FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington.	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB AF	PROVAL
OMB Number:	3235-0362

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	16. Form 4 or ons may contin		ANNUAL STATEMENT OF CHANGES IN BENEFICIA						CIA	AL OMB Number:				35-0362				
Instructi	on 1(b).		OWNERSHIP						Estimated average burden hours per response:			1.0						
Form 3	Holdings Repo	rted.	="			40/			·· - ·		(1001			L				
Form 4	Transactions R	eported.	FIIE		n 30(h)	of the	Invest	ment C	ompany Ad									
1		Reporting Person*		2. Issuer I WORK					g Symbol				elationship ck all app		orting I	Person(s) to	o Issue	er
Behar J	erome M			WOR	XI VII	1110	2 L ***	IX J					Direct	tor		X 10%	6 Own	er
(Last)	(Fir	et) (M	Middle)			Issuer'	s Fisca	ıl Year I	Ended (Mo	nth/Day/`	Year)		Office below	er (give t	title	Oth belo	er (spe ow)	ecify
` ′	•	BOULEVARD	viidaic)	12/31/20	016									,			,	
				4. If Amer	ndment	. Date	of Origi	inal File	ed (Month/[Dav/Year	,	6. Inc	dividual or	Joint/G	Froup F	iling (Chec	k Appli	cable
(Street)						, Date	o. og.		5a (zaj, roa.	´	Line)				•	• •	oub.o
AMES	IA	5	0010									X	Form	filed by		Reporting P than One R		ng
(City)	(Sta	ate) (7	Zip)	`								21	Perso	on				
(0.13)	(0			rativo Sac	itic		auira	d Di	onocod	of or l	Ronofie	المام	, Owns	.d				
1 Title of Se	curity (Instr. 3		e I - Non-Deriv	2A. Deemed		3.	quire	1	sposeu curities Acq						6.		7 Not	ure of
1. Title of Se	curity (msu. s)	Date (Month/Day/Year)	Execution I			action (Instr.		(Instr. 3, 4		oi Dispos	5. Amount of Securities Beneficially			Ownership Form: Direct		Indire Benef	ct
			,	(Month/Day	/Year)	8)				(A) or			Owned at end of			O) or Owners		rship
								Amou	nt	(A) (I) (D)	(A) or (D) Price		Year (Instr. 3 and 4)		d (Ins	(Instr. 4)		
																		Behar
Class A C	ommon Sto	ck	08/22/2016			(3	2,150		D	\$0		4,165,775					ng t ⁽¹⁾
										\vdash				\longrightarrow				
Class A C	ommon Sto	ck	12/12/2016				G		40	D \$		\$0 4,16		65,735				Behar ng
																		t ⁽¹⁾
																		Behar
Class A C	ommon Sto	ck	12/13/2016				j.		180	D	\$0		4,16	5,555		I	Livi	
													2.005		I By son			
Class A C	ommon Sto	ck										3,065			I		on	
		Та	ble II - Derivat (e.g. pi	ive Secui uts, calls,									Owned					
1. Title of	2.	3. Transaction	3A. Deemed	4.	_				cisable and	_		Ť	Price of	9. Num	ber of	10.	11	. Nature
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any	Transaction Code (Instr.	of Deriv	ative	Expira	ation Da th/Day/\	ate	Amou Secur	nt of ities	De Se	erivative ecurity	derivati Securit	ive ies	Ownersh Form:	ip of Be	Indirect eneficial
(Instr. 3)	Price of Derivative		(Month/Day/Year)	8)	Securities Acquired		Underlying Derivative		ative	' (Benefic Owned	•	Direct (D	rect (D) Ownersh Indirect (Instr. 4)			
	Security				(A) of (D)	osed				and 4	ity (Instr.	3		Followi Reporte Transac	eď	(I) (Instr.	4)	
						. 3, 4								(Instr. 4				
						ĺ				+	Amoun	nt						
									F		or Numbe	er						
					(A)	(D)	Date Exerc	isable	Expiration Date	Title	of Shares	· _						
1		Reporting Person*																
Behar J	erome M																	
(Last)		(Eirot)	(Middle)															
(Last) 2900 UN		(First) BOULEVARD	(Middle)															
2500 011.	, LICOII I	LOCAL VIIID																

1. Name and Address of Behar Jerome N		
(Last)	(First)	(Middle)
2900 UNIVERSIT	Y BOULEVARD	
(Street)		
AMES	IA	50010
(City)	(State)	(Zip)
1. Name and Address of Behar Leslie F.	of Reporting Person*	
(Last)	(First)	(Middle)
2900 UNIVERSIT	Y BOULEVARD	
(Street)		
AMES	IA	50010

(City)	(State)	(Zip)	
1. Name and Add	dress of Reporting Personing Trust	ı*	
(Last) 2900 UNIVE	(First) RSITY BOULEVAR	(Middle)	
(Street) AMES	IA	50010	
(City)	(State)	(Zip)	

Explanation of Responses:

1. Shares are owned directly by The Behar Living Trust (a 10% owner of the issuer), and indirectly by Jerome M. Behar and Leslie F. Behar as settlors of the Behar Living Trust.

Remarks

/s/ Jerome M. Behar as trustee
for The Behar Living Trust
/s/ Leslie Fried Behar
/s/ Jerome M. Behar
** Signature of Reporting Person
Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.