Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2018

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [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. . . . . ▶ [X]

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
BAKEMARK USA LLC 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/2017

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)
BAKEMARK USA LLC

7351 CRIDER AVENUE
PICO RIVERA, CA 90660

2b Employer Identification Number (EIN)
95-2755319

2c Plan Sponsor's telephone number
310-993-4222

2d Business code (see instructions)
424400

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.	01/14/2020	ROSEMARIE GOMEZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	01/14/2020	ROSEMARIE GOMEZ
	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**	679
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)**	659
a(2) Total number of active participants at the end of the plan year	**6a(2)**	723
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	29
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	752
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	752
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	703
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
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 2S 2T 3D 3F

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

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

a Pension Schedules

(1) [X] **R** (Retirement Plan Information)

(2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1) [X] **H** (Financial Information)

(2) [ ] **I** (Financial Information – Small Plan)

(3) [ ] ___ **A** (Insurance Information)

(4) [X] **C** (Service Provider Information)

(5) [X] **D** (DFE/Participating Plan Information)

(6) [ ] **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury 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 01/01/2018 and ending 12/31/2018

A Name of plan
BAKEMARK USA LLC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BAKEMARK USA LLC

D Employer Identification Number (EIN)
95-2755319

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

STATE STREET GLOBAL ADVISORS

42-1704580

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

VANGUARD

23-1945930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

AON HEWITT

37-6543784

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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)

WELLS FARGO BANK, N.A.

94-1347393

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 50 62 64	SERVICE PROVIDER	52771	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection.

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

A Name of plan
BAKEMARK USA LLC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
BAKEMARK USA LLC

D Employer Identification Number (EIN)
95-2755319

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO STABLE RETURN FUND N

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-6202499-001	C	4285209

a Name of MTIA, CCT, PSA, or 103-12 IE: STATE STREET/RUSSELL SM MID CAP IND

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-0337987-461	C	2435931

a Name of MTIA, CCT, PSA, or 103-12 IE: STATE STREET/SSGA S & P 500 INDEX

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-0337987-388	C	2437599

a Name of MTIA, CCT, PSA, or 103-12 IE: AON HEWITT CORE PLUS BOND FUND

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
37-6543784-008	C	1486708

a Name of MTIA, CCT, PSA, or 103-12 IE: AON HEWITT GLOBAL REAL ESTATE FUND

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
37-6543784-006	C	870377

a Name of MTIA, CCT, PSA, or 103-12 IE: AON HEWITT LARGE CAP EQUITY FUND

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
37-6543784-002	C	3710683

a Name of MTIA, CCT, PSA, or 103-12 IE: AON HEWITT NON-U.S. EQUITY FUND

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
37-6543784-005	C	1969651

a Name of MTIA, CCT, PSA, or 103-12 IE: AON HEWITT SMALL & MID CAP EQ FUND

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN 37-6543784-003	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2026434

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection

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

A Name of plan
BAKEMARK USA LLC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BAKEMARK USA LLC

D Employer Identification Number (EIN)
95-2755319

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1163385	1265897
(9) Value of interest in common/collective trusts	1c(9)	17528185	19222592
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	12673503	13883686
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	31365073	34372175
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	31365073	34372175

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)	2077695	
	(B) Participants	2a(1)(B)	3094657	
	(C) Others (including rollovers)	2a(1)(C)	3693703	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		8866055
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	59201	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		59201
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	335419	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		335419
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-1122356
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-1210714
c Other income	2c		-509
d Total income. Add all **income** amounts in column (b) and enter total	2d		6927096
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3872398	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		3872398
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	47596	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		47596
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3919994
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		3007102
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [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: BDO USA LLP **(2)** EIN: 13-5381590

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		331959
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			

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2018

This Form is Open to Public Inspection.

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

A Name of plan
BAKEMARK USA LLC 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BAKEMARK USA LLC

D Employer Identification Number (EIN)
95-2755319

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 41-6257133

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):

BakeMark USA LLC 401(k) Plan

Financial Statements and Supplemental Schedules

As of December 31, 2018 and 2017 and for the Year Ended December 31, 2018 and for the Period from October 1, 2017 (inception) to December 31, 2017

The report accompanying these financial statements was issued by BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee.

BakeMark USA LLC 401(k) Plan

Financial Statements
and Supplemental Schedules

As of December 31, 2018, and 2017 and for the
Year Ended December 31, 2018 and for the
Period from October 1, 2017 (inception) to December 31, 2017

BakeMark USA LLC 401(k) Plan

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Supplemental Schedules

Form 5500, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the Year Ended December 31, 2018 18

Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2018 19

Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2017 20

Note - All schedules other than those listed above have been omitted since the information is either disclosed elsewhere in the financial statements or not required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

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515 S. Flower St, 47th Floor
Los Angeles, CA 90071

Independent Auditor's Report

To the Plan administrator
BakeMark USA LLC
Pico Rivera, California

We were engaged to audit the accompanying financial statements of BakeMark USA LLC 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statements of changes in net assets available for benefits for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Wells Fargo Bank N.A. (Wells Fargo), the Trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Trustee as of December 31, 2018 and 2017, and for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

Other Matter

The supplemental schedules, Form 5500, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the year ended December 31, 2018 and Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2018 and 2017 are required by the Department of Labor's (DOL) 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 these supplemental schedules.

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

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

BDO USA, LLP

January 9, 2020

Financial Statements

BakeMark USA LLC 401(k) Plan

Statements of Net Assets Available for Benefits

December 31,	2018	2017
Assets		
Investments, at fair value	$ 33,106,278	$ 30,201,688
Receivables:		
Notes receivable from participants	1,265,897	1,163,385
Employer contributions receivable	119,243	40,616
Total receivables	1,385,140	1,204,001
Total assets	34,491,418	31,405,689
Net assets available for benefits	$ 34,491,418	$ 31,405,689

See accompanying notes to financial statements.

BakeMark USA LLC 401(k) Plan

Statements of Changes in Net Assets Available for Benefits

	Year ended December 31, 2018	Period from October 1, 2017 (inception)to December 31, 2017
Investment income (loss)		
Dividend income	$ 335,419	$ 240,049
Net (depreciation) appreciation in fair value of investments	(2,333,579)	599,728
Net investment (loss) income	(1,998,160)	839,777
Interest income from notes receivable from participants	59,201	10,423
Contributions:		
Participants	3,094,657	571,860
Employer	2,156,322	443,663
Rollover	3,693,703	29,668,898
Total contributions	8,944,682	30,684,421
Total additions	7,005,723	31,534,621
Deductions		
Benefits paid to participants and beneficiaries	3,872,398	128,172
Administrative expenses	47,596	760
Total deductions	3,919,994	128,932
Net increase in net assets available for benefits	3,085,729	31,405,689
Net assets available for benefits, beginning of year	31,405,689	-
Net assets available for benefits, end of year	$ 34,491,418	$ 31,405,689

See accompanying notes to financial statements.

1. Description of Plan

The following description of the BakeMark USA LLC 401(k) Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is designed and is intended to operate as a safe harbor defined contribution plan as defined by the plan document. The Plan covers all eligible employees of BakeMark USA, LLC ("Employer", "Company" or "BakeMark"). The Plan is subject to the provisions of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

The Plan was created effective on October 1, 2017 in connection with the sale of BakeMark by CSM Bakery Solutions, LLC ("CSM Bakery"), which was effective August 14, 2017. During 2018, BakeMark acquired the Elyria OH and Spartanburg locations from CSM Bakery.

Wells Fargo Bank, N.A. ("Wells Fargo" or the "Trustee") is responsible for the custody and management of the Plan's assets while Wells Fargo & Trust Company Institutional Retirement & Trust also provides recordkeeping and administrative services to the Plan.

Plan Administration

The Plan is administered by a fiduciary committee appointed by the Company. The Plan administrator is responsible for the administration of the Plan.

Eligibility

Employees are eligible to participate in the Plan upon hire. Non-resident aliens are not eligible to participate in the Plan. Certain union employees are eligible employees for the purpose of rolling over their former account balances and loans from the CSM NA 401(k) Plan, otherwise, such union employees are excluded employees and not eligible to make participant contributions or to receive employer contributions under this Plan.

Effective April 16, 2018, the Plan was amended to allow Elyria OH union employees to become eligible to make participant contributions and receive employer contributions as the Elyria OH collective bargaining agreement requires participation in the Plan.

Participant Contributions

Participants may contribution up to 100% of eligible compensation on a pre-tax or after-tax basis, or a combination of both. All contributions are subject to Internal Revenue Code ("IRC") annual calendar year limitations. Participants direct the investment of their contributions into various investment options offered by the Plan. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans, which are reflected as rollover contributions in the Statements of Changes in Net Assets Available for Benefits. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions to the Plan.

Automatic Deferrals

Eligible participants are automatically enrolled in the Plan at a deferral rate equal to 2% of eligible compensation. Deferrals begin on the first day of the first full payroll period beginning on, or immediately after, 30 days after the participant's entry date. The participant can affirmatively elect to opt out of the Plan or change the deferral percentage. A participant's automatic deferrals are invested in the Plan's default investment fund, unless the participant elects otherwise.

Employer Contributions

For non-union participants, the Employer makes enhanced employer contributions under a tiered rate structure of up to 6% of each participant's eligible compensation. The Employer match is based off a tiered rate structure as defined in the plan document as follows:

Elective Deferral Percentage	0 up to 1%	More than 1 up to 2%	More than 2 up to 3%	More than 3 up to 6%
Matching Rate	200%	150%	100%	50%

For union participants, the Employer makes a uniform contribution equal to 100% of each participant's elective deferrals, up to 4% of the participant's eligible compensation.

Eligibility for the employer contributions, for both non-union and union participants, requires one year of service.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Employer contribution and (b) Plan earnings or losses from the participant-directed investments and charged with an allocation of administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Vesting

Participants are immediately vested in their contributions as well as employer contributions, plus actual earnings thereon.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the vested balance in the participant's account and bear an interest rate at the prime lending rate of Wells Fargo at the date of the loan plus 1%. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the loan is used to purchase a primary residence, in which case, the loans may be repaid within fifteen years. Participants may only have one loan outstanding at any time.

Benefit Payments

On termination of service due to death, disability, or retirement, a participant may elect to receive a lump sum amount equal to the value of the participant's vested interest in his or her account. Distributions and withdrawals from the Plan are governed by applicable Internal Revenue Service ("IRS") regulations and provisions of ERISA. Penalties may apply in certain instances. Participants may also receive in-service withdrawals from the Plan once they have attained age 59½ or if they are able to demonstrate a severe financial need (hardship withdrawal), subject to certain provisions in the Plan Document. A participant's deferrals are suspended for six months after each hardship withdrawal.

Forfeitures

Forfeitures of non-vested accounts are first used to offset plan expenses and/or restore previously forfeited account balances, if necessary, and any remaining forfeitures are used to reduce Employer contributions. During the Plan years ended December 31, 2018 and December 31, 2017, no forfeitures were available to offset plan expenses or to pay Employer matching contributions. There were no unallocated forfeiture account balances as of December 31, 2018 and 2017, respectively.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to certain participant transactions, such as participant loan fees and certain distributions, are charged directly to the participant and are included in administrative expenses. Investment related expenses are included in net appreciation (depreciation) of fair value of investments. Certain administrative functions are performed by officers or employees of BakeMark. No such officers or employees receive compensation from the Plan.

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. Upon termination of the Plan, the net assets of the Plan would be distributed to the participants and beneficiaries of the Plan as soon as practical.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Use of Estimates

The preparation of financial statements, in conformity with U.S. GAAP, requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits, and changes therein, and disclosures of contingent assets and liabilities. Actual results could materially differ from those estimates.

Net Appreciation (Depreciation) in Fair Value of Investments

Realized and unrealized appreciation (depreciation) in fair value of investments is based on the difference between the fair value of the assets at the beginning of the year or at the time of purchase for assets purchased during the year and the related fair value on the day investments are sold with respect to realized appreciation (depreciation) and on the last day of the year with respect to unrealized appreciation (depreciation).

Realized and unrealized appreciation (depreciation) is recorded in the accompanying Statements of Changes in Net Assets Available for Benefits as net appreciation (depreciation) in fair value of investments.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the amount 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 4 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Notes Receivable from Participants

Notes receivable from participants are reported at their unpaid principal balance plus any accrued (but unpaid) interest and interest are received through payroll deductions and the notes are collateralized by the participants' account balances. Related fees are recorded as administrative expenses and are expenses when they are incurred. No allowance for credit losses has been recorded as of December 31, 2018 and 2017. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be a deemed distribution, the participant loan balance is reduced, and a benefit payment is recorded.

Benefit Payments to Participants

Benefit distributions and withdrawals are recorded upon payment. There were no amounts owed to current or terminated participants as of December 31, 2018 and 2017.

Risk and Uncertainties

The Plan provides for various investment options in a variety of investment securities. Investment securities are exposed to various risks, such as interest rate risk, financial market risk and credit risk. Due to the level of risk associated with 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 participant's account balances and the amounts reported in the Plan's financial statements.

The Plan's exposure to credit loss in the event of nonperformance of investments is limited to the carrying value of such instruments. The Plan's provisions as well as those of ERISA and the participants' investment preferences dictate the Plan's concentration of credit risk and market risk.

The Plan provides investment options that hold securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid, and their prices may be more volatile than those of securities of comparable U.S. companies.

Recently Issued Accounting Standards

In August 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to the Disclosure Requirements for Fair Value Measurement*. ASU 2018-13 amends the disclosure requirements for recurring and nonrecurring fair value measurements by removing, modifying and adding certain disclosures. ASU 2018-13 removes the following disclosures: the amount of and reasons for transfers between Level 1 and Level 2 of the fair value hierarchy; the policy for timing of transfers; the valuation process for Level 3 fair value measurements; and changes in the unrealized gains and losses for the period included in earnings for recurring Level 3 fair value measurements held at the end of the reporting period. The ASU modifies the following disclosure requirements: transfers in and out of Level 3 and purchases and issues of Level 3 assets and liabilities; for investments in certain entities that calculate net asset value, the timing of liquidation of an investee's assets and the date when restrictions from redemption might lapse if timing has been communicated or announced publicly; and clarifies that the measurement uncertainty disclosure is to communicate information about the uncertainty in measurement as of the reporting date. The additional disclosures required under ASU 2018-13 are applicable only for public entities. The ASU is effective for fiscal years beginning after December 15, 2019, with early adoption permitted. Certain amendments of the ASU may be applied prospectively while others should be applied retrospectively to all periods presented upon the effective date. It is permissible to early adopt any removed or modified disclosures and delay adoption of the additional disclosures, if applicable, until the effective date. Plan management is currently evaluating the impact that the ASU will have on the Plan's financial statements.

In July 2018, the FASB issued ASU 2018-09, *Codification Improvements*, ("ASU 2018-09"), which includes amendments to Subtopic 962-325, *Plan Accounting Defined Contribution Pension Plans Investments Other*. The amendment removes the stable value common collective trust fund from the illustrative example to avoid the interpretation that such an investment would never have a readily determinable fair value and, therefore, would always use the net asset value per share practical expedient. Rather, a plan should evaluate whether a readily determinable fair value exists to determine whether those investments may qualify for the practical expedient to measure at net asset value in accordance with ASC 820. The amendment to Subtopic 962-325 is effective for fiscal years beginning after December 15, 2018 using a modified retrospective approach. Plan management is currently evaluating the impact that the ASU will have on the Plan's financial statements.

3. Information Certified by the Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the accompanying financial statements and supplemental schedule, Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) - December 31, 2018 and 2017 are complete and accurate.

December 31,	**2018**	2017
Investments, at fair value:		
Mutual funds	**$ 13,883,686**	$ 12,673,503
Common collective trust funds	**19,222,592**	17,528,185
Notes receivable from participants	**$ 1,265,897**	$ 1,163,385

	Year ended December 31, 2018	Period from October 1, 2017 (inception) to December 31, 2017
Dividend income	**$ 335,419**	$ 240,049
Net (depreciation) appreciation in fair value of investments	**(2,333,579)**	599,728
Interest income on notes receivable from participants	**$ 59,201**	$ 10,423

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information with related information included in the financial statements and supplemental schedule.

4. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

- *Level 1* - Inputs to the valuation methodology are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan can access at the measurement date.

- *Level 2* - Inputs to the valuation methodology include:

  a. Quoted prices for similar assets or liabilities in active markets
  b. Quoted prices for identical or similar assets or liabilities in inactive markets
  c. Inputs other than quoted prices that are observable for the asset or liability
  d. Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

- *Level 3* - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

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

Common collective trust funds - Valued based on the NAV as a practical expedient as reported by the investment manager based on the trust's assets and contractual terms of the underlying investment contracts as of December 31, 2018 and 2017. Participant transactions (purchases and sales) may occur daily. The Plan can redeem these investments daily. There are no unfunded commitments or restrictions on redemptions.

The following fair value hierarchy table presents information about the Plan's investments measured at fair value on a recurring basis as of December 31, 2018 and 2017:

December 31, 2018	Level 1	Level 2	Level 3	Total
Mutual funds	**$ 13,883,686**	**$ -**	**$ -**	**$13,883,686**
Common collective trust funds measured at NAV*	**-**	**-**	**-**	**19,222,592**
Total investments at fair value	**$ 13,883,686**	**$ -**	**$ -**	**$33,106,278**

December 31, 2017	Level 1	Level 2	Level 3	Total
Mutual funds	$ 12,673,503	$ -	$ -	$ 12,673,503
Common collective trust funds measured at NAV*	-	-	-	17,528,185
Total investments at fair value	$ 12,673,503	$ -	$ -	$ 30,201,688

* Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statements of Net Assets Available for Benefits.

5. Tax Status

The Plan is based on the standardized volume submitter plan sponsored by Wells Fargo Bank, N.A. The volume submitter plan received a letter from IRS dated March 31, 2014 that the volume submitter plan is designed in accordance with the provision of the IRC. The Plan management believes that the Plan is designed and being operated in compliance with the applicable requirements of the IRC. Therefore, they believe that the Plan was qualified and the related trust is tax-exempt.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

6. Party-In-Interest Transactions

Certain Plan investments are managed by a company affiliated with Wells Fargo Bank, N.A., the trustee of the Plan. Fee paid by the Plan for investment management services are included as a reduction of the return earned on each investment fund. Such transactions, while considered party-in-interest transactions under ERISA regulations, are permitted under the provision of the Plan and are specifically exempt from the prohibited transaction of party-in-interest transactions under ERISA.

Notes receivable from participants also qualify as party-in-interest transactions.

Administrative expenses represent fees paid by the Plan participants for certain recordkeeping, participant loan and benefit payment transactions, and qualify as party-in-interest transactions. Such administrative fees paid by the Plan to the trustee were $47,596 and $760 for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, respectively.

7. Reconciliation of Financial Statements to Form 5500

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

December 31,	2018	2017
Net assets available for benefits per financial statements	$ 34,491,418	$ 31,405,689
Less: Employer contribution receivable	(119,243)	(40,616)
Net assets available for benefits per Form 5500	$ 34,372,175	$ 31,365,073

The following is a reconciliation of the change in net assets available for benefits between the financial statements and the Form 5500:

	Year ended December 31, 2018	Period from October 1, 2017 (inception) to December 31, 2017
Net increase in net assets available for benefits per financial statements	$ 3,085,729	$ 31,405,689
Less: Net change in accrual of employer contributions receivable	(78,627)	(40,616)
Net increase in net assets available for benefits per Form 5500	$ 3,007,102	$ 31,365,073

8. Non-Exempt Prohibited Transactions

For the Plan year ended December 31, 2018, Plan management failed to remit certain funds, including employee deferrals and loan repayments, aggregating to $331,959, on a timely basis according to DOL regulations. The Employer is in the process of calculating the lost earnings and plans to remit lost earnings to the Plan.

9. Subsequent Events

Effective January 1, 2019, the Plan was amended to modify the Employer's enhanced contribution to remove the tiered rate structure and contribute and amount equal to 100% of each participant's elective deferrals up to 6% of the participant eligible compensation.

Management has evaluated subsequent events through January 9, 2020, the date these financial statements were available to be issued, and has determined that there were no other material events required recognition or disclosure.

Supplemental Schedules

BakeMark **USA LLC 401(k) Plan**

Form 5500, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions

Year Ended December 31, 2018

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

	Participant contributions transferred late to Plan	Total that constitutes Non-exempt Prohibited Transactions			Total fully corrected under VFCP and PTE 2002-51
Year	Check here if late participant loan repayments are included:	Contributions not corrected	Contributions corrected outside VFCP	Contributions pending correction in VFCP	
2018	☑	$ -	$ 331,959	$ -	$ -

See independent auditor's report.

BakeMark USA LLC 401(k) Plan

Form 5500 - Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2018

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Mutual Funds			
	Vanguard Target Retirement Fund	Registered Investment Company	**	$ 598,037
	Vanguard TG Retirement 2015	Registered Investment Company	**	22,872
	Vanguard TG Retirement 2020	Registered Investment Company	**	1,933,896
	Vanguard TG Retirement 2025	Registered Investment Company	**	2,756,479
	Vanguard TG Retirement 2030	Registered Investment Company	**	3,659,902
	Vanguard TG Retirement 2035	Registered Investment Company	**	1,085,612
	Vanguard TG Retirement 2040	Registered Investment Company	**	2,340,553
	Vanguard TG Retirement 2045	Registered Investment Company	**	766,162
	Vanguard TG Retirement 2050	Registered Investment Company	**	720,173
		Total Mutual Funds		13,883,686
	Common Collective Trust Fund			
	AON Hewitt Coll/Core Plus BD	Common Collective Trust	**	1,486,708
	AON Hewitt Coll/GLB RL EST	Common Collective Trust	**	870,377
	AON Hewitt Coll/Large Cap Equity	Common Collective Trust	**	3,710,683
	AON Hewitt Coll/Non-US Equity	Common Collective Trust	**	1,969,651
	AON Hewitt Coll/Ms. & Mid Cap Equity	Common Collective Trust	**	2,026,434
	ST STR BK & TR/RUSSEL SMALL/MID CAP	Common Collective Trust	**	2,435,931
	ST STR BK & TR/SSGA S&P 500 INDEX K	Common Collective Trust	**	2,437,599
*	WF Stable Return Fund N	Common Collective Trust	**	4,285,209
		Total Common Collective Trust Funds		19,222,592
*	Notes receivable from participants	Note receivables from participants maturing through December 2033 bearing interest rates from 4.25% to 9.25% collateralized by participants' account balances		1,265,897
		Total assets		$ 34,372,175

* Indicates parties-in-interest to the Plan as defined by ERISA.

** All investments are participant-directed; therefore, disclosure of cost is not required.

See independent auditor's report.

BakeMark **USA LLC 401(k) Plan**

Form 5500 - Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2017

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Mutual Funds			
	Vanguard Target Retirement Fund	Registered Investment Company	**	$ 480,145
	Vanguard TG Retirement 2015	Registered Investment Company	**	20,355
	Vanguard TG Retirement 2020	Registered Investment Company	**	3,284,699
	Vanguard TG Retirement 2025	Registered Investment Company	**	2,077,867
	Vanguard TG Retirement 2030	Registered Investment Company	**	3,005,202
	Vanguard TG Retirement 2035	Registered Investment Company	**	826,820
	Vanguard TG Retirement 2040	Registered Investment Company	**	1,889,966
	Vanguard TG Retirement 2045	Registered Investment Company	**	629,136
	Vanguard TG Retirement 2050	Registered Investment Company	**	459,313
		Total Mutual Funds		12,673,503
	Common Collective Trust Funds			
	AON Hewitt Coll/Core Plus BD	Common Collective Trust	**	1,302,104
	AON Hewitt Coll/GLB RL EST	Common Collective Trust	**	995,851
	AON Hewitt Coll/Large Cap Equity	Common Collective Trust	**	3,402,001
	AON Hewitt Coll/Non-US Equity	Common Collective Trust	**	2,153,724
	AON Hewitt Coll/Ms. & Mid Cap Equity	Common Collective Trust	**	2,019,250
	ST STR BK & TR/RUSSEL SMALL/MID CAP	Common Collective Trust	**	2,099,025
	ST STR BK & TR/SSGA S&P 500 INDEX K	Common Collective Trust	**	2,064,764
*	WF Stable Return Fund N	Common Collective Trust	**	3,491,466
		Total Common Collective Trust Funds		17,528,185
*	Notes receivable from participants	Note receivables from participants maturing through December 2032 bearing interest rates from 4.25% to 9.25% collateralized by participants' account balances		1,163,385
		Total assets		$ 31,365,073

* Indicates parties-in-interest to the Plan as defined by ERISA.

** All investments are participant-directed; therefore, disclosure of cost is not required.

See independent auditor's report.

BakeMark

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October 11, 2019

Regarding Plan 5500
BakeMark USA LLC
401(K) Plan – 2018

To Whom It May Concern:

BakeMark USA LLC 401(k) Plan (the Plan) is timely filing its Federal Form 5500 utilizing a valid extension on Form 5558. However, the audited financial statements of the Plan for the year ended December 31, 2018 was not able to be completed in time to attach it to this return. The independent auditors are currently awaiting material information necessary to issue their auditor's report. BakeMark USA LLC expects to have the audit report within the next 60 days and BakeMark USA LLC will file an amended Form 5500 as soon as the report is issued.

Sincerely,

Rosemarie Gomez - Director, Human Resources and Plan Administrator

BakeMark USA LLC 401(k) Plan

Financial Statements and Supplemental Schedules

As of December 31, 2018 and 2017 and for the Year Ended December 31, 2018 and for the Period from October 1, 2017 (inception) to December 31, 2017

The report accompanying these financial statements was issued by BDO USA, LLP, a Delaware limited liability partnership and the U.S. member of BDO International Limited, a UK company limited by guarantee.

BakeMark USA LLC 401(k) Plan

Financial Statements
and Supplemental Schedules

As of December 31, 2018, and 2017 and for the
Year Ended December 31, 2018 and for the
Period from October 1, 2017 (inception) to December 31, 2017

BakeMark USA LLC 401(k) Plan

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Note - All schedules other than those listed above have been omitted since the information is either disclosed elsewhere in the financial statements or not required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended.

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Independent Auditor's Report

To the Plan administrator
BakeMark USA LLC
Pico Rivera, California

We were engaged to audit the accompanying financial statements of BakeMark USA LLC 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2018 and 2017, and the related statements of changes in net assets available for benefits for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Wells Fargo Bank N.A. (Wells Fargo), the Trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the Trustee as of December 31, 2018 and 2017, and for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, that the information provided to the Plan administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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

BDO USA, LLP, a Delaware limited liability partnership, is the U.S. member of BDO International Limited, a UK company limited by guarantee, and forms part of the international BDO network of independent member firms.

BDO is the brand name for the BDO network and for each of the BDO Member Firms.

Other Matter

The supplemental schedules, Form 5500, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the year ended December 31, 2018 and Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2018 and 2017 are required by the Department of Labor's (DOL) 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 these supplemental schedules.

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

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

BDO USA, LLP

January 9, 2020

Financial Statements

BakeMark USA LLC 401(k) Plan

Statements of Net Assets Available for Benefits

December 31,	2018	2017
Assets		
Investments, at fair value	$ 33,106,278	$ 30,201,688
Receivables:		
Notes receivable from participants	1,265,897	1,163,385
Employer contributions receivable	119,243	40,616
Total receivables	1,385,140	1,204,001
Total assets	34,491,418	31,405,689
Net assets available for benefits	$ 34,491,418	$ 31,405,689

See accompanying notes to financial statements.

BakeMark USA LLC 401(k) Plan

Statements of Changes in Net Assets Available for Benefits

	Year ended December 31, 2018	Period from October 1, 2017 (inception)to December 31, 2017
Investment income (loss)		
Dividend income	$ 335,419	$ 240,049
Net (depreciation) appreciation in fair value of investments	(2,333,579)	599,728
Net investment (loss) income	(1,998,160)	839,777
Interest income from notes receivable from participants	59,201	10,423
Contributions:		
Participants	3,094,657	571,860
Employer	2,156,322	443,663
Rollover	3,693,703	29,668,898
Total contributions	8,944,682	30,684,421
Total additions	7,005,723	31,534,621
Deductions		
Benefits paid to participants and beneficiaries	3,872,398	128,172
Administrative expenses	47,596	760
Total deductions	3,919,994	128,932
Net increase in net assets available for benefits	3,085,729	31,405,689
Net assets available for benefits, beginning of year	31,405,689	-
Net assets available for benefits, end of year	$ 34,491,418	$ 31,405,689

See accompanying notes to financial statements.

1. Description of Plan

The following description of the BakeMark USA LLC 401(k) Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is designed and is intended to operate as a safe harbor defined contribution plan as defined by the plan document. The Plan covers all eligible employees of BakeMark USA, LLC ("Employer", "Company" or "BakeMark"). The Plan is subject to the provisions of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

The Plan was created effective on October 1, 2017 in connection with the sale of BakeMark by CSM Bakery Solutions, LLC ("CSM Bakery"), which was effective August 14, 2017. During 2018, BakeMark acquired the Elyria OH and Spartanburg locations from CSM Bakery.

Wells Fargo Bank, N.A. ("Wells Fargo" or the "Trustee") is responsible for the custody and management of the Plan's assets while Wells Fargo & Trust Company Institutional Retirement & Trust also provides recordkeeping and administrative services to the Plan.

Plan Administration

The Plan is administered by a fiduciary committee appointed by the Company. The Plan administrator is responsible for the administration of the Plan.

Eligibility

Employees are eligible to participate in the Plan upon hire. Non-resident aliens are not eligible to participate in the Plan. Certain union employees are eligible employees for the purpose of rolling over their former account balances and loans from the CSM NA 401(k) Plan, otherwise, such union employees are excluded employees and not eligible to make participant contributions or to receive employer contributions under this Plan.

Effective April 16, 2018, the Plan was amended to allow Elyria OH union employees to become eligible to make participant contributions and receive employer contributions as the Elyria OH collective bargaining agreement requires participation in the Plan.

Participant Contributions

Participants may contribution up to 100% of eligible compensation on a pre-tax or after-tax basis, or a combination of both. All contributions are subject to Internal Revenue Code ("IRC") annual calendar year limitations. Participants direct the investment of their contributions into various investment options offered by the Plan. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans, which are reflected as rollover contributions in the Statements of Changes in Net Assets Available for Benefits. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions to the Plan.

Automatic Deferrals

Eligible participants are automatically enrolled in the Plan at a deferral rate equal to 2% of eligible compensation. Deferrals begin on the first day of the first full payroll period beginning on, or immediately after, 30 days after the participant's entry date. The participant can affirmatively elect to opt out of the Plan or change the deferral percentage. A participant's automatic deferrals are invested in the Plan's default investment fund, unless the participant elects otherwise.

Employer Contributions

For non-union participants, the Employer makes enhanced employer contributions under a tiered rate structure of up to 6% of each participant's eligible compensation. The Employer match is based off a tiered rate structure as defined in the plan document as follows:

Elective Deferral Percentage	0 up to 1%	More than 1 up to 2%	More than 2 up to 3%	More than 3 up to 6%
Matching Rate	200%	150%	100%	50%

For union participants, the Employer makes a uniform contribution equal to 100% of each participant's elective deferrals, up to 4% of the participant's eligible compensation.

Eligibility for the employer contributions, for both non-union and union participants, requires one year of service.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Employer contribution and (b) Plan earnings or losses from the participant-directed investments and charged with an allocation of administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Vesting

Participants are immediately vested in their contributions as well as employer contributions, plus actual earnings thereon.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the vested balance in the participant's account and bear an interest rate at the prime lending rate of Wells Fargo at the date of the loan plus 1%. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the loan is used to purchase a primary residence, in which case, the loans may be repaid within fifteen years. Participants may only have one loan outstanding at any time.

Benefit Payments

On termination of service due to death, disability, or retirement, a participant may elect to receive a lump sum amount equal to the value of the participant's vested interest in his or her account. Distributions and withdrawals from the Plan are governed by applicable Internal Revenue Service ("IRS") regulations and provisions of ERISA. Penalties may apply in certain instances. Participants may also receive in-service withdrawals from the Plan once they have attained age 59½ or if they are able to demonstrate a severe financial need (hardship withdrawal), subject to certain provisions in the Plan Document. A participant's deferrals are suspended for six months after each hardship withdrawal.

Forfeitures

Forfeitures of non-vested accounts are first used to offset plan expenses and/or restore previously forfeited account balances, if necessary, and any remaining forfeitures are used to reduce Employer contributions. During the Plan years ended December 31, 2018 and December 31, 2017, no forfeitures were available to offset plan expenses or to pay Employer matching contributions. There were no unallocated forfeiture account balances as of December 31, 2018 and 2017, respectively.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to certain participant transactions, such as participant loan fees and certain distributions, are charged directly to the participant and are included in administrative expenses. Investment related expenses are included in net appreciation (depreciation) of fair value of investments. Certain administrative functions are performed by officers or employees of BakeMark. No such officers or employees receive compensation from the Plan.

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. Upon termination of the Plan, the net assets of the Plan would be distributed to the participants and beneficiaries of the Plan as soon as practical.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Use of Estimates

The preparation of financial statements, in conformity with U.S. GAAP, requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits, and changes therein, and disclosures of contingent assets and liabilities. Actual results could materially differ from those estimates.

Net Appreciation (Depreciation) in Fair Value of Investments

Realized and unrealized appreciation (depreciation) in fair value of investments is based on the difference between the fair value of the assets at the beginning of the year or at the time of purchase for assets purchased during the year and the related fair value on the day investments are sold with respect to realized appreciation (depreciation) and on the last day of the year with respect to unrealized appreciation (depreciation).

Realized and unrealized appreciation (depreciation) is recorded in the accompanying Statements of Changes in Net Assets Available for Benefits as net appreciation (depreciation) in fair value of investments.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the amount 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 4 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Notes Receivable from Participants

Notes receivable from participants are reported at their unpaid principal balance plus any accrued (but unpaid) interest and interest are received through payroll deductions and the notes are collateralized by the participants' account balances. Related fees are recorded as administrative expenses and are expenses when they are incurred. No allowance for credit losses has been recorded as of December 31, 2018 and 2017. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be a deemed distribution, the participant loan balance is reduced, and a benefit payment is recorded.

Benefit Payments to Participants

Benefit distributions and withdrawals are recorded upon payment. There were no amounts owed to current or terminated participants as of December 31, 2018 and 2017.

Risk and Uncertainties

The Plan provides for various investment options in a variety of investment securities. Investment securities are exposed to various risks, such as interest rate risk, financial market risk and credit risk. Due to the level of risk associated with 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 participant's account balances and the amounts reported in the Plan's financial statements.

The Plan's exposure to credit loss in the event of nonperformance of investments is limited to the carrying value of such instruments. The Plan's provisions as well as those of ERISA and the participants' investment preferences dictate the Plan's concentration of credit risk and market risk.

The Plan provides investment options that hold securities of foreign companies, which involve special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid, and their prices may be more volatile than those of securities of comparable U.S. companies.

Recently Issued Accounting Standards

In August 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework—Changes to the Disclosure Requirements for Fair Value Measurement*. ASU 2018-13 amends the disclosure requirements for recurring and nonrecurring fair value measurements by removing, modifying and adding certain disclosures. ASU 2018-13 removes the following disclosures: the amount of and reasons for transfers between Level 1 and Level 2 of the fair value hierarchy; the policy for timing of transfers; the valuation process for Level 3 fair value measurements; and changes in the unrealized gains and losses for the period included in earnings for recurring Level 3 fair value measurements held at the end of the reporting period. The ASU modifies the following disclosure requirements: transfers in and out of Level 3 and purchases and issues of Level 3 assets and liabilities; for investments in certain entities that calculate net asset value, the timing of liquidation of an investee's assets and the date when restrictions from redemption might lapse if timing has been communicated or announced publicly; and clarifies that the measurement uncertainty disclosure is to communicate information about the uncertainty in measurement as of the reporting date. The additional disclosures required under ASU 2018-13 are applicable only for public entities. The ASU is effective for fiscal years beginning after December 15, 2019, with early adoption permitted. Certain amendments of the ASU may be applied prospectively while others should be applied retrospectively to all periods presented upon the effective date. It is permissible to early adopt any removed or modified disclosures and delay adoption of the additional disclosures, if applicable, until the effective date. Plan management is currently evaluating the impact that the ASU will have on the Plan's financial statements.

In July 2018, the FASB issued ASU 2018-09, *Codification Improvements*, ("ASU 2018-09"), which includes amendments to Subtopic 962-325, *Plan Accounting Defined Contribution Pension Plans Investments Other*. The amendment removes the stable value common collective trust fund from the illustrative example to avoid the interpretation that such an investment would never have a readily determinable fair value and, therefore, would always use the net asset value per share practical expedient. Rather, a plan should evaluate whether a readily determinable fair value exists to determine whether those investments may qualify for the practical expedient to measure at net asset value in accordance with ASC 820. The amendment to Subtopic 962-325 is effective for fiscal years beginning after December 15, 2018 using a modified retrospective approach. Plan management is currently evaluating the impact that the ASU will have on the Plan's financial statements.

3. Information Certified by the Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the accompanying financial statements and supplemental schedule, Form 5500, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) - December 31, 2018 and 2017 are complete and accurate.

December 31,	**2018**	2017
Investments, at fair value:		
Mutual funds	**$ 13,883,686**	$ 12,673,503
Common collective trust funds	**19,222,592**	17,528,185
Notes receivable from participants	**$ 1,265,897**	$ 1,163,385

	Year ended December 31, 2018	Period from October 1, 2017 (inception) to December 31, 2017
Dividend income	**$ 335,419**	$ 240,049
Net (depreciation) appreciation in fair value of investments	**(2,333,579)**	599,728
Interest income on notes receivable from participants	**$ 59,201**	$ 10,423

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information with related information included in the financial statements and supplemental schedule.

4. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

- *Level 1* - Inputs to the valuation methodology are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan can access at the measurement date.

- *Level 2* - Inputs to the valuation methodology include:

  a. Quoted prices for similar assets or liabilities in active markets
  b. Quoted prices for identical or similar assets or liabilities in inactive markets
  c. Inputs other than quoted prices that are observable for the asset or liability
  d. Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

- *Level 3* - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

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

Common collective trust funds - Valued based on the NAV as a practical expedient as reported by the investment manager based on the trust's assets and contractual terms of the underlying investment contracts as of December 31, 2018 and 2017. Participant transactions (purchases and sales) may occur daily. The Plan can redeem these investments daily. There are no unfunded commitments or restrictions on redemptions.

The following fair value hierarchy table presents information about the Plan's investments measured at fair value on a recurring basis as of December 31, 2018 and 2017:

December 31, 2018	Level 1	Level 2	Level 3	Total
Mutual funds	**$ 13,883,686**	**$ -**	**$ -**	**$13,883,686**
Common collective trust funds measured at NAV*	**-**	**-**	**-**	**19,222,592**
Total investments at fair value	**$ 13,883,686**	**$ -**	**$ -**	**$33,106,278**

December 31, 2017	Level 1	Level 2	Level 3	Total
Mutual funds	$ 12,673,503	$ -	$ -	$ 12,673,503
Common collective trust funds measured at NAV*	-	-	-	17,528,185
Total investments at fair value	$ 12,673,503	$ -	$ -	$ 30,201,688

* Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statements of Net Assets Available for Benefits.

5. Tax Status

The Plan is based on the standardized volume submitter plan sponsored by Wells Fargo Bank, N.A. The volume submitter plan received a letter from IRS dated March 31, 2014 that the volume submitter plan is designed in accordance with the provision of the IRC. The Plan management believes that the Plan is designed and being operated in compliance with the applicable requirements of the IRC. Therefore, they believe that the Plan was qualified and the related trust is tax-exempt.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

6. Party-In-Interest Transactions

Certain Plan investments are managed by a company affiliated with Wells Fargo Bank, N.A., the trustee of the Plan. Fee paid by the Plan for investment management services are included as a reduction of the return earned on each investment fund. Such transactions, while considered party-in-interest transactions under ERISA regulations, are permitted under the provision of the Plan and are specifically exempt from the prohibited transaction of party-in-interest transactions under ERISA.

Notes receivable from participants also qualify as party-in-interest transactions.

Administrative expenses represent fees paid by the Plan participants for certain recordkeeping, participant loan and benefit payment transactions, and qualify as party-in-interest transactions. Such administrative fees paid by the Plan to the trustee were $47,596 and $760 for the year ended December 31, 2018 and for the period from October 1, 2017 (inception) to December 31, 2017, respectively.

7. Reconciliation of Financial Statements to Form 5500

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

December 31,	2018	2017
Net assets available for benefits per financial statements	$ 34,491,418	$ 31,405,689
Less: Employer contribution receivable	(119,243)	(40,616)
Net assets available for benefits per Form 5500	$ 34,372,175	$ 31,365,073

The following is a reconciliation of the change in net assets available for benefits between the financial statements and the Form 5500:

	Year ended December 31, 2018	Period from October 1, 2017 (inception) to December 31, 2017
Net increase in net assets available for benefits per financial statements	$ 3,085,729	$ 31,405,689
Less: Net change in accrual of employer contributions receivable	(78,627)	(40,616)
Net increase in net assets available for benefits per Form 5500	$ 3,007,102	$ 31,365,073

8. Non-Exempt Prohibited Transactions

For the Plan year ended December 31, 2018, Plan management failed to remit certain funds, including employee deferrals and loan repayments, aggregating to $331,959, on a timely basis according to DOL regulations. The Employer is in the process of calculating the lost earnings and plans to remit lost earnings to the Plan.

9. Subsequent Events

Effective January 1, 2019, the Plan was amended to modify the Employer's enhanced contribution to remove the tiered rate structure and contribute and amount equal to 100% of each participant's elective deferrals up to 6% of the participant eligible compensation.

Management has evaluated subsequent events through January 9, 2020, the date these financial statements were available to be issued, and has determined that there were no other material events required recognition or disclosure.

Supplemental Schedules

BakeMark **USA LLC 401(k) Plan**

Form 5500, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions

Year Ended December 31, 2018

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

	Participant contributions transferred late to Plan	Total that constitutes Non-exempt Prohibited Transactions			Total fully corrected under VFCP and PTE 2002-51
Year	Check here if late participant loan repayments are included:	Contributions not corrected	Contributions corrected outside VFCP	Contributions pending correction in VFCP	
2018	☑	$ -	$ 331,959	$ -	$ -

See independent auditor's report.

BakeMark USA LLC 401(k) Plan

Form 5500 - Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2018

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Mutual Funds			
	Vanguard Target Retirement Fund	Registered Investment Company	**	$ 598,037
	Vanguard TG Retirement 2015	Registered Investment Company	**	22,872
	Vanguard TG Retirement 2020	Registered Investment Company	**	1,933,896
	Vanguard TG Retirement 2025	Registered Investment Company	**	2,756,479
	Vanguard TG Retirement 2030	Registered Investment Company	**	3,659,902
	Vanguard TG Retirement 2035	Registered Investment Company	**	1,085,612
	Vanguard TG Retirement 2040	Registered Investment Company	**	2,340,553
	Vanguard TG Retirement 2045	Registered Investment Company	**	766,162
	Vanguard TG Retirement 2050	Registered Investment Company	**	720,173
		Total Mutual Funds		13,883,686
	Common Collective Trust Fund			
	AON Hewitt Coll/Core Plus BD	Common Collective Trust	**	1,486,708
	AON Hewitt Coll/GLB RL EST	Common Collective Trust	**	870,377
	AON Hewitt Coll/Large Cap Equity	Common Collective Trust	**	3,710,683
	AON Hewitt Coll/Non-US Equity	Common Collective Trust	**	1,969,651
	AON Hewitt Coll/Ms. & Mid Cap Equity	Common Collective Trust	**	2,026,434
	ST STR BK & TR/RUSSEL SMALL/MID CAP	Common Collective Trust	**	2,435,931
	ST STR BK & TR/SSGA S&P 500 INDEX K	Common Collective Trust	**	2,437,599
*	WF Stable Return Fund N	Common Collective Trust	**	4,285,209
		Total Common Collective Trust Funds		19,222,592
*	Notes receivable from participants	Note receivables from participants maturing through December 2033 bearing interest rates from 4.25% to 9.25% collateralized by participants' account balances		1,265,897
		Total assets		$ 34,372,175

* Indicates parties-in-interest to the Plan as defined by ERISA.

** All investments are participant-directed; therefore, disclosure of cost is not required.

See independent auditor's report.

BakeMark **USA LLC 401(k) Plan**

Form 5500 - Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

December 31, 2017

Employer Identification Number: 95-2755319
Plan Number: 001
Form Number: 5500

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Mutual Funds			
	Vanguard Target Retirement Fund	Registered Investment Company	**	$ 480,145
	Vanguard TG Retirement 2015	Registered Investment Company	**	20,355
	Vanguard TG Retirement 2020	Registered Investment Company	**	3,284,699
	Vanguard TG Retirement 2025	Registered Investment Company	**	2,077,867
	Vanguard TG Retirement 2030	Registered Investment Company	**	3,005,202
	Vanguard TG Retirement 2035	Registered Investment Company	**	826,820
	Vanguard TG Retirement 2040	Registered Investment Company	**	1,889,966
	Vanguard TG Retirement 2045	Registered Investment Company	**	629,136
	Vanguard TG Retirement 2050	Registered Investment Company	**	459,313
		Total Mutual Funds		12,673,503
	Common Collective Trust Funds			
	AON Hewitt Coll/Core Plus BD	Common Collective Trust	**	1,302,104
	AON Hewitt Coll/GLB RL EST	Common Collective Trust	**	995,851
	AON Hewitt Coll/Large Cap Equity	Common Collective Trust	**	3,402,001
	AON Hewitt Coll/Non-US Equity	Common Collective Trust	**	2,153,724
	AON Hewitt Coll/Ms. & Mid Cap Equity	Common Collective Trust	**	2,019,250
	ST STR BK & TR/RUSSEL SMALL/MID CAP	Common Collective Trust	**	2,099,025
	ST STR BK & TR/SSGA S&P 500 INDEX K	Common Collective Trust	**	2,064,764
*	WF Stable Return Fund N	Common Collective Trust	**	3,491,466
		Total Common Collective Trust Funds		17,528,185
*	Notes receivable from participants	Note receivables from participants maturing through December 2032 bearing interest rates from 4.25% to 9.25% collateralized by participants' account balances		1,163,385
		Total assets		$ 31,365,073

* Indicates parties-in-interest to the Plan as defined by ERISA.

** All investments are participant-directed; therefore, disclosure of cost is not required.

See independent auditor's report.