.08% |

## 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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| THOMPSON BOND FUND<br>918 DEMING WAY 3RD FLOOR<br>MADISON, WI 53717 | 0.25% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 0 |

| **(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. |
|---|---|
| WEITZ VALUE<br>1125 SOUTH 103RD STREET<br>OMAHA, NE 68124 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| | | |

| **(d)** Enter name and EIN (address) of source of indirect compensation | **(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. |
|---|---|
| | |

## Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

| **(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 |
|---|---|---|
| | | |

## 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

**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
SARGENT AND LUNDY LLC SAVINGS INVESTMENT PLAN

**B** Three-digit plan number (PN) ▶ 003

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
SARGENT AND LUNDY, L.L.C.

**D** Employer Identification Number (EIN)
36-1729848

**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)

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FID US EQ INDX

**b** Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

| **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) |
|---|---|---|
| 04-3022712-011 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2020

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083982-001 | C | 18968074 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2040

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083974-001 | C | 14279909 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2025

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083980-001 | C | 14076894 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2030

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083978-001 | C | 11378191 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2035

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083976-001 | C | 10890303 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET INC

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 90-6083967-001 | C | 5155987 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2045

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 90-6083972-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21534261 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2055

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 27-6715091-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10408612 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2015

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 90-6083984-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9908456 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2060

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 45-3799419-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3931125 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2065

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 82-6194314-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 47945 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2050

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 90-6083970-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30948238 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY SHORT INTMEDIATE COM POOL

**b** Name of sponsor of entity listed in (a): FIDELITY MANAGMENT TRUST CO

| **c** EIN-PN 04-3022712-096 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 145744690 |
|---|---|---|

**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 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 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 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 |

| | |
|---|---|
| **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

**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
SARGENT AND LUNDY LLC SAVINGS INVESTMENT PLAN

**B** Three-digit plan number (PN) ▶ 003

**C** Plan sponsor's name as shown on line 2a of Form 5500
SARGENT AND LUNDY, L.L.C.

**D** Employer Identification Number (EIN)
36-1729848

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | 0 | 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) | 25715 | 0 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 10571176 | 13598330 |
| **(2)** U.S. Government securities | 1c(2) | 205755 | 206966 |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | 0 | 0 |
| **(B)** All other | 1c(3)(B) | 19796 | 77080 |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | 0 | 0 |
| **(B)** Common | 1c(4)(B) | 17712977 | 17108390 |
| **(5)** Partnership/joint venture interests | 1c(5) | 0 | 0 |
| **(6)** Real estate (other than employer real property) | 1c(6) | 0 | 0 |
| **(7)** Loans (other than to participants) | 1c(7) | 0 | 0 |
| **(8)** Participant loans | 1c(8) | 7333432 | 7240974 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 306962409 | 297272685 |
| **(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) | 553944195 | 497614352 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | -42825 | -19880 |

| | | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|---|
| **1d** | Employer-related investments: | | | |
| | **(1)** Employer securities | 1d(1) | 0 | 0 |
| | **(2)** Employer real property | 1d(2) | 0 | 0 |
| **e** | Buildings and other property used in plan operation | 1e | 0 | 0 |
| **f** | Total assets (add all amounts in lines 1a through 1e) | 1f | 896732630 | 833098897 |
| | **Liabilities** | | | |
| **g** | Benefit claims payable | 1g | 0 | 0 |
| **h** | Operating payables | 1h | 36968 | 35895 |
| **i** | Acquisition indebtedness | 1i | 0 | 0 |
| **j** | Other liabilities | 1j | 21018 | 45907 |
| **k** | Total liabilities (add all amounts in lines 1g through1j) | 1k | 57986 | 81802 |
| | **Net Assets** | | | |
| **l** | Net assets (subtract line 1k from line 1f) | 1l | 896674644 | 833017095 |

## 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) | 11473960 | |
| | **(B)** Participants | 2a(1)(B) | 26382278 | |
| | **(C)** Others (including rollovers) | 2a(1)(C) | 4456700 | |
| | **(2)** Noncash contributions | 2a(2) | 0 | |
| | **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 42312938 |
| **b** | **Earnings on investments:** | | | |
| | **(1)** Interest: | | | |
| | **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 179691 | |
| | **(B)** U.S. Government securities | 2b(1)(B) | 262 | |
| | **(C)** Corporate debt instruments | 2b(1)(C) | 1172 | |
| | **(D)** Loans (other than to participants) | 2b(1)(D) | 0 | |
| | **(E)** Participant loans | 2b(1)(E) | 353983 | |
| | **(F)** Other | 2b(1)(F) | 0 | |
| | **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 535108 |
| | **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | 0 | |
| | **(B)** Common stock | 2b(2)(B) | 266469 | |
| | **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | 26646103 | |
| | **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 26912572 |
| | **(3)** Rents | 2b(3) | | 0 |
| | **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 60745754 | |
| | **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 59338518 | |
| | **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 1407236 |
| | **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | 0 | |
| | **(B)** Other | 2b(5)(B) | -2540985 | |
| | **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | -2540985 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | -6856166 |
| (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) | | -60852788 |
| c Other income | 2c | | 330668 |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 1248583 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 63960374 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | 0 | |
| (3) Other | 2e(3) | 0 | |
| (4) Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 63960374 |
| f Corrective distributions (see instructions) | 2f | | 3427 |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 40100 |
| h Interest expense | 2h | | 0 |
| i Administrative expenses: (1) Professional fees | 2i(1) | 0 | |
| (2) Contract administrator fees | 2i(2) | 0 | |
| (3) Investment advisory and management fees | 2i(3) | 424462 | |
| (4) Other | 2i(4) | 477769 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 902231 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 64906132 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | -63657549 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 0 |
| (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: CROWE HORWATH **(2)** EIN: 35-0921680

**d** The opinion of an independent qualified public accountant is **not attached** because:

**(1)** ☐ This form is filed for a CCT, PSA, or MTIA. **(2)** ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

## Part IV Compliance Questions

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

| | | Yes | No | Amount |
|---|---|---|---|---|
| **a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | 4a | | X | |
| **b** Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | 4b | | X | |

| | | | Yes | No | Amount |
|---|---|---|---|---|---|
| c | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | 4c | | X | |
| d | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | 4d | | X | |
| e | Was this plan covered by a fidelity bond? | 4e | X | | 20000000 |
| 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 | | 25 |
| m | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 4m | | X | |
| n | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | 4n | | X | |

**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.**

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

**A** Name of plan
SARGENT AND LUNDY LLC SAVINGS INVESTMENT PLAN

**B** Three-digit plan number (PN) ▶ 003

**C** Plan sponsor's name as shown on line 2a of Form 5500
SARGENT AND LUNDY, L.L.C.

**D** Employer Identification Number (EIN)
36-1729848

## Part I Distributions

**All references to distributions relate only to payments of benefits during the plan year.**

**1** Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... **1**

**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107

**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**

## 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):

# SARGENT & LUNDY, L.L.C.
# SAVINGS INVESTMENT PLAN

Chicago, Illinois

## FINANCIAL STATEMENTS

December 31, 2018 and 2017

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
Chicago, Illinois

FINANCIAL STATEMENTS
December 31, 2018 and 2017

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Crowe LLP
Independent Member Crowe Global

# INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Sargent & Lundy, L.L.C.
Savings Investment Plan
Chicago, Illinois

## Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Sargent & Lundy, L.L.C. Savings Investment Plan, 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 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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such 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 certification from the trustee as of December 31, 2018 and 2017 and for the year ended December 31, 2018 that the information provided to the plan administrator by the trustee is complete and accurate.

(Continued)

***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 H, Line 4i - Schedule of Assets (Held at Year End) 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 and is presented for purposes 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.

***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.



Crowe LLP

Oak Brook, Illinois
September 26, 2019

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2018 and 2017

| | 2018 | 2017 |
|---|---|---|
| **ASSETS** | | |
| Investments, at fair value | $ 680,113,233 | $ 742,151,142 |
| Investments, at contract value | 145,662,888 | 147,520,738 |
| Total investments | 825,776,121 | 889,671,880 |
| Receivables | | |
| Notes receivable from participants | 7,240,974 | 7,333,432 |
| Total assets | 833,017,095 | 897,005,312 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 833,017,095 | $ 897,005,312 |

See accompanying notes to financial statements.

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2018

| | |
|---|---|
| **Additions to net assets attributed to:** | |
| Interest and dividend income | $ 29,535,432 |
| Contributions | |
| Employer | 11,473,960 |
| Employee | 26,382,278 |
| Rollovers | 4,456,700 |
| Total contributions | 42,312,938 |
| Total additions | 71,848,370 |
| **Deductions from net assets attributed to:** | |
| Net depreciation in fair value of investments | 68,759,171 |
| Benefits paid to participants | 66,599,646 |
| Administrative expenses | 477,770 |
| Total deductions | 135,836,587 |
| **Net decrease in net assets available for benefits** | (63,988,217) |
| **Net assets available for benefits** | |
| Beginning of year | 897,005,312 |
| End of year | $ 833,017,095 |

See accompanying notes to financial statements.

**NOTE 1 - PLAN DESCRIPTION**

The Sargent & Lundy, L.L.C. Savings Investment Plan ("the Plan") is a defined contribution plan covering all eligible employees, as defined, of Sargent & Lundy, L.L.C.; S&L Engineers, Ltd.; Sargent & Lundy Illinois, Incorporated (dissolved as of December 31, 2016); Sargent & Lundy Enterprises, L.L.C. (dissolved as of December 31, 2016) ; Sargent & Lundy Texas, L.L.C. (dissolved as of December 31, 2016); Sargent & Lundy International, Incorporated (collectively, "the Company"). The Plan is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. A further description of the Plan can be obtained from the plan document.

Contributions: Participants may make pretax and after-tax contributions subject to a combined maximum of the limits as defined in the plan document. Contributions are subject to the contribution limitations of the Internal Revenue Code ("IRC"). Absent an election in the first 60 days of employment, newly hired full-time employees will be automatically enrolled in the Plan at a pretax contribution rate of 6% of eligible compensation. The Plan has also adopted a contribution escalation clause which provides that, unless declined, each impacted participant who is contributing less than 10% of compensation to the Plan shall be deemed to have elected to increase his or her contribution percentage by 1% on each April 1, until the rate reaches 10% of compensation.

The Company contributes 50% of the first 6% of base compensation that an eligible participant contributes to the Plan. Additionally, the Company may make a discretionary contribution (non-matching contributions) to active eligible employees participating in the Plan. During 2018, the Company made a discretionary contribution of 3% of base compensation.

Participant Accounts: Each participant's account is credited with the participant's contribution and allocation of the Company's contribution (if eligible), investment earnings, and charged with his or her withdrawals and any applicable transaction fees. The benefit to which a participant is entitled is the participant's vested account balances.

Notes Receivable from Participants: Participants may obtain loans from plan assets based on individual account balances not to exceed the lesser of $50,000 or one half of their vested balance. Interest is charged at the U.S. prime rate, as quoted by the *Reuters News Service* as of the first day of the month in which the note is requested, plus 1 percentage point. The rate is fixed for the term of the note. Principal and interest payments over a period from 12 to 60 months are due semi-monthly for active full-time employees and monthly for terminated and temporary employees.

Vesting: Participants are immediately fully vested in participant contributions and fully vested in all employer contributions after one year of service.

Forfeited Accounts: The non-vested portion of terminated participant accounts are forfeited and may be used to reduce future company contributions, reduce plan expenses, or pay for new services.

Investment Options: Employees can choose any investment fund option offered or individual security investments (through a brokerage account option) to allocate their account balances. The Stable Value Fund, arranged through Fidelity Management Trust Company ("Fidelity") specifically for the Company, is composed of fixed income-type investments, such as individual and commingled guaranteed investment contracts, which are structured to yield a stable positive rate of return. The contributions made by each participant, as well as Company contributions, are allocated to investments based on elections made by the participant or to a default fund if no election is made.

(Continued)

**NOTE 1 - PLAN DESCRIPTION** (Continued)

Payment of Benefits: On termination of service, a participant may elect to remain in the Plan or choose from a number of distribution or loan options (some restrictions may apply). These options also apply to the beneficiary of a deceased participant.

Administration of the Plan and Trust: The Plan is administered by the Sargent & Lundy, L.L.C. Savings Investment Plan Committee. The trust created by the Plan is administered by the trustee, Fidelity. Trustee fees, legal expenses, and various other costs incurred in connection with the administration of the Plan may be paid by the Company or from the trust fund.

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

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

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 and disclosures, and actual results could differ from those estimates.

Investment Valuation and Income Recognition: The Plan's investments, other than fully benefit-responsive investment contracts, are stated at fair value. Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Contract value is the relevant measure for the Plan's fully benefit-responsive investment contracts, because contract value is the amount plan participants generally receive when executing transactions under the terms of the contract and plan provisions. 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.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

Payment of Benefits: Benefits are recorded when paid. A participant who has attained the age of 59-1/2 and is fully vested in all of his account balances may irrevocably elect to withdraw in a lump sum all or any portion of the net credit balances in his accounts.

Risks and Uncertainties: The Plan provides for various investments that, in general, are exposed to various risks, such as interest rate, credit, liquidity and overall market volatility risks. Due to the level of risk and uncertainty associated with certain investments and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits and the participants' individual account balances.

(Continued)

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** (Continued)

Income Taxes: Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. A tax position is recognized as a benefit only if it is "more likely than not" that the tax position would be sustained in a tax examination, with a tax examination presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized upon examination. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded.

The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by the Internal Revenue Service; 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 3 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS**

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income (loss) and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company, the trustee of the Plan. This information has not been audited by independent accountants.

**NOTE 4 - FAIR VALUE MEASUREMENTS**

Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs when measuring fair value. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurements) and gives the lowest priority to unobservable inputs (Level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

(Continued)

**NOTE 4 - FAIR VALUE MEASUREMENTS** (Continued)

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

*Mutual funds*: The fair values of mutual fund investments are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

*Common stocks*: The fair values of common stocks are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

*Collective trusts***:** The fair values of participation units held in collective trusts are based on the net asset values reported by the fund managers as of the financial statement dates and recent transaction prices. Each collective trust provides for daily redemptions by the Plan at reported net asset values per share with no advance notice requirements.

*Self-directed brokerage accounts***:** These primarily consist of mutual funds, common stocks, and interest-bearing cash, measured at fair value as described for these general investment types within this note.

*Interest-bearing cash:* Fair values of money market accounts and savings deposit accounts are estimated to approximate deposit account balances, payable on demand, as no discounts for credit quality or liquidity were determined to be applicable (Level 2 inputs).

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

Investments measured at fair value on a recurring basis are summarized below:

| | Fair Value Measurements at December 31, 2018, Using | | |
|---|---|---|---|
| | Total | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| Mutual funds | $ 488,170,045 | $ 488,170,045 | $ - |
| Brokerage account | 37,088,403 | 27,276,798 | 9,811,605 |
| Interest bearing cash | 3,326,791 | - | 3,326,791 |
| Collective Trusts* | 151,527,994 | - | - |
| Total | $ 680,113,233 | $ 515,446,843 | $ 13,138,396 |

(Continued)

**NOTE 4 - FAIR VALUE MEASUREMENTS** (Continued)

| | Fair Value Measurements at December 31, 2017, Using | | |
|---|---|---|---|
| | Total | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| Mutual funds | $ 543,352,209 | $ 543,352,209 | $ - |
| Brokerage account | 38,062,193 | 28,941,983 | 9,120,210 |
| Interest bearing cash | 984,970 | - | 984,970 |
| Collective Trusts* | 159,751,770 | - | - |
| Total | $ 742,151,142 | $ 572,294,192 | $ 10,105,180 |

* Investments measured at fair value using net asset value per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the hierarchy tables for such investments are intended to permit reconciliation of the fair value hierarchy to the investments at fair value line item presented in the statement of net assets available for benefits.

**NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS**

The Plan holds fully benefit-responsive investment contracts that are reported at contract value, which is generally the amount a participant would receive if he or she would initiate a withdrawal or transfer from the contract under the provisions of the Plan. Contract value represents contributions made to the contract, plus earnings, less participant withdrawals and administrative expenses. The contract value of the Plan's fully benefit-responsive investment contracts, by general type, are presented below:

| | 2018 | 2017 |
|---|---|---|
| Synthetic investment contracts | $ 145,662,882 | $ 147,520,738 |
| Total investments at contract value | $ 145,662,882 | $ 147,520,738 |

The synthetic investment contracts held by the Plan include wrap contracts that provide a guarantee that the credit rate will not fall below 0%. Cash flow volatility (for example, timing of benefit payments) as well as asset underperformance can be passed through to the Plan through adjustments to future crediting rates. Formulas are provided in each contract that adjusts renewal crediting rates to recognize the difference between the fair value and the book value of the underlying assets.

The contracts specify certain conditions under which distributions from the contracts would be payable at amounts below contract value. Such circumstances include, but are not limited to, plan termination, plan merger, premature contract termination initiated by the employer, and certain other employer-initiated events, such as a sale of a division, office closure, or layoff that results in distributions exceeding a set amount. The contracts limit the circumstances under which the Issuers may terminate the contracts.

(Continued)

**NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS** (Continued)

Examples of circumstances which would allow the Issuer to terminate the contracts include: the Plan's loss of its qualified status, uncured material breaches of responsibilities or material and adverse changes to the provisions of the Plan. If one of these events were to occur, the Issuers could terminate the contracts at amounts less than contract value. Currently, management believes that the occurrence of an event that would cause the Plan to transact contract distributions at less than contract value is not probable.

**NOTE 6 - TAX STATUS**

The Internal Revenue Service has determined and informed the Company by a letter dated October 7, 2015, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed and currently being operated in compliance with requirement of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) 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 7 - PARTY-IN-INTEREST TRANSACTIONS**

Parties-in-interest are defined under the Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer and certain others.

Certain plan investments are managed by Fidelity Management Trust Company, the Plan's trustee, or are shares of mutual funds offered by Fidelity Investments, an affiliate of the Plan's trustee. Accordingly, these investments qualify as party-in-interest investments. Investment management and trustee fees are paid by the Plan and these expenses are reflected in the financial statements as a reduction of the return on the Plan's investments.

Participants in the Plan are permitted to borrow funds from their vested balance as described in Note 1. These assets qualify as party-in-interest transactions. Notes receivable from participants were $7,240,974 and $7,333,432 at December 31, 2018 and 2017, respectively.

**NOTE 8 - 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 continue to be 100% vested in their accounts.

(Continued)

## NOTE 9 - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through September 26, 2019, which is the date the financial statements were available to be issued.

## NOTE 10 - 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, 2018 and 2017, to the Form 5500:

| | 2018 | 2017 |
|---|---|---|
| Net assets available for benefits per the financial statements | $ 833,017,095 | $ 897,005,312 |
| Miscellaneous reconciling items | - | (330,668) |
| Net assets per the Form 5500 | $ 833,017,095 | $ 896,674,644 |

The following is a reconciliation of the change in net assets available for benefits for the year ended December 31, 2018, per the financial statements to the net income reported in the 2018 Form 5500:

| | |
|---|---|
| Decrease in net assets available for benefits per the financial statements | $ (63,988,217) |
| 2017 miscellaneous reconciling items | 330,668 |
| Net loss per the Form 5500 | $ (63,657,549) |

**SUPPLEMENTAL SCHEDULE**

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Mutual Funds** | | |
| | Aberdeen Asset Management | ABDN Global Linc FI Inst | ** | $ 22,764 |
| | Aberdeen Asset Management | ABDN Global Eq Inst | ** | 259,860 |
| | Archer Funds | ABF Balanced Inst | ** | 656,306 |
| | Archer Funds | ABF Intl Equity Inst | ** | 100,096 |
| | Archer Funds | ABF Large Cap Value Inst | ** | 718,673 |
| | Archer Funds | ABF Small Cap Value Inst | ** | 697,708 |
| | American Funds | AF Wash Mutl Inv R6 | ** | 4,325,098 |
| | Alger | Alger Cap Apprec I Fund | ** | 1,370,308 |
| | Alger | Alger Midcap Growth I Fund | ** | 341,062 |
| | Alger | Alger Small Cap Growth I Fund | ** | 407,281 |
| | Allianz Global Investors | Alzgi Nfj Sm Cap Value R6 | ** | 924,153 |
| | American Century Investments | Am Cent Lg Co Val R6 | ** | 187,543 |
| | American Century Investments | Am Cent Sm Comp Inst | ** | 92,063 |
| | American Century Investments | Am Cent Ultra R6 | ** | 217,567 |
| | AMG Funds | AMG M LS Bond I | ** | 241,316 |
| | AMG Funds | Amg M Special Eq | ** | 104,097 |
| | AMG Funds | Amg Ren LG CP GR Z | ** | 191,616 |
| | AMG Funds | Amg MC Mid Cap Inst | ** | 155,534 |
| | Ariel Mutual Funds | Ariel Appreciation Inst | ** | 209,322 |
| | Ariel Mutual Funds | Ariel Fund Inst | ** | 894,735 |
| | Artisan Funds | Artisan Intl Inst | ** | 734,544 |
| | Artisan Funds | Artisan Mid Cap Inst | ** | 642,269 |
| | Baron Funds | Baron Asset Inst | ** | 290,667 |
| | Baron Funds | Baron Growth Inst | ** | 3,029,124 |
| | Cohen & Steers Capital Mgmt | C&S Rlty Fund Shs | ** | 2,187,189 |
| | Calvert | Calvert Balanced I | ** | 845 |
| | Calvert | Calvert Equity I | ** | 71,257 |
| | Calvert | Calvert Mid-Cap I | ** | 2,086 |
| | Legg Mason | CB Value Tr Fi | ** | 354,646 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Core Equity R6 | ** | 222,723 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Croci Eq Div IS | ** | 13,343 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Croci Intl R6 | ** | 31,103 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Glb Sm Cap R6 | ** | 103,234 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Sm Cap Growth R6 | ** | 51,505 |
| | Domini Social Investors | Domini Impact Eq IS | ** | 64,763 |
| * | Fidelity Investments | FID Asset Manager 20% Fund | ** | 190,462 |
| * | Fidelity Investments | FID Asset Manager 30% Fund | ** | 65,276 |
| * | Fidelity Investments | FID Asset Manager 40% Fund | ** | 42,188 |
| * | Fidelity Investments | FID Asset Manager 50% Fund | ** | 92,214 |
| * | Fidelity Investments | FID Asset Manager 60% Fund | ** | 216,979 |
| * | Fidelity Investments | FID Asset Manager 70% Fund | ** | 32,223 |

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Asset Manager 85% Fund | ** | $ 409,236 |
| * | Fidelity Investments | FID Balanced Fund K | ** | 3,480,310 |
| * | Fidelity Investments | FID Blue Chip Growth K6 | ** | 3,969,972 |
| * | Fidelity Investments | FID Blue Chip Value | ** | 532,340 |
| * | Fidelity Investments | FID Canada Fund | ** | 894,056 |
| * | Fidelity Investments | FID Cap Appreciation K | ** | 588,981 |
| * | Fidelity Investments | FID Capital and Income Fund | ** | 4,542,711 |
| * | Fidelity Investments | FID China Region Fund | ** | 1,061,471 |
| * | Fidelity Investments | FID Contrafund Fund K6 | ** | 8,513,073 |
| * | Fidelity Investments | FID Convertible Sec Fund | ** | 470,155 |
| * | Fidelity Investments | FID Disciplined Equity Fund K | ** | 15,976 |
| * | Fidelity Investments | FID Diversified Intl Fund K6 | ** | 9,859,987 |
| * | Fidelity Investments | FID Dividend Growth Fund K | ** | 1,079,957 |
| * | Fidelity Investments | FID EMEA | ** | 135,187 |
| * | Fidelity Investments | FID Emerging Asia | ** | 658,722 |
| * | Fidelity Investments | FID Emerging Mkts K | ** | 2,425,695 |
| * | Fidelity Investments | FID Equity Dividend Income K | ** | 91,027 |
| * | Fidelity Investments | FID Equity Income Fund K | ** | 186,997 |
| * | Fidelity Investments | FID Europe Fund | ** | 239,284 |
| * | Fidelity Investments | FID Export & Multi K | ** | 348,102 |
| * | Fidelity Investments | FID Ext Mkt IDX PR | ** | 15,742,630 |
| * | Fidelity Investments | FID Float Rt Hi Inc | ** | 1,627,146 |
| * | Fidelity Investments | FID Focused High Inc Fund | ** | 95,764 |
| * | Fidelity Investments | FID Focused Stock Fund | ** | 1,282,487 |
| * | Fidelity Investments | FID Four in One Idx | ** | 65,914 |
| * | Fidelity Investments | FID Freedom 2005 Fund | ** | 78,327 |
| * | Fidelity Investments | FID Freedom 2010 Fund | ** | 522,918 |
| * | Fidelity Investments | FID Freedom 2015 Fund | ** | 547,473 |
| * | Fidelity Investments | FID Freedom 2020 Fund | ** | 628,224 |
| * | Fidelity Investments | FID Freedom 2025 Fund | ** | 837,354 |
| * | Fidelity Investments | FID Freedom 2030 Fund | ** | 1,534,110 |
| * | Fidelity Investments | FID Freedom 2035 Fund | ** | 1,163,912 |
| * | Fidelity Investments | FID Freedom 2040 Fund | ** | 542,802 |
| * | Fidelity Investments | FID Freedom 2045 Fund | ** | 703,019 |
| * | Fidelity Investments | FID Freedom 2050 Fund | ** | 1,378,530 |
| * | Fidelity Investments | FID Freedom 2055 Fund | ** | 584,978 |
| * | Fidelity Investments | FID Freedom 2060 Fund | ** | 77,895 |
| * | Fidelity Investments | FID Freedom Income Fund | ** | 12,331 |
| * | Fidelity Investments | FID Fund K | ** | 742,454 |
| * | Fidelity Investments | FID GNMA | ** | 606,637 |
| * | Fidelity Investments | FID Govt MMKT | ** | 238,419 |
| * | Fidelity Investments | FID Growth and Income Fund | ** | 893,350 |
| * | Fidelity Investments | FID Growth COK Fund | ** | 5,650,365 |
| * | Fidelity Investments | FID Growth Discovery K Fund | ** | 206,971 |
| * | Fidelity Investments | FID Growth Strat K6 | ** | 7,007,958 |
| * | Fidelity Investments | FID High Income Fund | ** | 724,294 |

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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 |
|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Independence K Fund | ** | $ 317,916 |
| * | Fidelity Investments | FID Inflat Prot Bond Fund | ** | 5,915,186 |
| * | Fidelity Investments | FID Intermed Bond Fund | ** | 326,691 |
| * | Fidelity Investments | FID Intl Cap Appreciation Fund | ** | 508,265 |
| * | Fidelity Investments | FID Intl Discovery K Fund | ** | 570,015 |
| * | Fidelity Investments | FID Intl Enh Index | ** | 502,243 |
| * | Fidelity Investments | FID Intl Growth | ** | 677,210 |
| * | Fidelity Investments | FID Intl Index Ins | ** | 17,435,483 |
| * | Fidelity Investments | FID Intl Real Estate | ** | 281,595 |
| * | Fidelity Investments | FID Intl Sm Cap Opp | ** | 276,740 |
| * | Fidelity Investments | FID Intl Value | ** | 53,932 |
| * | Fidelity Investments | FID INTM Government Income Fund | ** | 456,670 |
| * | Fidelity Investments | FID Investment Growth Bond Fund | ** | 535,106 |
| * | Fidelity Investments | FID Japan Fund | ** | 115,221 |
| * | Fidelity Investments | FID Japan Smaller Co Fund | ** | 272,111 |
| * | Fidelity Investments | FID Large Cap Stock Fund | ** | 683,509 |
| * | Fidelity Investments | FID Latin America Fund | ** | 708,830 |
| * | Fidelity Investments | FID LC Core ENH Indx | ** | 85,619 |
| * | Fidelity Investments | FID LC Growth ENH Indx | ** | 83,306 |
| * | Fidelity Investments | FID LC Val ENH Indx | ** | 143,514 |
| * | Fidelity Investments | FID Leveraged Co. Stk Fund | ** | 2,790,674 |
| * | Fidelity Investments | FID Low Priced Stock K6 | ** | 2,296,442 |
| * | Fidelity Investments | FID Magellan K Fund | ** | 27,477,125 |
| * | Fidelity Investments | FID Mega Cap Stock Fund | ** | 76,621 |
| * | Fidelity Investments | FID Mid Cap ENH Indx | ** | 497,043 |
| * | Fidelity Investments | FID Mid Cap Stock K Fund | ** | 2,104,183 |
| * | Fidelity Investments | FID Mid Cap Value | ** | 288,375 |
| * | Fidelity Investments | FID Mortgage Sec | ** | 27,182 |
| * | Fidelity Investments | FID NASDAQ Comp Indx | ** | 1,410,830 |
| * | Fidelity Investments | FID New Markets Inc. Fund | ** | 1,916,409 |
| * | Fidelity Investments | FID New Millen | ** | 363,102 |
| * | Fidelity Investments | FID Nordic Fund | ** | 151,092 |
| * | Fidelity Investments | FID OTC K Fund | ** | 3,106,601 |
| * | Fidelity Investments | FID Overseas Fund | ** | 648,787 |
| * | Fidelity Investments | FID Pacific Basin Fund | ** | 385,436 |
| * | Fidelity Investments | FID Puritan Fund K | ** | 1,207,293 |
| * | Fidelity Investments | FID Real Estate Inc Fund | ** | 291,036 |
| * | Fidelity Investments | FID Real Estate Invs Fund | ** | 1,445,214 |
| * | Fidelity Investments | FID SEL Air Transprt Fund | ** | 443,675 |
| * | Fidelity Investments | FID SEL Automotive Fund | ** | 317,503 |
| * | Fidelity Investments | FID SEL Banking Fund | ** | 480,285 |
| * | Fidelity Investments | FID SEL Biotech Fund | ** | 4,579,203 |
| * | Fidelity Investments | FID SEL Brokerage Fund | ** | 187,254 |
| * | Fidelity Investments | FID SEL Chemical Fund | ** | 1,618,768 |
| * | Fidelity Investments | FID SEL Comm Equip Fund | ** | 59,401 |
| * | Fidelity Investments | FID SEL Comm Serv | ** | 294,116 |

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
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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 |
|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID SEL Computers Fund | ** | $ 414,278 |
| * | Fidelity Investments | FID SEL Cons Discr Fund | ** | 455,669 |
| * | Fidelity Investments | FID SEL Cons Staples Fund | ** | 711,108 |
| * | Fidelity Investments | FID SEL Constr/House Fund | ** | 93,272 |
| * | Fidelity Investments | FID SEL Consumer Fin | ** | 11,990 |
| * | Fidelity Investments | FID SEL Defense Fund | ** | 3,336,314 |
| * | Fidelity Investments | FID SEL Energy Fund | ** | 1,244,570 |
| * | Fidelity Investments | FID SEL Energy Svcs Fund | ** | 217,720 |
| * | Fidelity Investments | FID SEL ENV Alt Engy Fund | ** | 119,308 |
| * | Fidelity Investments | FID SEL Financial Fund | ** | 246,766 |
| * | Fidelity Investments | FID SEL Gold Fund | ** | 2,368,378 |
| * | Fidelity Investments | FID SEL Healthcare Fund | ** | 4,958,852 |
| * | Fidelity Investments | FID SEL Hth Care Svc | ** | 1,434,799 |
| * | Fidelity Investments | FID SEL Industrials | ** | 562,941 |
| * | Fidelity Investments | FID SEL Insurance Fund | ** | 157,686 |
| * | Fidelity Investments | FID SEL IT Services Fund | ** | 1,779,856 |
| * | Fidelity Investments | FID SEL Leisure Fund | ** | 583,904 |
| * | Fidelity Investments | FID SEL Materials | ** | 400,961 |
| * | Fidelity Investments | FID SEL Med Eq and Sys Fund | ** | 4,177,968 |
| * | Fidelity Investments | FID SEL Natural Gas Fund | ** | 284,330 |
| * | Fidelity Investments | FID SEL Natural Res Fund | ** | 405,741 |
| * | Fidelity Investments | FID SEL Pharmaceutical Fund | ** | 755,975 |
| * | Fidelity Investments | FID SEL Retailing Fund | ** | 2,478,377 |
| * | Fidelity Investments | FID SEL Semiconductor Fund | ** | 1,875,168 |
| * | Fidelity Investments | FID SEL Software Fund | ** | 3,119,219 |
| * | Fidelity Investments | FID SEL Technology Fund | ** | 2,836,849 |
| * | Fidelity Investments | FID SEL Telecomm Fund | ** | 67,743 |
| * | Fidelity Investments | FID SEL Transport Fund | ** | 615,485 |
| * | Fidelity Investments | FID SEL Utilities GR Fund | ** | 1,357,722 |
| * | Fidelity Investments | FID SEL Wireless Fund | ** | 208,242 |
| * | Fidelity Investments | FID Sm Cap Discovery | ** | 1,112,964 |
| * | Fidelity Investments | FID Sm Cap ENH Indx | ** | 186,757 |
| * | Fidelity Investments | FID Small Cap Growth | ** | 967,056 |
| * | Fidelity Investments | FID Small Cap Stock Fund K6 | ** | 901,532 |
| * | Fidelity Investments | FID Small Cap Value | ** | 581,805 |
| * | Fidelity Investments | FID STK SEL ALL Cap K | ** | 317,701 |
| * | Fidelity Investments | FID STK SEL SM Cap | ** | 137,467 |
| * | Fidelity Investments | FID STKSEL LG Cap Val | ** | 170,298 |
| * | Fidelity Investments | FID Strat Div & Inc | ** | 323,513 |
| * | Fidelity Investments | FID Telecom & Utilities Fund | ** | 438,283 |
| * | Fidelity Investments | FID Tot Mkt IDX PR | ** | 6,958,254 |
| * | Fidelity Investments | FID Total Bond K6 | ** | 1,178,123 |
| * | Fidelity Investments | FID Total Intl Eq | ** | 6,264 |
| * | Fidelity Investments | FID Trend Fund | ** | 323,160 |
| * | Fidelity Investments | FID US Bond Idx IS | ** | 13,249,787 |
| * | Fidelity Investments | FID Value Discov K6 | ** | 235,347 |

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Value K Fund | ** | $ 1,180,096 |
| * | Fidelity Investments | FID Value Strategy K Fund | ** | 134,903 |
| * | Fidelity Investments | FID Worldwide Fund | ** | 472,762 |
| * | Fidelity Investments | FID Govt Income | ** | 967,291 |
| | Fklin Templeton Investments | Fklin Mtl Glb Disc R6 | ** | 589,891 |
| | Fklin Templeton Investments | Fklin Mtl Shares R6 | ** | 99,922 |
| | Fklin Templeton Investments | Fklin Sm Mid Cap Gth R6 | ** | 43,091 |
| | First Pacific Advisors | FPA Crescent Fund | ** | 957,662 |
| | Harding Loevner | Hrdg Lvnr Intl Eq IS | ** | 1,866,096 |
| | Invesco | Invs Charter R6 | ** | 17,090 |
| | Invesco | Invs Divrs Divd R6 | ** | 1,057,543 |
| | Invesco | Invs Glb SMMDCPGR RS | ** | 179,390 |
| | Invesco | Invs Grth & Inc R6 | ** | 594,072 |
| | Invesco | Invs MDCP Core EQ R6 | ** | 200,226 |
| | Invesco | Invs SMCP Grth R6 | ** | 237,712 |
| | Janus Funds | Janus Balanced N Fund | ** | 808,575 |
| | Janus Funds | Janus Enterprise N Fund | ** | 1,740,813 |
| | Janus Funds | Janus Mid Cap Val N Fund | ** | 985,398 |
| | Janus Funds | Janus Forty N | ** | 868,758 |
| | Janus Funds | Janus Global Research I | ** | 381,970 |
| | Janus Funds | Janus Flexible Bond N Fund | ** | 626,791 |
| | Janus Funds | Janus Overseas N Fund | ** | 405,658 |
| | Janus Funds | Janus Research N Fund | ** | 549,586 |
| | Janus Funds | Janus Small Cap Val N | ** | 2,893,393 |
| | Lord Abbett | LD Abt Mid Cap Stk R6 | ** | 282,692 |
| | Loomis Sayles Funds | LOOMIS Sm Cap Value N Fund | ** | 269,076 |
| | Morgan Stanley Investment Mgmt | MSIF Active Intl I Fund | ** | 27,614 |
| | Morgan Stanley Investment Mgmt | MSIF CP FX Inc I Fund | ** | 252,079 |
| | Morgan Stanley Investment Mgmt | MSIF Emerging Mkts IS Fund | ** | 178,470 |
| | Morgan Stanley Investment Mgmt | MSIF Global Strat IS | ** | 144,931 |
| | Morgan Stanley Investment Mgmt | MSIF Growth Inst | ** | 2,326,193 |
| | Morgan Stanley Investment Mgmt | MSIF Intl Equity IS Fund | ** | 65,450 |
| | Morgan Stanley Investment Mgmt | MSIF Midcap Growth IS Fund | ** | 1,599,144 |
| | Morgan Stanley Investment Mgmt | MSIF Sm Co Growth IS Fund | ** | 100,717 |
| | Neuberger Berman | NB Core Bond Inst | ** | 50,724 |
| | Neuberger Berman | NB Focus Inst Fund | ** | 57,597 |
| | Neuberger Berman | NB Genesis R6 | ** | 1,316,226 |
| | Neuberger Berman | NB Guardian Inst | ** | 6 |
| | Neuberger Berman | NB Lg Cap Val Inst | ** | 499,295 |
| | Neuberger Berman | NB MDCP Grth R6 | ** | 124,322 |
| | Neuberger Berman | NB Sustain EQ R6 | ** | 19,137 |
| | Oakmark Funds | Oakmark Eq & Inc IS | ** | 1,464,120 |
| | Oakmark Funds | Oakmark Inst | ** | 1,159,916 |
| | Oakmark Funds | Oakmark Select Inv | ** | 402,754 |
| | PIMCO Global Advisors | PIM Glob BD Unhg I | ** | 953,113 |

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| | PIMCO Global Advisors | PIM High Yield Inst | ** | $ 1,072,968 |
| | PIMCO Global Advisors | PIM Lt U.S. Govt Inst | ** | 2,187,903 |
| | PIMCO Global Advisors | PIM Tot Return Inst Fund | ** | 12,943,339 |
| | Primecap | PRMCP Odyssey Stock | ** | 4,825,509 |
| | Rice Hall James | RHJ Micro Cap Fund | ** | 64,578 |
| | Royce Funds | Royce Low Pr Stk IS | ** | 226,184 |
| | Touchstone | TCHSTN Focused I | ** | 686,286 |
| | Touchstone | TCHSTN Intl Sm Cap I | ** | 48,357 |
| | TCW Funds | TCW Select Equity I | ** | 450,917 |
| | Templeton | Templeton Foreign R6 | ** | 127,384 |
| | Templeton | Templeton Growth R6 | ** | 257,872 |
| | Templeton | Templeton Dev Mkts R6 | ** | 269,175 |
| | Templeton | Templeton Global Bond R6 | ** | 1,814,656 |
| | Templeton | Templeton World R6 | ** | 179,157 |
| | T. Rowe Price | TRP Growth Stock Fund I | ** | 2,636,307 |
| | USAA Investments | USAA Cornerstone Mod Aggr Fund | ** | 5,823 |
| | USAA Investments | USAA Emerging Mkts Inst Fund | ** | 49,960 |
| | USAA Investments | USAA GOVT SEC Inst | ** | 379,607 |
| | USAA Investments | USAA Growth Inst Fund | ** | 57,855 |
| | USAA Investments | USAA Income Inst Fund | ** | 380,378 |
| | USAA Investments | USAA Income Stock Fund | ** | 36,642 |
| | USAA Investments | USAA International Inst Fund | ** | 87,106 |
| | The Vanguard Group | Vanguard Explorer Adm Fund | ** | 2,134,689 |
| | The Vanguard Group | Vanguard Infl Prot Adm Fund | ** | 1,421,872 |
| | The Vanguard Group | Vanguard Inst Index | ** | 84,499,129 |
| | The Vanguard Group | Vanguard LS Conservative Growth Fund | ** | 335,711 |
| | The Vanguard Group | Vanguard LS Growth | ** | 632,744 |
| | The Vanguard Group | Vanguard LS Income | ** | 250,396 |
| | The Vanguard Group | Vanguard LS Moderate Growth Fund | ** | 285,543 |
| | The Vanguard Group | Vanguard Total Bond Market Inst | ** | 34,395,379 |
| | The Vanguard Group | Vanguard Total Intl Stock IS | ** | 21,983,746 |
| | The Vanguard Group | Vanguard Total Stock Market IS | ** | 28,026,332 |
| | Victory | VRS Small Cap Grth Y | ** | 491,614 |
| | Western Asset | WA Core Bond I | ** | 165,910 |
| | Wells Fargo Advantage Funds | WF Common Stock R6 | ** | 139,329 |
| | Wells Fargo Advantage Funds | WF Discovery R6 | ** | 90,631 |
| | Wells Fargo Advantage Funds | WF Govt Security IS | ** | 313,255 |
| | Wells Fargo Advantage Funds | WF Growth R6 | ** | 1,713,810 |
| | Wells Fargo Advantage Funds | WF Lg Cap Growth R6 | ** | 52,319 |
| | Wells Fargo Advantage Funds | WF Opportunity IS | ** | 153,457 |
| | Wells Fargo Advantage Funds | WF Small Cap Val R6 | ** | 806,394 |
| | Total Mutual Funds | | | 488,170,045 |

SARGENT & LUNDY, L.L.C. SAVINGS INVESTMENT PLAN
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2018

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Collective Trusts** | | |
| | The Vanguard Group | Vanguard Target 2015 | ** | $ 9,908,456 |
| | The Vanguard Group | Vanguard Target 2020 | ** | 18,968,073 |
| | The Vanguard Group | Vanguard Target 2025 | ** | 14,076,894 |
| | The Vanguard Group | Vanguard Target 2030 | ** | 11,378,191 |
| | The Vanguard Group | Vanguard Target 2035 | ** | 10,890,303 |
| | The Vanguard Group | Vanguard Target 2040 | ** | 14,279,908 |
| | The Vanguard Group | Vanguard Target 2045 | ** | 21,534,262 |
| | The Vanguard Group | Vanguard Target 2050 | ** | 30,948,238 |
| | The Vanguard Group | Vanguard Target 2055 | ** | 10,408,612 |
| | The Vanguard Group | Vanguard Target 2060 | ** | 3,931,125 |
| | The Vanguard Group | Vanguard Target 2065 | ** | 47,945 |
| | The Vanguard Group | Vanguard Target Inc | ** | 5,155,987 |
| | Total Collective Trusts | | | 151,527,994 |
| | | **Brokerage Account** | | |
| * | Fidelity Mgmt. Trust Co. | Brokerage Account | ** | 37,088,403 |
| | | **Stable Value Fund** | | |
| | **Collective Trust** | | | |
| * | Fidelity Mgmt. Trust Co. | Fidelity Intermediate Duration Pool | ** | 145,662,888 |
| | **Interest-Bearing Cash** | | | |
| * | Fidelity Mgmt. Trust Co. | Short Term Investment Fund | | 3,326,791 |
| | | | | 148,989,679 |
| | | **Participant Loans** | | |
| * | Participant Loans | Interest rates ranging from 3.25% to 6.25% with maturity dates through January 2029 | ** | 7,240,974 |
| | | | | $ 833,017,095 |

* Denotes party-in-interest.
** Cost information is not required for participant-directed investments and, therefore, is not included.

See Independent Auditor's Report.

# SARGENT & LUNDY, L.L.C.
# SAVINGS INVESTMENT PLAN

Chicago, Illinois

## FINANCIAL STATEMENTS

December 31, 2018 and 2017

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
Chicago, Illinois

FINANCIAL STATEMENTS
December 31, 2018 and 2017

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Crowe LLP
Independent Member Crowe Global

# INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Sargent & Lundy, L.L.C.
Savings Investment Plan
Chicago, Illinois

## Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Sargent & Lundy, L.L.C. Savings Investment Plan, 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 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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such 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 certification from the trustee as of December 31, 2018 and 2017 and for the year ended December 31, 2018 that the information provided to the plan administrator by the trustee is complete and accurate.

(Continued)

***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 H, Line 4i - Schedule of Assets (Held at Year End) 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 and is presented for purposes 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.

***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.



Crowe LLP

Oak Brook, Illinois
September 26, 2019

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2018 and 2017

| | 2018 | 2017 |
|---|---|---|
| **ASSETS** | | |
| Investments, at fair value | $ 680,113,233 | $ 742,151,142 |
| Investments, at contract value | 145,662,888 | 147,520,738 |
| Total investments | 825,776,121 | 889,671,880 |
| Receivables | | |
| Notes receivable from participants | 7,240,974 | 7,333,432 |
| Total assets | 833,017,095 | 897,005,312 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 833,017,095 | $ 897,005,312 |

See accompanying notes to financial statements.

SARGENT & LUNDY, L.L.C.
SAVINGS INVESTMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2018

| | |
|---|---|
| **Additions to net assets attributed to:** | |
| Interest and dividend income | $ 29,535,432 |
| Contributions | |
| Employer | 11,473,960 |
| Employee | 26,382,278 |
| Rollovers | 4,456,700 |
| Total contributions | 42,312,938 |
| Total additions | 71,848,370 |
| **Deductions from net assets attributed to:** | |
| Net depreciation in fair value of investments | 68,759,171 |
| Benefits paid to participants | 66,599,646 |
| Administrative expenses | 477,770 |
| Total deductions | 135,836,587 |
| **Net decrease in net assets available for benefits** | (63,988,217) |
| **Net assets available for benefits** | |
| Beginning of year | 897,005,312 |
| End of year | $ 833,017,095 |

See accompanying notes to financial statements.

**NOTE 1 - PLAN DESCRIPTION**

The Sargent & Lundy, L.L.C. Savings Investment Plan ("the Plan") is a defined contribution plan covering all eligible employees, as defined, of Sargent & Lundy, L.L.C.; S&L Engineers, Ltd.; Sargent & Lundy Illinois, Incorporated (dissolved as of December 31, 2016); Sargent & Lundy Enterprises, L.L.C. (dissolved as of December 31, 2016) ; Sargent & Lundy Texas, L.L.C. (dissolved as of December 31, 2016); Sargent & Lundy International, Incorporated (collectively, "the Company"). The Plan is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. A further description of the Plan can be obtained from the plan document.

Contributions: Participants may make pretax and after-tax contributions subject to a combined maximum of the limits as defined in the plan document. Contributions are subject to the contribution limitations of the Internal Revenue Code ("IRC"). Absent an election in the first 60 days of employment, newly hired full-time employees will be automatically enrolled in the Plan at a pretax contribution rate of 6% of eligible compensation. The Plan has also adopted a contribution escalation clause which provides that, unless declined, each impacted participant who is contributing less than 10% of compensation to the Plan shall be deemed to have elected to increase his or her contribution percentage by 1% on each April 1, until the rate reaches 10% of compensation.

The Company contributes 50% of the first 6% of base compensation that an eligible participant contributes to the Plan. Additionally, the Company may make a discretionary contribution (non-matching contributions) to active eligible employees participating in the Plan. During 2018, the Company made a discretionary contribution of 3% of base compensation.

Participant Accounts: Each participant's account is credited with the participant's contribution and allocation of the Company's contribution (if eligible), investment earnings, and charged with his or her withdrawals and any applicable transaction fees. The benefit to which a participant is entitled is the participant's vested account balances.

Notes Receivable from Participants: Participants may obtain loans from plan assets based on individual account balances not to exceed the lesser of $50,000 or one half of their vested balance. Interest is charged at the U.S. prime rate, as quoted by the *Reuters News Service* as of the first day of the month in which the note is requested, plus 1 percentage point. The rate is fixed for the term of the note. Principal and interest payments over a period from 12 to 60 months are due semi-monthly for active full-time employees and monthly for terminated and temporary employees.

Vesting: Participants are immediately fully vested in participant contributions and fully vested in all employer contributions after one year of service.

Forfeited Accounts: The non-vested portion of terminated participant accounts are forfeited and may be used to reduce future company contributions, reduce plan expenses, or pay for new services.

Investment Options: Employees can choose any investment fund option offered or individual security investments (through a brokerage account option) to allocate their account balances. The Stable Value Fund, arranged through Fidelity Management Trust Company ("Fidelity") specifically for the Company, is composed of fixed income-type investments, such as individual and commingled guaranteed investment contracts, which are structured to yield a stable positive rate of return. The contributions made by each participant, as well as Company contributions, are allocated to investments based on elections made by the participant or to a default fund if no election is made.

(Continued)

**NOTE 1 - PLAN DESCRIPTION** (Continued)

Payment of Benefits: On termination of service, a participant may elect to remain in the Plan or choose from a number of distribution or loan options (some restrictions may apply). These options also apply to the beneficiary of a deceased participant.

Administration of the Plan and Trust: The Plan is administered by the Sargent & Lundy, L.L.C. Savings Investment Plan Committee. The trust created by the Plan is administered by the trustee, Fidelity. Trustee fees, legal expenses, and various other costs incurred in connection with the administration of the Plan may be paid by the Company or from the trust fund.

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

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

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 and disclosures, and actual results could differ from those estimates.

Investment Valuation and Income Recognition: The Plan's investments, other than fully benefit-responsive investment contracts, are stated at fair value. Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Contract value is the relevant measure for the Plan's fully benefit-responsive investment contracts, because contract value is the amount plan participants generally receive when executing transactions under the terms of the contract and plan provisions. 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.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

Payment of Benefits: Benefits are recorded when paid. A participant who has attained the age of 59-1/2 and is fully vested in all of his account balances may irrevocably elect to withdraw in a lump sum all or any portion of the net credit balances in his accounts.

Risks and Uncertainties: The Plan provides for various investments that, in general, are exposed to various risks, such as interest rate, credit, liquidity and overall market volatility risks. Due to the level of risk and uncertainty associated with certain investments and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits and the participants' individual account balances.

(Continued)

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES** (Continued)

Income Taxes: Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. A tax position is recognized as a benefit only if it is "more likely than not" that the tax position would be sustained in a tax examination, with a tax examination presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized upon examination. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded.

The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by the Internal Revenue Service; 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 3 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS**

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income (loss) and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company, the trustee of the Plan. This information has not been audited by independent accountants.

**NOTE 4 - FAIR VALUE MEASUREMENTS**

Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs when measuring fair value. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurements) and gives the lowest priority to unobservable inputs (Level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

(Continued)

**NOTE 4 - FAIR VALUE MEASUREMENTS** (Continued)

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

*Mutual funds*: The fair values of mutual fund investments are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

*Common stocks*: The fair values of common stocks are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

*Collective trusts***:** The fair values of participation units held in collective trusts are based on the net asset values reported by the fund managers as of the financial statement dates and recent transaction prices. Each collective trust provides for daily redemptions by the Plan at reported net asset values per share with no advance notice requirements.

*Self-directed brokerage accounts***:** These primarily consist of mutual funds, common stocks, and interest-bearing cash, measured at fair value as described for these general investment types within this note.

*Interest-bearing cash:* Fair values of money market accounts and savings deposit accounts are estimated to approximate deposit account balances, payable on demand, as no discounts for credit quality or liquidity were determined to be applicable (Level 2 inputs).

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

Investments measured at fair value on a recurring basis are summarized below:

| | Fair Value Measurements at December 31, 2018, Using | | |
|---|---|---|---|
| | Total | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| Mutual funds | $ 488,170,045 | $ 488,170,045 | $ - |
| Brokerage account | 37,088,403 | 27,276,798 | 9,811,605 |
| Interest bearing cash | 3,326,791 | - | 3,326,791 |
| Collective Trusts* | 151,527,994 | - | - |
| Total | $ 680,113,233 | $ 515,446,843 | $ 13,138,396 |

(Continued)

**NOTE 4 - FAIR VALUE MEASUREMENTS** (Continued)

| | Fair Value Measurements at December 31, 2017, Using | | |
|---|---|---|---|
| | Total | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| Mutual funds | $ 543,352,209 | $ 543,352,209 | $ - |
| Brokerage account | 38,062,193 | 28,941,983 | 9,120,210 |
| Interest bearing cash | 984,970 | - | 984,970 |
| Collective Trusts* | 159,751,770 | - | - |
| Total | $ 742,151,142 | $ 572,294,192 | $ 10,105,180 |

* Investments measured at fair value using net asset value per share (or its equivalent) as a practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in the hierarchy tables for such investments are intended to permit reconciliation of the fair value hierarchy to the investments at fair value line item presented in the statement of net assets available for benefits.

**NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS**

The Plan holds fully benefit-responsive investment contracts that are reported at contract value, which is generally the amount a participant would receive if he or she would initiate a withdrawal or transfer from the contract under the provisions of the Plan. Contract value represents contributions made to the contract, plus earnings, less participant withdrawals and administrative expenses. The contract value of the Plan's fully benefit-responsive investment contracts, by general type, are presented below:

| | 2018 | 2017 |
|---|---|---|
| Synthetic investment contracts | $ 145,662,882 | $ 147,520,738 |
| Total investments at contract value | $ 145,662,882 | $ 147,520,738 |

The synthetic investment contracts held by the Plan include wrap contracts that provide a guarantee that the credit rate will not fall below 0%. Cash flow volatility (for example, timing of benefit payments) as well as asset underperformance can be passed through to the Plan through adjustments to future crediting rates. Formulas are provided in each contract that adjusts renewal crediting rates to recognize the difference between the fair value and the book value of the underlying assets.

The contracts specify certain conditions under which distributions from the contracts would be payable at amounts below contract value. Such circumstances include, but are not limited to, plan termination, plan merger, premature contract termination initiated by the employer, and certain other employer-initiated events, such as a sale of a division, office closure, or layoff that results in distributions exceeding a set amount. The contracts limit the circumstances under which the Issuers may terminate the contracts.

(Continued)

**NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS** (Continued)

Examples of circumstances which would allow the Issuer to terminate the contracts include: the Plan's loss of its qualified status, uncured material breaches of responsibilities or material and adverse changes to the provisions of the Plan. If one of these events were to occur, the Issuers could terminate the contracts at amounts less than contract value. Currently, management believes that the occurrence of an event that would cause the Plan to transact contract distributions at less than contract value is not probable.

**NOTE 6 - TAX STATUS**

The Internal Revenue Service has determined and informed the Company by a letter dated October 7, 2015, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the plan administrator believes that the Plan is designed and currently being operated in compliance with requirement of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) 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 7 - PARTY-IN-INTEREST TRANSACTIONS**

Parties-in-interest are defined under the Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer and certain others.

Certain plan investments are managed by Fidelity Management Trust Company, the Plan's trustee, or are shares of mutual funds offered by Fidelity Investments, an affiliate of the Plan's trustee. Accordingly, these investments qualify as party-in-interest investments. Investment management and trustee fees are paid by the Plan and these expenses are reflected in the financial statements as a reduction of the return on the Plan's investments.

Participants in the Plan are permitted to borrow funds from their vested balance as described in Note 1. These assets qualify as party-in-interest transactions. Notes receivable from participants were $7,240,974 and $7,333,432 at December 31, 2018 and 2017, respectively.

**NOTE 8 - 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 continue to be 100% vested in their accounts.

(Continued)

## NOTE 9 - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through September 26, 2019, which is the date the financial statements were available to be issued.

## NOTE 10 - 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, 2018 and 2017, to the Form 5500:

| | 2018 | 2017 |
|---|---|---|
| Net assets available for benefits per the financial statements | $ 833,017,095 | $ 897,005,312 |
| Miscellaneous reconciling items | - | (330,668) |
| Net assets per the Form 5500 | $ 833,017,095 | $ 896,674,644 |

The following is a reconciliation of the change in net assets available for benefits for the year ended December 31, 2018, per the financial statements to the net income reported in the 2018 Form 5500:

| | |
|---|---|
| Decrease in net assets available for benefits per the financial statements | $ (63,988,217) |
| 2017 miscellaneous reconciling items | 330,668 |
| Net loss per the Form 5500 | $ (63,657,549) |

**SUPPLEMENTAL SCHEDULE**

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Mutual Funds** | | |
| | Aberdeen Asset Management | ABDN Global Linc FI Inst | ** | $ 22,764 |
| | Aberdeen Asset Management | ABDN Global Eq Inst | ** | 259,860 |
| | Archer Funds | ABF Balanced Inst | ** | 656,306 |
| | Archer Funds | ABF Intl Equity Inst | ** | 100,096 |
| | Archer Funds | ABF Large Cap Value Inst | ** | 718,673 |
| | Archer Funds | ABF Small Cap Value Inst | ** | 697,708 |
| | American Funds | AF Wash Mutl Inv R6 | ** | 4,325,098 |
| | Alger | Alger Cap Apprec I Fund | ** | 1,370,308 |
| | Alger | Alger Midcap Growth I Fund | ** | 341,062 |
| | Alger | Alger Small Cap Growth I Fund | ** | 407,281 |
| | Allianz Global Investors | Alzgi Nfj Sm Cap Value R6 | ** | 924,153 |
| | American Century Investments | Am Cent Lg Co Val R6 | ** | 187,543 |
| | American Century Investments | Am Cent Sm Comp Inst | ** | 92,063 |
| | American Century Investments | Am Cent Ultra R6 | ** | 217,567 |
| | AMG Funds | AMG M LS Bond I | ** | 241,316 |
| | AMG Funds | Amg M Special Eq | ** | 104,097 |
| | AMG Funds | Amg Ren LG CP GR Z | ** | 191,616 |
| | AMG Funds | Amg MC Mid Cap Inst | ** | 155,534 |
| | Ariel Mutual Funds | Ariel Appreciation Inst | ** | 209,322 |
| | Ariel Mutual Funds | Ariel Fund Inst | ** | 894,735 |
| | Artisan Funds | Artisan Intl Inst | ** | 734,544 |
| | Artisan Funds | Artisan Mid Cap Inst | ** | 642,269 |
| | Baron Funds | Baron Asset Inst | ** | 290,667 |
| | Baron Funds | Baron Growth Inst | ** | 3,029,124 |
| | Cohen & Steers Capital Mgmt | C&S Rlty Fund Shs | ** | 2,187,189 |
| | Calvert | Calvert Balanced I | ** | 845 |
| | Calvert | Calvert Equity I | ** | 71,257 |
| | Calvert | Calvert Mid-Cap I | ** | 2,086 |
| | Legg Mason | CB Value Tr Fi | ** | 354,646 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Core Equity R6 | ** | 222,723 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Croci Eq Div IS | ** | 13,343 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Croci Intl R6 | ** | 31,103 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Glb Sm Cap R6 | ** | 103,234 |
| | Deutsche Asset & Wealth Management U.S. Funds | Deut Sm Cap Growth R6 | ** | 51,505 |
| | Domini Social Investors | Domini Impact Eq IS | ** | 64,763 |
| * | Fidelity Investments | FID Asset Manager 20% Fund | ** | 190,462 |
| * | Fidelity Investments | FID Asset Manager 30% Fund | ** | 65,276 |
| * | Fidelity Investments | FID Asset Manager 40% Fund | ** | 42,188 |
| * | Fidelity Investments | FID Asset Manager 50% Fund | ** | 92,214 |
| * | Fidelity Investments | FID Asset Manager 60% Fund | ** | 216,979 |
| * | Fidelity Investments | FID Asset Manager 70% Fund | ** | 32,223 |

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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Asset Manager 85% Fund | ** | $ 409,236 |
| * | Fidelity Investments | FID Balanced Fund K | ** | 3,480,310 |
| * | Fidelity Investments | FID Blue Chip Growth K6 | ** | 3,969,972 |
| * | Fidelity Investments | FID Blue Chip Value | ** | 532,340 |
| * | Fidelity Investments | FID Canada Fund | ** | 894,056 |
| * | Fidelity Investments | FID Cap Appreciation K | ** | 588,981 |
| * | Fidelity Investments | FID Capital and Income Fund | ** | 4,542,711 |
| * | Fidelity Investments | FID China Region Fund | ** | 1,061,471 |
| * | Fidelity Investments | FID Contrafund Fund K6 | ** | 8,513,073 |
| * | Fidelity Investments | FID Convertible Sec Fund | ** | 470,155 |
| * | Fidelity Investments | FID Disciplined Equity Fund K | ** | 15,976 |
| * | Fidelity Investments | FID Diversified Intl Fund K6 | ** | 9,859,987 |
| * | Fidelity Investments | FID Dividend Growth Fund K | ** | 1,079,957 |
| * | Fidelity Investments | FID EMEA | ** | 135,187 |
| * | Fidelity Investments | FID Emerging Asia | ** | 658,722 |
| * | Fidelity Investments | FID Emerging Mkts K | ** | 2,425,695 |
| * | Fidelity Investments | FID Equity Dividend Income K | ** | 91,027 |
| * | Fidelity Investments | FID Equity Income Fund K | ** | 186,997 |
| * | Fidelity Investments | FID Europe Fund | ** | 239,284 |
| * | Fidelity Investments | FID Export & Multi K | ** | 348,102 |
| * | Fidelity Investments | FID Ext Mkt IDX PR | ** | 15,742,630 |
| * | Fidelity Investments | FID Float Rt Hi Inc | ** | 1,627,146 |
| * | Fidelity Investments | FID Focused High Inc Fund | ** | 95,764 |
| * | Fidelity Investments | FID Focused Stock Fund | ** | 1,282,487 |
| * | Fidelity Investments | FID Four in One Idx | ** | 65,914 |
| * | Fidelity Investments | FID Freedom 2005 Fund | ** | 78,327 |
| * | Fidelity Investments | FID Freedom 2010 Fund | ** | 522,918 |
| * | Fidelity Investments | FID Freedom 2015 Fund | ** | 547,473 |
| * | Fidelity Investments | FID Freedom 2020 Fund | ** | 628,224 |
| * | Fidelity Investments | FID Freedom 2025 Fund | ** | 837,354 |
| * | Fidelity Investments | FID Freedom 2030 Fund | ** | 1,534,110 |
| * | Fidelity Investments | FID Freedom 2035 Fund | ** | 1,163,912 |
| * | Fidelity Investments | FID Freedom 2040 Fund | ** | 542,802 |
| * | Fidelity Investments | FID Freedom 2045 Fund | ** | 703,019 |
| * | Fidelity Investments | FID Freedom 2050 Fund | ** | 1,378,530 |
| * | Fidelity Investments | FID Freedom 2055 Fund | ** | 584,978 |
| * | Fidelity Investments | FID Freedom 2060 Fund | ** | 77,895 |
| * | Fidelity Investments | FID Freedom Income Fund | ** | 12,331 |
| * | Fidelity Investments | FID Fund K | ** | 742,454 |
| * | Fidelity Investments | FID GNMA | ** | 606,637 |
| * | Fidelity Investments | FID Govt MMKT | ** | 238,419 |
| * | Fidelity Investments | FID Growth and Income Fund | ** | 893,350 |
| * | Fidelity Investments | FID Growth COK Fund | ** | 5,650,365 |
| * | Fidelity Investments | FID Growth Discovery K Fund | ** | 206,971 |
| * | Fidelity Investments | FID Growth Strat K6 | ** | 7,007,958 |
| * | Fidelity Investments | FID High Income Fund | ** | 724,294 |

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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Independence K Fund | ** | $ 317,916 |
| * | Fidelity Investments | FID Inflat Prot Bond Fund | ** | 5,915,186 |
| * | Fidelity Investments | FID Intermed Bond Fund | ** | 326,691 |
| * | Fidelity Investments | FID Intl Cap Appreciation Fund | ** | 508,265 |
| * | Fidelity Investments | FID Intl Discovery K Fund | ** | 570,015 |
| * | Fidelity Investments | FID Intl Enh Index | ** | 502,243 |
| * | Fidelity Investments | FID Intl Growth | ** | 677,210 |
| * | Fidelity Investments | FID Intl Index Ins | ** | 17,435,483 |
| * | Fidelity Investments | FID Intl Real Estate | ** | 281,595 |
| * | Fidelity Investments | FID Intl Sm Cap Opp | ** | 276,740 |
| * | Fidelity Investments | FID Intl Value | ** | 53,932 |
| * | Fidelity Investments | FID INTM Government Income Fund | ** | 456,670 |
| * | Fidelity Investments | FID Investment Growth Bond Fund | ** | 535,106 |
| * | Fidelity Investments | FID Japan Fund | ** | 115,221 |
| * | Fidelity Investments | FID Japan Smaller Co Fund | ** | 272,111 |
| * | Fidelity Investments | FID Large Cap Stock Fund | ** | 683,509 |
| * | Fidelity Investments | FID Latin America Fund | ** | 708,830 |
| * | Fidelity Investments | FID LC Core ENH Indx | ** | 85,619 |
| * | Fidelity Investments | FID LC Growth ENH Indx | ** | 83,306 |
| * | Fidelity Investments | FID LC Val ENH Indx | ** | 143,514 |
| * | Fidelity Investments | FID Leveraged Co. Stk Fund | ** | 2,790,674 |
| * | Fidelity Investments | FID Low Priced Stock K6 | ** | 2,296,442 |
| * | Fidelity Investments | FID Magellan K Fund | ** | 27,477,125 |
| * | Fidelity Investments | FID Mega Cap Stock Fund | ** | 76,621 |
| * | Fidelity Investments | FID Mid Cap ENH Indx | ** | 497,043 |
| * | Fidelity Investments | FID Mid Cap Stock K Fund | ** | 2,104,183 |
| * | Fidelity Investments | FID Mid Cap Value | ** | 288,375 |
| * | Fidelity Investments | FID Mortgage Sec | ** | 27,182 |
| * | Fidelity Investments | FID NASDAQ Comp Indx | ** | 1,410,830 |
| * | Fidelity Investments | FID New Markets Inc. Fund | ** | 1,916,409 |
| * | Fidelity Investments | FID New Millen | ** | 363,102 |
| * | Fidelity Investments | FID Nordic Fund | ** | 151,092 |
| * | Fidelity Investments | FID OTC K Fund | ** | 3,106,601 |
| * | Fidelity Investments | FID Overseas Fund | ** | 648,787 |
| * | Fidelity Investments | FID Pacific Basin Fund | ** | 385,436 |
| * | Fidelity Investments | FID Puritan Fund K | ** | 1,207,293 |
| * | Fidelity Investments | FID Real Estate Inc Fund | ** | 291,036 |
| * | Fidelity Investments | FID Real Estate Invs Fund | ** | 1,445,214 |
| * | Fidelity Investments | FID SEL Air Transprt Fund | ** | 443,675 |
| * | Fidelity Investments | FID SEL Automotive Fund | ** | 317,503 |
| * | Fidelity Investments | FID SEL Banking Fund | ** | 480,285 |
| * | Fidelity Investments | FID SEL Biotech Fund | ** | 4,579,203 |
| * | Fidelity Investments | FID SEL Brokerage Fund | ** | 187,254 |
| * | Fidelity Investments | FID SEL Chemical Fund | ** | 1,618,768 |
| * | Fidelity Investments | FID SEL Comm Equip Fund | ** | 59,401 |
| * | Fidelity Investments | FID SEL Comm Serv | ** | 294,116 |

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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID SEL Computers Fund | ** | $ 414,278 |
| * | Fidelity Investments | FID SEL Cons Discr Fund | ** | 455,669 |
| * | Fidelity Investments | FID SEL Cons Staples Fund | ** | 711,108 |
| * | Fidelity Investments | FID SEL Constr/House Fund | ** | 93,272 |
| * | Fidelity Investments | FID SEL Consumer Fin | ** | 11,990 |
| * | Fidelity Investments | FID SEL Defense Fund | ** | 3,336,314 |
| * | Fidelity Investments | FID SEL Energy Fund | ** | 1,244,570 |
| * | Fidelity Investments | FID SEL Energy Svcs Fund | ** | 217,720 |
| * | Fidelity Investments | FID SEL ENV Alt Engy Fund | ** | 119,308 |
| * | Fidelity Investments | FID SEL Financial Fund | ** | 246,766 |
| * | Fidelity Investments | FID SEL Gold Fund | ** | 2,368,378 |
| * | Fidelity Investments | FID SEL Healthcare Fund | ** | 4,958,852 |
| * | Fidelity Investments | FID SEL Hth Care Svc | ** | 1,434,799 |
| * | Fidelity Investments | FID SEL Industrials | ** | 562,941 |
| * | Fidelity Investments | FID SEL Insurance Fund | ** | 157,686 |
| * | Fidelity Investments | FID SEL IT Services Fund | ** | 1,779,856 |
| * | Fidelity Investments | FID SEL Leisure Fund | ** | 583,904 |
| * | Fidelity Investments | FID SEL Materials | ** | 400,961 |
| * | Fidelity Investments | FID SEL Med Eq and Sys Fund | ** | 4,177,968 |
| * | Fidelity Investments | FID SEL Natural Gas Fund | ** | 284,330 |
| * | Fidelity Investments | FID SEL Natural Res Fund | ** | 405,741 |
| * | Fidelity Investments | FID SEL Pharmaceutical Fund | ** | 755,975 |
| * | Fidelity Investments | FID SEL Retailing Fund | ** | 2,478,377 |
| * | Fidelity Investments | FID SEL Semiconductor Fund | ** | 1,875,168 |
| * | Fidelity Investments | FID SEL Software Fund | ** | 3,119,219 |
| * | Fidelity Investments | FID SEL Technology Fund | ** | 2,836,849 |
| * | Fidelity Investments | FID SEL Telecomm Fund | ** | 67,743 |
| * | Fidelity Investments | FID SEL Transport Fund | ** | 615,485 |
| * | Fidelity Investments | FID SEL Utilities GR Fund | ** | 1,357,722 |
| * | Fidelity Investments | FID SEL Wireless Fund | ** | 208,242 |
| * | Fidelity Investments | FID Sm Cap Discovery | ** | 1,112,964 |
| * | Fidelity Investments | FID Sm Cap ENH Indx | ** | 186,757 |
| * | Fidelity Investments | FID Small Cap Growth | ** | 967,056 |
| * | Fidelity Investments | FID Small Cap Stock Fund K6 | ** | 901,532 |
| * | Fidelity Investments | FID Small Cap Value | ** | 581,805 |
| * | Fidelity Investments | FID STK SEL ALL Cap K | ** | 317,701 |
| * | Fidelity Investments | FID STK SEL SM Cap | ** | 137,467 |
| * | Fidelity Investments | FID STKSEL LG Cap Val | ** | 170,298 |
| * | Fidelity Investments | FID Strat Div & Inc | ** | 323,513 |
| * | Fidelity Investments | FID Telecom & Utilities Fund | ** | 438,283 |
| * | Fidelity Investments | FID Tot Mkt IDX PR | ** | 6,958,254 |
| * | Fidelity Investments | FID Total Bond K6 | ** | 1,178,123 |
| * | Fidelity Investments | FID Total Intl Eq | ** | 6,264 |
| * | Fidelity Investments | FID Trend Fund | ** | 323,160 |
| * | Fidelity Investments | FID US Bond Idx IS | ** | 13,249,787 |
| * | Fidelity Investments | FID Value Discov K6 | ** | 235,347 |

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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| * | Fidelity Investments | FID Value K Fund | ** | $ 1,180,096 |
| * | Fidelity Investments | FID Value Strategy K Fund | ** | 134,903 |
| * | Fidelity Investments | FID Worldwide Fund | ** | 472,762 |
| * | Fidelity Investments | FID Govt Income | ** | 967,291 |
| | Fklin Templeton Investments | Fklin Mtl Glb Disc R6 | ** | 589,891 |
| | Fklin Templeton Investments | Fklin Mtl Shares R6 | ** | 99,922 |
| | Fklin Templeton Investments | Fklin Sm Mid Cap Gth R6 | ** | 43,091 |
| | First Pacific Advisors | FPA Crescent Fund | ** | 957,662 |
| | Harding Loevner | Hrdg Lvnr Intl Eq IS | ** | 1,866,096 |
| | Invesco | Invs Charter R6 | ** | 17,090 |
| | Invesco | Invs Divrs Divd R6 | ** | 1,057,543 |
| | Invesco | Invs Glb SMMDCPGR RS | ** | 179,390 |
| | Invesco | Invs Grth & Inc R6 | ** | 594,072 |
| | Invesco | Invs MDCP Core EQ R6 | ** | 200,226 |
| | Invesco | Invs SMCP Grth R6 | ** | 237,712 |
| | Janus Funds | Janus Balanced N Fund | ** | 808,575 |
| | Janus Funds | Janus Enterprise N Fund | ** | 1,740,813 |
| | Janus Funds | Janus Mid Cap Val N Fund | ** | 985,398 |
| | Janus Funds | Janus Forty N | ** | 868,758 |
| | Janus Funds | Janus Global Research I | ** | 381,970 |
| | Janus Funds | Janus Flexible Bond N Fund | ** | 626,791 |
| | Janus Funds | Janus Overseas N Fund | ** | 405,658 |
| | Janus Funds | Janus Research N Fund | ** | 549,586 |
| | Janus Funds | Janus Small Cap Val N | ** | 2,893,393 |
| | Lord Abbett | LD Abt Mid Cap Stk R6 | ** | 282,692 |
| | Loomis Sayles Funds | LOOMIS Sm Cap Value N Fund | ** | 269,076 |
| | Morgan Stanley Investment Mgmt | MSIF Active Intl I Fund | ** | 27,614 |
| | Morgan Stanley Investment Mgmt | MSIF CP FX Inc I Fund | ** | 252,079 |
| | Morgan Stanley Investment Mgmt | MSIF Emerging Mkts IS Fund | ** | 178,470 |
| | Morgan Stanley Investment Mgmt | MSIF Global Strat IS | ** | 144,931 |
| | Morgan Stanley Investment Mgmt | MSIF Growth Inst | ** | 2,326,193 |
| | Morgan Stanley Investment Mgmt | MSIF Intl Equity IS Fund | ** | 65,450 |
| | Morgan Stanley Investment Mgmt | MSIF Midcap Growth IS Fund | ** | 1,599,144 |
| | Morgan Stanley Investment Mgmt | MSIF Sm Co Growth IS Fund | ** | 100,717 |
| | Neuberger Berman | NB Core Bond Inst | ** | 50,724 |
| | Neuberger Berman | NB Focus Inst Fund | ** | 57,597 |
| | Neuberger Berman | NB Genesis R6 | ** | 1,316,226 |
| | Neuberger Berman | NB Guardian Inst | ** | 6 |
| | Neuberger Berman | NB Lg Cap Val Inst | ** | 499,295 |
| | Neuberger Berman | NB MDCP Grth R6 | ** | 124,322 |
| | Neuberger Berman | NB Sustain EQ R6 | ** | 19,137 |
| | Oakmark Funds | Oakmark Eq & Inc IS | ** | 1,464,120 |
| | Oakmark Funds | Oakmark Inst | ** | 1,159,916 |
| | Oakmark Funds | Oakmark Select Inv | ** | 402,754 |
| | PIMCO Global Advisors | PIM Glob BD Unhg I | ** | 953,113 |

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|---|---|---|---|---|
| | | **Mutual Funds** (Continued) | | |
| | PIMCO Global Advisors | PIM High Yield Inst | ** | $ 1,072,968 |
| | PIMCO Global Advisors | PIM Lt U.S. Govt Inst | ** | 2,187,903 |
| | PIMCO Global Advisors | PIM Tot Return Inst Fund | ** | 12,943,339 |
| | Primecap | PRMCP Odyssey Stock | ** | 4,825,509 |
| | Rice Hall James | RHJ Micro Cap Fund | ** | 64,578 |
| | Royce Funds | Royce Low Pr Stk IS | ** | 226,184 |
| | Touchstone | TCHSTN Focused I | ** | 686,286 |
| | Touchstone | TCHSTN Intl Sm Cap I | ** | 48,357 |
| | TCW Funds | TCW Select Equity I | ** | 450,917 |
| | Templeton | Templeton Foreign R6 | ** | 127,384 |
| | Templeton | Templeton Growth R6 | ** | 257,872 |
| | Templeton | Templeton Dev Mkts R6 | ** | 269,175 |
| | Templeton | Templeton Global Bond R6 | ** | 1,814,656 |
| | Templeton | Templeton World R6 | ** | 179,157 |
| | T. Rowe Price | TRP Growth Stock Fund I | ** | 2,636,307 |
| | USAA Investments | USAA Cornerstone Mod Aggr Fund | ** | 5,823 |
| | USAA Investments | USAA Emerging Mkts Inst Fund | ** | 49,960 |
| | USAA Investments | USAA GOVT SEC Inst | ** | 379,607 |
| | USAA Investments | USAA Growth Inst Fund | ** | 57,855 |
| | USAA Investments | USAA Income Inst Fund | ** | 380,378 |
| | USAA Investments | USAA Income Stock Fund | ** | 36,642 |
| | USAA Investments | USAA International Inst Fund | ** | 87,106 |
| | The Vanguard Group | Vanguard Explorer Adm Fund | ** | 2,134,689 |
| | The Vanguard Group | Vanguard Infl Prot Adm Fund | ** | 1,421,872 |
| | The Vanguard Group | Vanguard Inst Index | ** | 84,499,129 |
| | The Vanguard Group | Vanguard LS Conservative Growth Fund | ** | 335,711 |
| | The Vanguard Group | Vanguard LS Growth | ** | 632,744 |
| | The Vanguard Group | Vanguard LS Income | ** | 250,396 |
| | The Vanguard Group | Vanguard LS Moderate Growth Fund | ** | 285,543 |
| | The Vanguard Group | Vanguard Total Bond Market Inst | ** | 34,395,379 |
| | The Vanguard Group | Vanguard Total Intl Stock IS | ** | 21,983,746 |
| | The Vanguard Group | Vanguard Total Stock Market IS | ** | 28,026,332 |
| | Victory | VRS Small Cap Grth Y | ** | 491,614 |
| | Western Asset | WA Core Bond I | ** | 165,910 |
| | Wells Fargo Advantage Funds | WF Common Stock R6 | ** | 139,329 |
| | Wells Fargo Advantage Funds | WF Discovery R6 | ** | 90,631 |
| | Wells Fargo Advantage Funds | WF Govt Security IS | ** | 313,255 |
| | Wells Fargo Advantage Funds | WF Growth R6 | ** | 1,713,810 |
| | Wells Fargo Advantage Funds | WF Lg Cap Growth R6 | ** | 52,319 |
| | Wells Fargo Advantage Funds | WF Opportunity IS | ** | 153,457 |
| | Wells Fargo Advantage Funds | WF Small Cap Val R6 | ** | 806,394 |
| | Total Mutual Funds | | | 488,170,045 |

SARGENT & LUNDY, L.L.C. SAVINGS INVESTMENT PLAN
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2018

Name of Plan Sponsor: Sargent & Lundy, L.L.C.
Employer Identification Number: 36-1729848
Three-Digit Plan Number: 003

| (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 |
|---|---|---|---|---|
| | | **Collective Trusts** | | |
| | The Vanguard Group | Vanguard Target 2015 | ** | $ 9,908,456 |
| | The Vanguard Group | Vanguard Target 2020 | ** | 18,968,073 |
| | The Vanguard Group | Vanguard Target 2025 | ** | 14,076,894 |
| | The Vanguard Group | Vanguard Target 2030 | ** | 11,378,191 |
| | The Vanguard Group | Vanguard Target 2035 | ** | 10,890,303 |
| | The Vanguard Group | Vanguard Target 2040 | ** | 14,279,908 |
| | The Vanguard Group | Vanguard Target 2045 | ** | 21,534,262 |
| | The Vanguard Group | Vanguard Target 2050 | ** | 30,948,238 |
| | The Vanguard Group | Vanguard Target 2055 | ** | 10,408,612 |
| | The Vanguard Group | Vanguard Target 2060 | ** | 3,931,125 |
| | The Vanguard Group | Vanguard Target 2065 | ** | 47,945 |
| | The Vanguard Group | Vanguard Target Inc | ** | 5,155,987 |
| | Total Collective Trusts | | | 151,527,994 |
| | | **Brokerage Account** | | |
| * | Fidelity Mgmt. Trust Co. | Brokerage Account | ** | 37,088,403 |
| | | **Stable Value Fund** | | |
| | **Collective Trust** | | | |
| * | Fidelity Mgmt. Trust Co. | Fidelity Intermediate Duration Pool | ** | 145,662,888 |
| | **Interest-Bearing Cash** | | | |
| * | Fidelity Mgmt. Trust Co. | Short Term Investment Fund | | 3,326,791 |
| | | | | 148,989,679 |
| | | **Participant Loans** | | |
| * | Participant Loans | Interest rates ranging from 3.25% to 6.25% with maturity dates through January 2029 | ** | 7,240,974 |
| | | | | $ 833,017,095 |

* Denotes party-in-interest.
** Cost information is not required for participant-directed investments and, therefore, is not included.

See Independent Auditor's Report.