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 01/01/2014 and ending 12/31/2014

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
- [X] 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
CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 333

1c Effective date of plan 01/01/1983

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)
CAMERON COMMUNICATIONS, LLC

153 WEST DAVE DUGAS RD.
SULPHUR, LA 70665

2b Employer Identification Number (EIN) 72-1333019

2c Plan Sponsor's telephone number 337-583-8343

2d Business code (see instructions) 517000

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2019	WENDI RACCA
	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:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	130
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)**	75
a(2) Total number of active participants at the end of the plan year	**6a(2)**	85
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	48
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	133
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	133
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	117
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	2
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 2T 3D 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

(1)	[X]	**H** (Financial Information)
(2)	[ ]	**I** (Financial Information – Small Plan)
(3)	[ ]	**A** (Insurance Information)
(4)	[X]	**C** (Service Provider Information)
(5)	[ ]	**D** (DFE/Participating Plan Information)
(6)	[ ]	**G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2018** **This Form is Open to Public Inspection.**

For calendar plan year 2018 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 333

C Plan sponsor's name as shown on line 2a of Form 5500
CAMERON COMMUNICATIONS, LLC

D Employer Identification Number (EIN)
72-1333019

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)

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	RECORDKEEPER	900	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] 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 [ ]

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	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.
EV LG CAP VALUE I - BNY MELLON INV P.O. BOX 9793 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.
INVS AM FRANCHISE Y - INVESCO INVE 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	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.
JANUS BALANCED I - JANUS SERVICES 43-1804048	0.10%

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 333

C Plan sponsor's name as shown on line 2a of Form 5500
CAMERON COMMUNICATIONS, LLC

D Employer Identification Number (EIN)
72-1333019

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)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1331222	1235131
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(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)	188801	162590
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	14544524	13433590
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

			(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	16064547	14831311
	Liabilities			
g	Benefit claims payable	1g	0	0
h	Operating payables	1h	0	0
i	Acquisition indebtedness	1i	0	0
j	Other liabilities	1j	0	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	16064547	14831311

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)	92667	
	(B) Participants	2a(1)(B)	257919	
	(C) Others (including rollovers)	2a(1)(C)	0	
	(2) Noncash contributions	2a(2)	0	
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		350586
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	91	
	(B) U.S. Government securities	2b(1)(B)	0	
	(C) Corporate debt instruments	2b(1)(C)	0	
	(D) Loans (other than to participants)	2b(1)(D)	0	
	(E) Participant loans	2b(1)(E)	7453	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		7544
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	563458	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		563458
	(3) Rents	2b(3)		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		362794
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		1284382
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2508043	
(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)		2508043
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		4471
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)	0	
(4) Other	2i(4)	5104	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		5104
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2517618
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-1233236
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: LANGLEY WILLIAMS & CO **(2)** EIN: 72-0847443

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		5000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		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 01/01/2014 and ending 12/31/2014

A Name of plan
CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 333

C Plan sponsor's name as shown on line 2a of Form 5500
CAMERON COMMUNICATIONS, LLC

D Employer Identification Number (EIN)
72-1333019

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):

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

December 31, 2014 and 2013

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Langley, Williams & Company, L.L.C.

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INDEPENDENT AUDITORS' REPORT

Board of Directors
Cameron Communications, LLC Cash or
Deferred Profit Sharing Plan
Sulphur, Louisiana

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Cameron Communications, LLC Cash or Deferred Profit Sharing Plan, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, 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 audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described below 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 9, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2014 and 2013, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental Schedule H, Line 4I-Schedule of Assets (Held at End of Year) 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 are presented for the purpose of additional analysis and are 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 schedules referred to above.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Lake Charles, LA
September 17, 2015

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2014 and 2013

	2014	2013
ASSETS		
Investments at fair value	$ 13,433,590	$ 14,544,524
Interest-bearing cash	1,235,131	1,331,222
Notes receivable from participants	162,590	188,801
TOTAL ASSETS	14,831,311	16,064,547
NET ASSETS AVAILABLE FOR BENEFITS	$ 14,831,311	$ 16,064,547

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

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2014 and 2013

	2014	2013
ADDITIONS		
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investment securities	$ 362,794	$ 2,481,617
Interest and dividends	563,549	453,179
	926,343	2,934,796
Interest income on note receivable from participants	7,453	7,747
Contributions:		
Employer	92,667	48,070
Participants	257,919	202,692
	350,586	250,762
TOTAL ADDITIONS	1,284,382	3,193,305
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	2,508,043	2,188,793
Certain deemed distributions	4,471	-
Administrative expenses	5,104	1,792
TOTAL DEDUCTIONS	2,517,618	2,190,585
NET INCREASE (DECREASE)	(1,233,236)	1,002,720
NET ASSETS AVAILABLE FOR BENEFITS Beginning of year	16,064,547	15,061,827
END OF YEAR	$ 14,831,311	$ 16,064,547

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

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the Cameron Communications, LLC ("Company") Cash or Deferred Profit Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of the Company who have 30 days of service and are age 18 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Company refers to employees of the following companies: Cameron Communications, LLC, and LBH, LLC.

Contributions

Each year, participants may contribute up to the lessor of 50% of pretax annual compensation or $17,500 for 2014 and 2013, as defined in the Plan. Participants who have attained age 50 or older before the end of the Plan year are eligible to make catch-up contributions up to $5,500. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans but will not become a participant in the Plan until the eligibility and entry date requirements are met. Participants direct the investment of their contributions into various investment options offered by the Plan. The employer may make matching contributions if the employee meets the eligibility requirements of the Plan by being 18 years old and meeting the service requirement of one month. Additionally, the employer may make discretionary nonelective contributions in an amount to be determined by the Board of Directors for each Plan Year. The participant must complete at least 1,000 hours of service during the Plan Year and be employed as of the last day of the Plan Year to be eligible to receive any nonelective contributions that may be made for that Plan Year.

Participant Accounts

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

Vesting

Participants are immediately vested in their voluntary contributions plus earnings and market fluctuations thereon. Vesting in the Company's contribution portion of their accounts is based on continuous service. The vesting schedule is as follows:

Years of Service	Vested Percentage
Less than 2	0%
2	50%
3	100%

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN - (Continued)

Notes Receivable from Participants

Participants may borrow from their own salary deferral savings account once each year. The minimum loan is $1,000 and the maximum amount is the lesser of 50% of the vested account balance or $50,000 reduced by the highest outstanding loan balance in the account during the prior twelve month period. Participants may only have one loan outstanding at any given time. Loan transactions are treated as a transfer to (from) the investment fund from (to) the Participant Notes fund. Loan terms range from 1-5 years or up to 10 years for the purchase of a primary residence. The loans are secured by the balance in the participants' account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through monthly payroll deductions.

All loans shall bear a reasonable rate of interest as determined by the Plan Administrator based on the prevailing interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances. The Plan Administrator shall consider a loan in default if any scheduled repayment remains unpaid as of the last business day of the calendar quarter following the calendar quarter in which a loan is initially considered past due. For the purpose of Code Section 72(p), the participant shall then be treated as having a deemed distribution regardless of whether or not a distribution event has occurred.

Payment of Benefits

On termination of service due to death, disability, retirement or other reasons, a participant may elect to receive either a lump-sum equal to the value of the participant's vested interest in his or her account, partial withdrawal to any portion of his or her vested balance, or installments in equal amounts over a period of time.

Distributions must commence no later than the first day of April following the calendar year in which the later of termination of employment or age 70 1/2 occurs.

Forfeited Accounts

At December 31, 2014 and 2013, forfeited nonvested accounts totaled $1,317 and $22,028, respectively. These accounts are to be used to reduce future employer contributions and defray administrative expenses of the Plan which consist of attorney fees, audit fees and record keeping costs. In 2014 and 2013, employer contributions were reduced by $21,523 and $2,123, respectively, from forfeited nonvested accounts. Upon termination of employment, plan participants have five years in which to withdraw or transfer their accounts. After five years, any unvested employer matching contributions are forfeited.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A brief summary of the significant accounting and reporting policies followed by the Plan in the preparation of its financial statements is presented below.

Date of Management's Review

Subsequent events were evaluated through September 17, 2015, which is the date the financial statements were available to be issued.

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

Estimates

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

Basis of Accounting

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2014 and 2013, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

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

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the Plan are paid by the Company.

Reclassification

Certain items in the prior year financial statements have been reclassified to conform to the current year presentation.

NOTE 3 - FAIR VALUE MEASUREMENTS

Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount 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.

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs are based primarily on quoted prices for similar assets or liabilities in active or inactive markets and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 inputs were available to the Plan, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available.

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

Level 3 Fair Value Measurements

The participant loans are not actively traded and significant other observable inputs are not available. Thus, the fair value of participant loans approximates the amortized cost of the loans because the loans are secured by each respective participant's account balance.

For those assets with fair value measured using Level 3 inputs, the Plan administrator determines the fair value measurement policies and procedures in consultation with the Company's chief financial officer and the Plan trustee. Those policies and procedures are reassessed at least annually to determine if the current valuation techniques are still appropriate. At that time, the unobservable inputs used in the fair value measurements are evaluated and adjusted, as necessary, based on current market conditions and other third-party information.

NOTE 3 - FAIR VALUE MEASUREMENTS - (Continued)

		Fair Value Measurements at the End of the Reporting Period Using:	
December 31, 2014	Fair Value	Quoted Prices In Active Markets for Identical Assets or Liabilities (Level 1)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 13,433,590	$ 13,433,590	$ -
Participant loans	162,590	-	162,590
Total assets at fair value	$ 13,596,180	$ 13,433,590	$ 162,590
December 31, 2013			
Mutual funds	$ 14,544,524	$ 14,544,524	$ -
Participant loans	188,801	-	188,801
Total assets at fair value	$ 14,733,325	$ 14,544,524	$ 188,801

The following tables reconcile the beginning and ending balances of fair value measurements using significant unobservable inputs (Level 3) of participant loans for the years ended December 31, 2014 and 2013:

December 31, 2014	Participant Loans
Balance, at beginning of year	$ 188,801
Loan originations	48,763
Loan collections	(70,418)
Defaults	(4,556)
Balance, end of year	$ 162,590

December 31, 2013	Participant Loans
Balance, at beginning of year	$ 129,058
Loan originations	164,194
Loan collections	(104,451)
Defaults	-
Balance, end of year	$ 188,801

There were no gains or losses, either realized or unrealized, included in the changes in net assets available for benefits for participant loans.

Gains and losses (realized and unrealized) included in changes in net assets available for benefits for the years ended December 31, 2014 and 2013, result entirely from investments in mutual funds and are reported as net appreciation (depreciation) in fair value of investments.

NOTES TO FINANCIAL STATEMENTS

NOTE 4 - INVESTMENTS

The Plan's investments are held by Fidelity Management Trust Company, a Massachusetts – chartered trust company regulated and supervised, and subject to periodic examinations by a state agency. The following table presents investments at December 31, 2014 and 2013 that represent 5% or more of the Plan's net assets:

	2014	2013
Investments at Fair Value as Determined by Quoted Market Price:		
Fidelity Advisor Growth Opportunity Fund - Class I, 22,789 and 30,343 shares, respectively	$ 1,502,940	$ 1,786,880.73
Fidelity Advisor Diversified International Fund - Class I, 44,056 and 46,699 shares, respectively	$ 853,798	$ 946,582.88
Treasury Fund - Daily Money Class, 1,235,131 and 1,331,2221 shares, respectively	$ 1,235,131	$ 1,331,221.58
Fidelity Advisor Equity Growth Fund - Class I, 17,916 and 20,891 shares, respectively	$ 1,774,266	$ 1,860,088.78
Janus Balance Fund - Class I, 44,116 and 55,079 shares, respectively	$ 1,350,397	$ 1,652,928.68
Invesco Van Kampen American Franchise Fund - Class Y, 82,761 and 99,473 shares, respectively	$ 1,394,516	$ 1,694,022.16
Fidelity Advisor High Income Advantage Fund - Class I, 139,568 and 141,554 shares, respectively	$ 1,398,476	$ 1,428,279.42
Fidelity Advisor Freedom 2015 Fund - Class I, 99,619 and 92,990 shares, respectively	$ 1,247,229	$ 1,189,343.21

NOTE 5 - RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan and the Sponsor for the investment management services amounted to $904 and $1,792 for the years ended December 31, 2014 and 2013, respectively. Fees paid by the Plan and the Sponsor for attorney fees amounted to $4,200 and $0 for the years ended December 31, 2014 and 2013, respectively.

All of these party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

NOTE 6 - PLAN TERMINATION

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

NOTE 7 - TAX STATUS

The Internal Revenue Service has determined and informed the Plan by a determination letter on July 30, 2003, 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 and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax-exempt. Therefore,

NOTE 7 – TAX STATUS – (Continued)

no provision for income taxes has been included in the Plan's financial statements.

The Plan administrator believes the Plan is no longer subject to income tax examinations for the years prior to 2011.

NOTE 8 - SEPARATED PARTICIPANTS

At December 31, 2014, accounts totaling $286,904 belong to two separated participants who at the date of the financial statements have not directed disbursement of their accounts.

NOTE 9 – CERTIFIED INFORMATION

Fidelity, as custodian of the Plan, holds all of the Plan's investment assets and executes transactions therein. Financial information relating to the assets is included in the accompanying financial statements and is based on information provided by the custodian. The Plan administrator has instructed the independent certified public accountants not to examine the information certified as complete and accurate by the custodian. The custodian's certificate applies to substantially all Plan assets and transactions for the dates presented, as well as the Statement of Assets Held for Investment Purposes.

The following information was compiled from data certified by the custodian as being complete and accurate:

a. Information included in the statement of net assets available for benefits:

Investments at fair value
Participant notes receivable
Interest bearing cash

b. Information included in the statement of changes in net available for benefits:

Interest income
Net appreciation (depreciation) in fair value of investment securities
Administrative expenses

NOTE 10 - RISK AND UNCERTAINTIES

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

NOTE 11 – PLAN AMENDMENTS

Effective March 1, 2014, the Plan was amended to change the Company matching formula to ensure all match-eligible participants who elect to defer at least 10 percent of annual eligible pay receive the full 50% match. Previously, only 5 percent of annual eligible pay received would be matched.

Effective January 1, 2014, the methodology used to determine participants' years of service for vesting purposes has changed. Previously participants received vesting credit for a year of service under the 'general method' if the participant earned at least 1000 hours of service in a Plan Year. Vesting under the Plan is now based upon the elapsed time method. Hours of service are not counted and instead periods of service are computed. A period of service is

NOTE 11 – PLAN AMENDMENTS – (Continued)

determined based on the time the participant works for their Employer. Only whole years of service with the Employer will be counted to compute the years of service for vesting purposes.

Effective January 1, 2014, the eligibility requirements used to determine if a participant is eligible to participate in the Plan changed. The Service requirement for eligibility was reduced from 3 months to 1 month.

NOTE 12 - SUBSEQUENT EVENTS

Management of the Plan has evaluated its December 31, 2014 financial statements for subsequent events through September 17, 2015, the date the financial statements were available to be issued. Management is not aware of any subsequent events, which would require recognition of disclosure in the financial statements.

SUPPLEMENTAL SCHEDULE

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN
December 31, 2014
EIN: 72-1333019 PN: 333
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(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
*	Fidelity Management Trust Company	Fidelity Treasury Fund Money Market Funds Open-End Management Investment Co.; Due on Demand		$ 1,235,131
	Commingled Trust Funds:			
*	Fidelity Management Trust Company	Fidelity Advisor Growth Opportunities Fund Equity Fund; Open-End Management Investment Co.; Due on Demand		1,502,940
*	Fidelity Management Trust Company	Fidelity Advisor Diversified International Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		853,798
*	Fidelity Management Trust Company	Janus Balanced Fund Class I Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,350,397
*	Fidelity Management Trust Company	Fidelity Advisor Equity Growth Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,774,266
*	Fidelity Management Trust Company	Van Kampen American Franchise Fund Y Equity Fund; Open-End Management Investment Co.; Due on Demand		1,394,516
*	Fidelity Management Trust Company	Fidelity Advisor High Income Advantage Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,398,476
*	Fidelity Management Trust Company	Fidelity Advisor Freedom 2015 Class I Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,247,229
*	Fidelity Management Trust Company	Fidelity Advisor Limited Term Bond Fund; Open-End Management Investment Co.; Due on Demand		651,320
*	Fidelity Management Trust Company	Fidelity Advisor Growth and Income Fund; Open-End Management Investment Co.; Due on Demand		457,699

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN
December 31, 2014
EIN: 72-1333019 PN: 333
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - (Continued)

*	Fidelity Management Trust Company	Fidelity Advisor Small Cap Fund; Open-End Management Investment Co.; Due on Demand		333,066
*	Fidelity Management Trust Company	Fidelity Advisor Stock Selector Mid Cap Fund- Class I; Open-End Management Investment Co.; Due on Demand		579,942
*	Fidelity Management Trust Company	Fidelity Advisor Freedom 2020 Fund- Class I; Open-End Management Investment Co.; Due on Demand		571,044
*	Fidelity Management Trust Company	Fidelity Advisor Government Income Fund- Class I; Open-End Management Investment Co.; Due on Demand		571,044
*	Other			747,852
	Participant Loans	Various maturity dates; 4.25% - 10.0%		162,590
		TOTAL INVESTMENTS	$ -	$ 14,831,311

(D) - N/A, all investments are participant directed and individual accounts.

FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

CAMERON COMMUNICATIONS, LLC CASH OR DEFERRED PROFIT SHARING PLAN

December 31, 2014 and 2013

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Langley, Williams & Company, L.L.C.

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INDEPENDENT AUDITORS' REPORT

Board of Directors
Cameron Communications, LLC Cash or
Deferred Profit Sharing Plan
Sulphur, Louisiana

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Cameron Communications, LLC Cash or Deferred Profit Sharing Plan, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits for the years then ended, 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 audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described below 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 9, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2014 and 2013, that the information provided to the Plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental Schedule H, Line 4I-Schedule of Assets (Held at End of Year) 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 are presented for the purpose of additional analysis and are 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 schedules referred to above.

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Lake Charles, LA
September 17, 2015

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2014 and 2013

	2014	2013
ASSETS		
Investments at fair value	$ 13,433,590	$ 14,544,524
Interest-bearing cash	1,235,131	1,331,222
Notes receivable from participants	162,590	188,801
TOTAL ASSETS	14,831,311	16,064,547
NET ASSETS AVAILABLE FOR BENEFITS	$ 14,831,311	$ 16,064,547

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

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2014 and 2013

	2014	2013
ADDITIONS		
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investment securities	$ 362,794	$ 2,481,617
Interest and dividends	563,549	453,179
	926,343	2,934,796
Interest income on note receivable from participants	7,453	7,747
Contributions:		
Employer	92,667	48,070
Participants	257,919	202,692
	350,586	250,762
TOTAL ADDITIONS	1,284,382	3,193,305
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants	2,508,043	2,188,793
Certain deemed distributions	4,471	-
Administrative expenses	5,104	1,792
TOTAL DEDUCTIONS	2,517,618	2,190,585
NET INCREASE (DECREASE)	(1,233,236)	1,002,720
NET ASSETS AVAILABLE FOR BENEFITS Beginning of year	16,064,547	15,061,827
END OF YEAR	$ 14,831,311	$ 16,064,547

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

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the Cameron Communications, LLC ("Company") Cash or Deferred Profit Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of the Company who have 30 days of service and are age 18 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Company refers to employees of the following companies: Cameron Communications, LLC, and LBH, LLC.

Contributions

Each year, participants may contribute up to the lessor of 50% of pretax annual compensation or $17,500 for 2014 and 2013, as defined in the Plan. Participants who have attained age 50 or older before the end of the Plan year are eligible to make catch-up contributions up to $5,500. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans but will not become a participant in the Plan until the eligibility and entry date requirements are met. Participants direct the investment of their contributions into various investment options offered by the Plan. The employer may make matching contributions if the employee meets the eligibility requirements of the Plan by being 18 years old and meeting the service requirement of one month. Additionally, the employer may make discretionary nonelective contributions in an amount to be determined by the Board of Directors for each Plan Year. The participant must complete at least 1,000 hours of service during the Plan Year and be employed as of the last day of the Plan Year to be eligible to receive any nonelective contributions that may be made for that Plan Year.

Participant Accounts

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

Vesting

Participants are immediately vested in their voluntary contributions plus earnings and market fluctuations thereon. Vesting in the Company's contribution portion of their accounts is based on continuous service. The vesting schedule is as follows:

Years of Service	Vested Percentage
Less than 2	0%
2	50%
3	100%

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN - (Continued)

Notes Receivable from Participants

Participants may borrow from their own salary deferral savings account once each year. The minimum loan is $1,000 and the maximum amount is the lesser of 50% of the vested account balance or $50,000 reduced by the highest outstanding loan balance in the account during the prior twelve month period. Participants may only have one loan outstanding at any given time. Loan transactions are treated as a transfer to (from) the investment fund from (to) the Participant Notes fund. Loan terms range from 1-5 years or up to 10 years for the purchase of a primary residence. The loans are secured by the balance in the participants' account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through monthly payroll deductions.

All loans shall bear a reasonable rate of interest as determined by the Plan Administrator based on the prevailing interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances. The Plan Administrator shall consider a loan in default if any scheduled repayment remains unpaid as of the last business day of the calendar quarter following the calendar quarter in which a loan is initially considered past due. For the purpose of Code Section 72(p), the participant shall then be treated as having a deemed distribution regardless of whether or not a distribution event has occurred.

Payment of Benefits

On termination of service due to death, disability, retirement or other reasons, a participant may elect to receive either a lump-sum equal to the value of the participant's vested interest in his or her account, partial withdrawal to any portion of his or her vested balance, or installments in equal amounts over a period of time.

Distributions must commence no later than the first day of April following the calendar year in which the later of termination of employment or age 70 1/2 occurs.

Forfeited Accounts

At December 31, 2014 and 2013, forfeited nonvested accounts totaled $1,317 and $22,028, respectively. These accounts are to be used to reduce future employer contributions and defray administrative expenses of the Plan which consist of attorney fees, audit fees and record keeping costs. In 2014 and 2013, employer contributions were reduced by $21,523 and $2,123, respectively, from forfeited nonvested accounts. Upon termination of employment, plan participants have five years in which to withdraw or transfer their accounts. After five years, any unvested employer matching contributions are forfeited.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A brief summary of the significant accounting and reporting policies followed by the Plan in the preparation of its financial statements is presented below.

Date of Management's Review

Subsequent events were evaluated through September 17, 2015, which is the date the financial statements were available to be issued.

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

Estimates

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

Basis of Accounting

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2014 and 2013, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

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

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

All expenses of maintaining the Plan are paid by the Company.

Reclassification

Certain items in the prior year financial statements have been reclassified to conform to the current year presentation.

NOTE 3 - FAIR VALUE MEASUREMENTS

Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount 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.

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs are based primarily on quoted prices for similar assets or liabilities in active or inactive markets and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 inputs were available to the Plan, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available.

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

Level 3 Fair Value Measurements

The participant loans are not actively traded and significant other observable inputs are not available. Thus, the fair value of participant loans approximates the amortized cost of the loans because the loans are secured by each respective participant's account balance.

For those assets with fair value measured using Level 3 inputs, the Plan administrator determines the fair value measurement policies and procedures in consultation with the Company's chief financial officer and the Plan trustee. Those policies and procedures are reassessed at least annually to determine if the current valuation techniques are still appropriate. At that time, the unobservable inputs used in the fair value measurements are evaluated and adjusted, as necessary, based on current market conditions and other third-party information.

NOTE 3 - FAIR VALUE MEASUREMENTS - (Continued)

		Fair Value Measurements at the End of the Reporting Period Using:	
December 31, 2014	Fair Value	Quoted Prices In Active Markets for Identical Assets or Liabilities (Level 1)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 13,433,590	$ 13,433,590	$ -
Participant loans	162,590	-	162,590
Total assets at fair value	$ 13,596,180	$ 13,433,590	$ 162,590
December 31, 2013			
Mutual funds	$ 14,544,524	$ 14,544,524	$ -
Participant loans	188,801	-	188,801
Total assets at fair value	$ 14,733,325	$ 14,544,524	$ 188,801

The following tables reconcile the beginning and ending balances of fair value measurements using significant unobservable inputs (Level 3) of participant loans for the years ended December 31, 2014 and 2013:

December 31, 2014	Participant Loans
Balance, at beginning of year	$ 188,801
Loan originations	48,763
Loan collections	(70,418)
Defaults	(4,556)
Balance, end of year	$ 162,590

December 31, 2013	Participant Loans
Balance, at beginning of year	$ 129,058
Loan originations	164,194
Loan collections	(104,451)
Defaults	-
Balance, end of year	$ 188,801

There were no gains or losses, either realized or unrealized, included in the changes in net assets available for benefits for participant loans.

Gains and losses (realized and unrealized) included in changes in net assets available for benefits for the years ended December 31, 2014 and 2013, result entirely from investments in mutual funds and are reported as net appreciation (depreciation) in fair value of investments.

NOTES TO FINANCIAL STATEMENTS

NOTE 4 - INVESTMENTS

The Plan's investments are held by Fidelity Management Trust Company, a Massachusetts – chartered trust company regulated and supervised, and subject to periodic examinations by a state agency. The following table presents investments at December 31, 2014 and 2013 that represent 5% or more of the Plan's net assets:

	2014	2013
Investments at Fair Value as Determined by Quoted Market Price:		
Fidelity Advisor Growth Opportunity Fund - Class I, 22,789 and 30,343 shares, respectively	$ 1,502,940	$ 1,786,880.73
Fidelity Advisor Diversified International Fund - Class I, 44,056 and 46,699 shares, respectively	$ 853,798	$ 946,582.88
Treasury Fund - Daily Money Class, 1,235,131 and 1,331,2221 shares, respectively	$ 1,235,131	$ 1,331,221.58
Fidelity Advisor Equity Growth Fund - Class I, 17,916 and 20,891 shares, respectively	$ 1,774,266	$ 1,860,088.78
Janus Balance Fund - Class I, 44,116 and 55,079 shares, respectively	$ 1,350,397	$ 1,652,928.68
Invesco Van Kampen American Franchise Fund - Class Y, 82,761 and 99,473 shares, respectively	$ 1,394,516	$ 1,694,022.16
Fidelity Advisor High Income Advantage Fund - Class I, 139,568 and 141,554 shares, respectively	$ 1,398,476	$ 1,428,279.42
Fidelity Advisor Freedom 2015 Fund - Class I, 99,619 and 92,990 shares, respectively	$ 1,247,229	$ 1,189,343.21

NOTE 5 - RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan and the Sponsor for the investment management services amounted to $904 and $1,792 for the years ended December 31, 2014 and 2013, respectively. Fees paid by the Plan and the Sponsor for attorney fees amounted to $4,200 and $0 for the years ended December 31, 2014 and 2013, respectively.

All of these party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

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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 will become 100% vested in their accounts.

NOTE 7 - TAX STATUS

The Internal Revenue Service has determined and informed the Plan by a determination letter on July 30, 2003, 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 and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax-exempt. Therefore,

NOTE 7 – TAX STATUS – (Continued)

no provision for income taxes has been included in the Plan's financial statements.

The Plan administrator believes the Plan is no longer subject to income tax examinations for the years prior to 2011.

NOTE 8 - SEPARATED PARTICIPANTS

At December 31, 2014, accounts totaling $286,904 belong to two separated participants who at the date of the financial statements have not directed disbursement of their accounts.

NOTE 9 – CERTIFIED INFORMATION

Fidelity, as custodian of the Plan, holds all of the Plan's investment assets and executes transactions therein. Financial information relating to the assets is included in the accompanying financial statements and is based on information provided by the custodian. The Plan administrator has instructed the independent certified public accountants not to examine the information certified as complete and accurate by the custodian. The custodian's certificate applies to substantially all Plan assets and transactions for the dates presented, as well as the Statement of Assets Held for Investment Purposes.

The following information was compiled from data certified by the custodian as being complete and accurate:

a. Information included in the statement of net assets available for benefits:

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Participant notes receivable
Interest bearing cash

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Interest income
Net appreciation (depreciation) in fair value of investment securities
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The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 11 – PLAN AMENDMENTS

Effective March 1, 2014, the Plan was amended to change the Company matching formula to ensure all match-eligible participants who elect to defer at least 10 percent of annual eligible pay receive the full 50% match. Previously, only 5 percent of annual eligible pay received would be matched.

Effective January 1, 2014, the methodology used to determine participants' years of service for vesting purposes has changed. Previously participants received vesting credit for a year of service under the 'general method' if the participant earned at least 1000 hours of service in a Plan Year. Vesting under the Plan is now based upon the elapsed time method. Hours of service are not counted and instead periods of service are computed. A period of service is

NOTE 11 – PLAN AMENDMENTS – (Continued)

determined based on the time the participant works for their Employer. Only whole years of service with the Employer will be counted to compute the years of service for vesting purposes.

Effective January 1, 2014, the eligibility requirements used to determine if a participant is eligible to participate in the Plan changed. The Service requirement for eligibility was reduced from 3 months to 1 month.

NOTE 12 - SUBSEQUENT EVENTS

Management of the Plan has evaluated its December 31, 2014 financial statements for subsequent events through September 17, 2015, the date the financial statements were available to be issued. Management is not aware of any subsequent events, which would require recognition of disclosure in the financial statements.

SUPPLEMENTAL SCHEDULE

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN
December 31, 2014
EIN: 72-1333019 PN: 333
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(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
*	Fidelity Management Trust Company	Fidelity Treasury Fund Money Market Funds Open-End Management Investment Co.; Due on Demand		$ 1,235,131
	Commingled Trust Funds:			
*	Fidelity Management Trust Company	Fidelity Advisor Growth Opportunities Fund Equity Fund; Open-End Management Investment Co.; Due on Demand		1,502,940
*	Fidelity Management Trust Company	Fidelity Advisor Diversified International Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		853,798
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*	Fidelity Management Trust Company	Fidelity Advisor Equity Growth Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,774,266
*	Fidelity Management Trust Company	Van Kampen American Franchise Fund Y Equity Fund; Open-End Management Investment Co.; Due on Demand		1,394,516
*	Fidelity Management Trust Company	Fidelity Advisor High Income Advantage Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,398,476
*	Fidelity Management Trust Company	Fidelity Advisor Freedom 2015 Class I Fund Mutual Fund; Open-End Management Investment Co.; Due on Demand		1,247,229
*	Fidelity Management Trust Company	Fidelity Advisor Limited Term Bond Fund; Open-End Management Investment Co.; Due on Demand		651,320
*	Fidelity Management Trust Company	Fidelity Advisor Growth and Income Fund; Open-End Management Investment Co.; Due on Demand		457,699

CAMERON COMMUNICATIONS, LLC
CASH OR DEFERRED PROFIT SHARING PLAN
December 31, 2014
EIN: 72-1333019 PN: 333
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR) - (Continued)

*	Fidelity Management Trust Company	Fidelity Advisor Small Cap Fund; Open-End Management Investment Co.; Due on Demand		333,066
*	Fidelity Management Trust Company	Fidelity Advisor Stock Selector Mid Cap Fund- Class I; Open-End Management Investment Co.; Due on Demand		579,942
*	Fidelity Management Trust Company	Fidelity Advisor Freedom 2020 Fund- Class I; Open-End Management Investment Co.; Due on Demand		571,044
*	Fidelity Management Trust Company	Fidelity Advisor Government Income Fund- Class I; Open-End Management Investment Co.; Due on Demand		571,044
*	Other			747,852
	Participant Loans	Various maturity dates; 4.25% - 10.0%		162,590
		TOTAL INVESTMENTS	$ -	$ 14,831,311

(D) - N/A, all investments are participant directed and individual accounts.