

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 6047(e), 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 2009
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information		
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>			
A This return/report is for:	☒ a multiemployer plan;	☐ a multiple-employer plan; or	
	☐ a single-employer plan;	☐ a DFE (specify) ____	
B This return/report is:	☐ the first return/report;	☐ the final return/report;	
	☐ an amended return/report;	☐ a short plan year return/report (less than 12 months).	
C If the plan is a collectively-bargained plan, check here.	☒		
D Check box if filing under:	☒ Form 5558;	☐ automatic extension;	☐ the DFVC program;
	☐ special extension (enter description)		

Part II	Basic Plan Information —enter all requested information		
1a Name of plan <u>OHIO AND VICINITY REGIONAL COUNCIL OF CARPENTERS- SOUTHWEST RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ►	<u>001</u>	
	1c Effective date of plan	<u>05/01/2001</u>	
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>BOARD OF TRUSTEES OHIO AND VICINITY REGIONAL COUNCIL</u> <u>33 FITCH BOULEVARD</u> <u>AUSTINTOWN, OH 44515</u>	2b Employer Identification Number (EIN) <u>34-1965854</u>		
	2c Sponsor's telephone number <u>330-530-2841</u>		
	2d Business code (see instructions) <u>238100</u>		

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/08/2010</u>	<u>HERB ADAMS</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") BOARD OF TRUSTEES OHIO AND VICINITY REGIONAL COUNCIL 33 FITCH BOULEVARD AUSTINTOWN, OH 44515		3b Administrator's EIN 34-1965854
		3c Administrator's telephone number 330-530-2841
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5	3622
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	3839
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	0
d Subtotal. Add lines 6a , 6b , and 6c	6d	3839
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	3839
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	3553
h Number of participants that 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	232
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2E		

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2009
		This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan OHIO AND VICINITY REGIONAL COUNCIL OF CARPENTERS- SOUTHWEST RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OHIO AND VICINITY REGIONAL COUNCIL		D Employer Identification Number (EIN) 34-1965854

Part I	Service Provider Information (see instructions)
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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)..... ☐ 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

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

SHUMAKER, LOOP & KENDRICK, LLP

34-4439491

(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?
29 50	NONE	15034	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COMPENSATION PROGRAMS OF OHIO

34-1787882

(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?
13 50	NONE	14400	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLARK, SCHAEFER, HACKETT & CO.

31-0800053

(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?
10 50	NONE	13534	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHIFF, KREIDLER-SHELL INC.

31-0493450

(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?
22 50	NONE	5048	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.

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan OHIO AND VICINITY REGIONAL COUNCIL OF CARPENTERS- SOUTHWEST RETIREMENT PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES OHIO AND VICINITY REGIONAL COUNCIL	D Employer Identification Number (EIN) 34-1965854	

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	85640	115288
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	100445	79066
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	6234	7956
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	156725	22560
(2) U.S. Government securities.....	1c(2)	402596	0
(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)	1091250	1084860
(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)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(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)	1536873	2971711
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(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	3379763	4281441

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	8014	12071
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	8014	12071

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	3371749	4269370
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	516170	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		516170

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	791	
(B) U.S. Government securities	2b(1)(B)	9952	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		10743

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	25142	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	80377	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		105519

(3) Rents	2b(3)		
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2061027	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2168920	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-107893

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	303667	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		303667
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		262183
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1090389

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	138283	
(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)		138283
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)	33013	
(2) Contract administrator fees	2i(2)	14400	
(3) Investment advisory and management fees	2i(3)	811	
(4) Other	2i(4)	6261	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		54485
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		192768

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		897621
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

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

(1) Name: CLARK, SCHAEFER, HACKETT & CO.

(2) EIN: 38-0800053

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 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 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.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		250000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		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.			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount:

- 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)

INDEPENDENT AUDITORS' REPORT

Board of Trustees
Ohio and Vicinity Regional Council of Carpenters –
Southwest Retirement Plan

We have audited the accompanying statements of net assets available for benefits of the Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan as of December 31, 2009 and 2008 and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's trustees. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan as of December 31, 2009 and 2008, and the changes in its net assets available for benefits for the years then ended, in conformity with accounting principles generally accepted in the United States of America.

Our audits of the Plan's financial statements were conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedules, as listed in the accompanying table of contents, as of and for the year ended December 31, 2009 are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplemental schedules have been subjected to the auditing procedures applied in the audit of the basic financial statements as of and for the year ended December 31, 2009 and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Clark, Schaefer, Hackett & Co.

Dayton, Ohio
September 23, 2010

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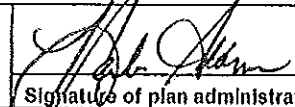
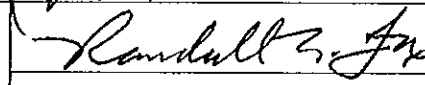
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4085 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 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 1210-0069 2009 This Form Is Open to Public Inspection
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Part I Annual Report Identification Information			
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>			
A This return/report is for:	☒ a multiemployer plan; ☐ a single-employer plan;	☐ a multiple-employer plan; or ☐ a DFE (specify) ____	
B This return/report is:	☐ the first return/report; ☐ an amended return/report;	☐ the final return/report; ☐ a short plan year return/report (less than 12 months).	
C If the plan is a collectively-bargained plan, check here:	☒		
D Check box if filing under:	☒ Form 5558; ☐ special extension (enter description)	☐ automatic extension;	☐ the DFVC program;

Part II Basic Plan Information—enter all requested information			
1a Name of plan OHIO AND VICINITY REGIONAL COUNCIL OF CARPENTERS-- SOUTHWEST RETIREMENT PLAN	1b Three-digit plan number (PN)	<u>001</u>	
	1c Effective date of plan	<u>05/01/2001</u>	
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) BOARD OF TRUSTEES OHIO AND VICINITY REGIONAL COUNCIL 33 FITCH BOULEVARD AUSTINTOWN OH 44515	2b Employer Identification Number (EIN) 34-1965854	2c Sponsor's telephone number (330) 530-2841	2d Business code (see instructions) 238100

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		10/6/2010	HERB ADAMS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/5/2010	RANDALL FOX
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") SAME		3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5	3,622
6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		
a Active participants.....	6a	3,839
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	0
d Subtotal. Add lines 6a, 6b, and 6c.....	6d	3,839
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e.....	6f	3,839
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	3,553
h Number of participants that 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	232
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2E		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:		

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information - Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan

Financial Statements

December 31, 2009 and 2008

with Independent Auditors' Report

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INDEPENDENT AUDITORS' REPORT

Board of Trustees
Ohio and Vicinity Regional Council of Carpenters –
Southwest Retirement Plan

We have audited the accompanying statements of net assets available for benefits of the Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan as of December 31, 2009 and 2008 and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's trustees. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan as of December 31, 2009 and 2008, and the changes in its net assets available for benefits for the years then ended, in conformity with accounting principles generally accepted in the United States of America.

Our audits of the Plan's financial statements were conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedules, as listed in the accompanying table of contents, as of and for the year ended December 31, 2009 are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplemental schedules have been subjected to the auditing procedures applied in the audit of the basic financial statements as of and for the year ended December 31, 2009 and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Clark, Schaefer, Hackett & Co.

Dayton, Ohio
September 23, 2010

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Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
Assets:		
Investments at fair value:		
Money market funds	\$ 22,560	156,725
U.S. Government securities	-	402,596
Registered investment companies	2,971,711	1,536,873
Equity securities	<u>1,084,860</u>	<u>1,091,250</u>
	4,079,131	3,187,444
Other assets:		
Cash	115,288	85,640
Accrued interest and dividends	7,956	6,234
Employer contributions receivable	<u>79,066</u>	<u>100,445</u>
	<u>4,281,441</u>	<u>3,379,763</u>
Liabilities:		
Accounts payable	<u>12,071</u>	<u>8,014</u>
Net assets available for benefits	<u><u>\$ 4,269,370</u></u>	<u><u>3,371,749</u></u>

See accompanying notes to financial statements.

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
Investment income (loss):		
Net investment earnings (loss)	\$ 574,219	(779,233)
Investment expense	<u>811</u>	<u>11,180</u>
	573,408	(790,413)
Employer contributions, net of reciprocity	<u>516,170</u>	<u>593,891</u>
	<u>1,089,578</u>	<u>(196,522)</u>
Benefits paid to participants	138,283	124,283
Administrative fees	14,400	14,400
Other administrative expenses	<u>39,274</u>	<u>47,446</u>
	<u>191,957</u>	<u>186,129</u>
Net change	897,621	(382,651)
Net assets available for benefits:		
Beginning of year	<u>3,371,749</u>	<u>3,754,400</u>
End of year	<u><u>\$ 4,269,370</u></u>	<u><u>3,371,749</u></u>

See accompanying notes to financial statements.

1. DESCRIPTION OF THE PLAN:

The following brief description of the Ohio and Vicinity Regional Council of Carpenters – Southwest Retirement Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution pension plan covering employees of those employers who have agreed to make the required employer contributions to the Plan under the terms of a collective bargaining agreement with the Ohio and Vicinity Regional Council of Carpenters. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The contributing employers are primarily located in Southwest Ohio. Therefore, the Plan is affected by the economic conditions of the region.

Contributions

In accordance with the collective bargaining agreement, employers are required to make monthly contributions at a fixed dollar amount for each hour worked by participants. No participant contributions to the Plan are permitted.

Participant accounts

Each participant's account is credited with employer's contributions and allocations of plan earnings and is 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 vested account.

Vesting

Participation in the Plan begins on the first day of the month that follows the period during which at least 500 hours are worked during an eligibility period. The initial eligibility period is based on the 12-month period following the inception of work for a contributing employer and is measured on a plan year basis thereafter. Participants are 100 percent vested in the contributions made on their behalf during any period in which eligibility is obtained. Contributions made on behalf of participants who do not obtain sufficient work hours during an eligibility period are forfeited (permanently lost). Forfeited account balances are redistributed among the remaining participants. During the years ended December 31, 2009 and 2008, \$2,837 and \$7,920, respectively, of forfeitures were redistributed among remaining participants.

Payment of benefits

Upon termination of service (whether due to retirement, death, disability, or other termination of employment), a participant is entitled to the full value of his or her account, payable in a lump sum.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

The following are the significant accounting policies of the Plan:

Basis of accounting

The financial statements of the Plan are prepared using the accrual method of accounting.

Investment valuation and income recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date, see Note 5 for discussion of fair value measurements.

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

Payment of benefits

Benefit payments to participants are recorded upon distribution.

Estimates

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

Subsequent events

The Plan evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements consider events through September 23, 2010, the date on which the financial statements were available to be issued.

3. PLAN TERMINATION:

In the event the Plan is terminated, any obligations of the Plan would be paid and all remaining net assets would be distributed to participants in the manner specified in the Plan Document.

4. INVESTMENTS:

The Plan's investments are held by a bank under a custodial arrangement. Purchases and sales of securities are authorized by an independent manager under investment policy guidelines established by the Plan.

	<u>2009</u>	<u>2008</u>
Interest from cash and cash equivalents, money market, and debt investments	\$ 10,743	57,288
Dividends from equity investments	25,142	88,645
Unrealized appreciation (depreciation) from debt and equity investments held at year end:		
U.S. Government securities	(30,993)	10,448
Equity securities	334,660	(258,114)
	303,667	(247,666)
Realized depreciation from investments sold during the year	(107,893)	(353,941)
Net earnings (loss) from registered investment companies	342,560	(323,559)
Net investment earnings (loss)	\$ 574,219	(779,233)

The fair value of individual investments that represent 5% or more of the Plan's net assets at December 31, 2009 and 2008 are as follows:

	<u>2009</u>	<u>2008</u>
Ishares TR S&P 500 Index Fund	334,312	**
Blackrock Total Return Portfolio II	862,239	598,035
Vanguard Bond Index Fund	834,681	382,872
US Treasury Note - 4.375%, due December 15, 2010	**	402,596

** – Investment balance did not exceed threshold required for reporting.

5. FAIR VALUE MEASUREMENTS:

Accounting principles generally accepted in the United States of America for *Fair Value Measurements and Disclosure*, establish a framework for measuring fair value. That framework 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 and the lowest priority to unobservable inputs.

The three levels of the fair value hierarchy are described below:

Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2: Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- 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 term (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

Following is a description of the valuation methodologies used for assets measured at fair value:

Common stocks and U.S. government securities: Valued at the closing price reported on the active market on which the individual securities are traded.

Registered investment companies: Valued at the net asset value of the shares held by the plan at year end.

There have been no changes in the methodologies used at December 31, 2009 and 2008.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan's Trustees believe that the valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the fair values of investment securities will occur in the near term and, that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Ohio and Vicinity Regional Council of Carpenters –
Southwest Retirement Plan
Notes to Financial Statements
Years Ended December 31, 2009 and 2008

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009:

<u>Fair Value Measurements at Reporting Date Using</u>				
<u>Description</u>	<u>12/31/09</u>	<u>Quoted Prices In Active Markets for Identical Assets (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Unobservable Inputs (Level 3)</u>
Money market funds	\$ 22,560	22,560	-	-
Equity securities:				
Consumer discretionary	92,313	92,313	-	-
Consumer staples	103,397	103,397	-	-
Energy	114,679	114,679	-	-
Financial	162,424	162,424	-	-
Health care	137,541	137,541	-	-
Industrials	115,085	115,085	-	-
Information technology	244,402	244,402	-	-
Materials	51,054	51,054	-	-
Telecommunication services	28,028	28,028	-	-
Utilities	35,937	35,937	-	-
Registered investment companies:				
Large Cap - Index	334,312	334,312	-	-
Mid Cap - Growth	89,941	89,941	-	-
Mid Cap - Value	86,938	86,938	-	-
Small Cap - Growth	44,829	44,829	-	-
Small Cap - Value	41,658	41,658	-	-
Foreign Equity	415,514	415,514	-	-
Short-term bond	145,232	145,232	-	-
Inflation protected bond	116,367	116,367	-	-
Intermediate-term bond	1,696,920	1,696,920	-	-
	<u>\$ 4,079,131</u>	<u>4,079,131</u>	<u>-</u>	<u>-</u>

Ohio and Vicinity Regional Council of Carpenters –
Southwest Retirement Plan
Notes to Financial Statements
Years Ended December 31, 2009 and 2008

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2008:

<u>Description</u>	<u>12/31/08</u>	<u>Fair Value Measurements at Reporting Date Using</u>		
		<u>Quoted Prices In Active Markets for Identical Assets (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Unobservable Inputs (Level 3)</u>
Money market funds	\$ 156,725	156,725	-	-
Equity securities	1,091,250	1,091,250		
U.S. Government securities	402,596	402,596		
Registered investment companies	<u>1,536,873</u>	<u>1,536,873</u>	<u>-</u>	<u>-</u>
	<u>\$ 3,187,444</u>	<u>3,187,444</u>	<u>-</u>	<u>-</u>

6. TAX STATUS:

The Plan has received a favorable letter of determination from the Internal Revenue Service dated September 20, 2002, indicating that on the basis of the facts supplied, the Plan as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan was amended and restated effective January 1, 2009. The amended and restated Plan document has been submitted to the Internal Revenue Service to determine that it is qualified under section 401(a) of the Internal Revenue Code. As of the issuance of the financial statements the plan has not received a response. However, the plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with Section 401(a) of the Internal Revenue Code.

The Plan adopted the new standard for *Accounting for Uncertainty in Income Taxes* on January 1, 2009. This new standard clarifies the accounting and recognition for income tax positions taken or expected to be taken by the Plan. However, the plan administrator and the Plan's tax counsel believe that the Plan has no income subject to income tax. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan's annual filings are subject to audit by various taxing authorities. The Plan's open audit periods are for 2006 – 2009. The Plan believes its estimates are appropriate based on current facts and circumstances.

SUPPLEMENTAL SCHEDULES

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
* Investment Manager: PNC Institutional Investments				
Money market fund:				
	BLACKROCK LIQUIDITY TEMP FUND	22,560	\$ 22,559.72	22,559.72
Equity securities:				
	ABB LTD	352	7,311.66	6,723.20
	AT&T INC	598	15,863.28	16,761.94
	ABBOT LABORATORIES	229	11,863.56	12,363.71
	ALLERGAN INC	99	5,214.97	6,237.99
	AMERICAN ELECTRIC POWER INC	262	8,411.98	9,114.98
	AMERICAN EXPRESS CO	237	6,299.32	9,603.24
	AMERICAN TOWER CORP CL A	161	5,883.82	6,956.81
	AMGEN INC	89	5,230.85	5,034.73
	APACHE CORPORATION	87	7,020.91	8,975.79
	APPLE INC	143	20,120.27	30,134.68
	BANK OF AMERICA CORP	452	6,240.55	6,807.12
	BAXTER INTERNATIONAL INC	127	8,613.82	7,452.36
	BRISTOL MYERS SQUIBB CO	489	10,143.64	12,347.25
	BROADCOM CORP	197	4,989.56	6,199.59
	BROCADE COMMUNICATIONS SYS	712	5,303.40	5,432.56
	BUCKRUS INTNL INC	103	4,953.03	5,806.11
	CSX CORP	120	4,947.35	5,818.80
	CAMERON INTL CORP	144	6,017.04	6,019.20
	CAPITAL ONE FINANCIAL CORP.	135	5,315.31	5,175.90
	CELANESE CORP - SERIES A	266	5,185.14	8,538.60
	CELGENE CORP	160	9,084.73	8,908.80
	CENTURYTEL INC	119	3,755.61	4,308.99
	CHEVRON CORPORATION	309	22,464.58	23,789.91
	CISCO SYSTEMS	861	19,792.61	20,612.34
	COACH INC	217	5,508.67	7,927.01
	COCA COLA CO	248	12,537.70	14,136.00
	COLGATE-PALMOLIVE CO	98	7,136.85	8,050.70
	COOPER INDUSTRIES PLC	121	5,347.98	5,159.44
	COMCAST CORPORATION CL A	265	4,290.51	4,467.90
	CORNING INC	411	5,748.57	7,936.41
	CUMMINS INC	145	6,962.02	6,649.70
	DENTSPLY INTERNATIONAL INC	179	6,990.91	6,295.43
	DOLBY LABORATORIES INC CL A	253	9,496.65	12,075.69
	DOLLAR TREE	95	3,633.77	4,588.50
	DOW CHEMICAL CO	183	4,931.50	5,056.29
	EMC CORP	334	5,265.09	5,834.98
	EBAY INC	445	8,628.07	10,470.85
	EXXON MOBIL CORP	451	34,485.05	30,753.69
	FEDEX CORPORATION	67	5,273.13	5,591.15
	FORD MOTOR COMPANY	497	4,473.50	4,970.00
	FOSTER WHEELER AG	149	5,264.72	4,386.56
	FRANKLIN RESOURCES INC	109	9,953.48	11,483.15
	FREEMPORT MCMORAN COPPER & GOLD INC	162	8,147.28	13,006.98
	GENERAL ELECTRIC CO	807	11,052.41	12,209.91
	GENERAL MILLS INC	240	15,053.45	16,994.40
	GILEAD SCIENCES	157	8,259.68	6,793.39
	GOLDCORP INC	100	4,579.27	3,934.00
	GOLDMAN SACHS GROUP INC	112	14,390.14	18,910.08

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
	GOOGLE INC CL A	30	10,030.58	18,599.40
	HESS CORPORATION	155	8,144.39	9,377.50
	HOME DEPOT INC	390	9,850.12	11,282.70
	ITT CORPORATION	159	8,703.03	7,908.66
	ILLINOIS TOOL WORKS INC	163	7,865.42	7,822.37
	INTEL CORP	951	19,869.77	19,400.40
	INTERNATIONAL BUSINESS MACHINES	252	28,547.80	32,986.80
	INVESCO LTD	220	5,038.48	5,167.80
	INTERNATIONAL PAPER CO	234	4,596.87	6,266.52
	JPMORGAN CHASE & CO	526	18,216.02	21,918.42
	JOHNSON & JOHNSON	161	10,902.22	10,370.01
	JOHNSON CONTROLS INC	294	7,703.26	8,008.56
	KOHL'S CORP	240	10,985.04	12,943.20
	MASTERCARD INC	28	6,032.12	7,167.44
	MCKESSON CORPORATION	105	5,045.16	6,562.50
	MEDCO HEALTH SOLUTIONS INC	108	4,288.64	6,902.28
	MERCK & CO INC	419	13,520.13	15,310.26
	METLIFE INC	217	8,131.00	7,670.95
	MICROSOFT CORP	838	22,724.93	25,542.24
	NYSE EURONEXT	153	4,466.78	3,870.90
	NOBLE CORPORATION	298	8,556.91	12,128.60
	NSTAR	130	4,495.87	4,784.00
	OCCIDENTAL PETROLEUM CORP	117	8,302.36	9,517.95
	ORACLE CORP	379	8,261.46	9,296.87
	PPG INDUSTRIES	83	5,029.98	4,858.82
	PARTNERRE LTD	63	5,049.60	4,703.58
	PEPSICO INC	148	9,913.77	8,998.40
	PFIZER INC	433	7,782.06	7,876.27
	PHILIP MORRIS INTERNATIONAL	349	17,337.86	16,818.31
	POLO RALPH LAUREN CORP	73	5,741.66	5,911.54
	PRAXAIR INC	66	5,511.55	5,300.46
	PRICE T ROWE GROUP INC	233	10,480.02	12,407.25
	PRICELINE.COM INC	36	3,309.64	7,862.76
	PROCTER & GAMBLE CO	177	11,734.10	10,731.51
	PUBLIC STORAGE	66	4,592.09	5,375.70
	QUALCOMM INC	290	14,775.68	13,415.40
	QUEST DIAGNOSTICS INC	121	6,797.42	7,305.98
	QUESTAR CORP	132	3,582.90	5,487.24
	RIO TINTO PLC	19	4,154.56	4,092.41
	ROCKWELL AUTOMATION INC	279	11,423.09	13,107.42
	ROSS STORES INC	148	5,384.33	6,321.08
	SCHLUMBERGER LTD	86	7,505.98	5,597.74
	SCRIPPS NETWORKS INTERACTIVE CL A	135	5,130.20	5,602.50
	SHIRE PLC	106	4,636.88	6,222.20
	JM SMUCKER CO	101	5,392.15	6,236.75
	SYNOPTIS INC	254	5,183.21	5,659.12
	TALISMAN ENERGY INC	457	6,608.41	8,518.48
	THERMO FISHER SCIENTIFIC INC	139	6,227.81	6,628.91
	3M COMPANY	175	12,351.23	14,467.25
	TIFFANY & CO	131	5,617.10	5,633.00
	THE TRAVELERS COS INC	100	5,126.41	4,986.00
	US BANCORP	374	9,071.47	8,418.74
	UNITED TECHNOLOGIES CORP	280	17,151.64	19,434.80

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
	VIACOM INC CLASS B	493	11,915.24	14,656.89
	VISA INC	81	5,674.45	7,084.26
	WAL-MART STORES INC	256	14,624.98	13,683.20
	WALGREEN CO	211	8,109.38	7,747.92
	WELLPOINT INC	106	4,417.76	6,178.74
	WELLS FARGO CO & CO	803	21,368.62	21,672.97
	WESTERN DIGITAL CORP	143	5,155.23	6,313.45
	WILLIAMS COMPANIES INC	258	5,052.23	5,438.64
	WISCONSIN ENERGY CORP	223	9,176.66	11,112.09
	ZIMMER HOLDINGS INC	91	4,424.31	5,379.01
	Total equity securities		<u>974,237.41</u>	<u>1,084,859.93</u>
	Registered investment companies:			
	ARTISAN FUNDS INC INTERNATIONAL FUND	7,151.60	157,758.48	147,752.04
	BARON ASSET FUND	1,946.36	102,077.57	89,941.30
	BARON SMALL CAP FUND	2,327.57	47,684.14	44,828.90
	BLACKROCK TOTAL RETURN PORTFOLIO II	95,698.01	857,201.36	862,239.08
	BLACKROCK INTNL OPPORTUNITIES	1,299.61	39,621.85	41,132.78
	BLACKROCK INFLATION PROTECTED	10,794.69	111,700.71	116,366.74
	DODGE & COX INTERNATIONAL STOCK FUND	4,561.56	151,025.14	145,285.78
	ISHARES TR S&P 500 INDEX FUND	2,990.00	336,255.49	334,311.90
	ISHARES BARCLAYS 1-3 YEAR CREDIT BOND	1,397.00	144,929.79	145,232.12
	PERKINS MID CAP VALUE FUND	4,390.79	65,435.58	86,937.68
	THIRD AVE TR SMALL CAP VALUE FUND	2,290.17	39,921.74	41,658.21
	VANGUARD BOND INDEX FUND	80,645.48	822,433.90	834,680.74
	VANGUARD EMERGING MARKETS STOCK	1,984.00	68,937.39	81,344.00
			<u>2,944,983.14</u>	<u>2,971,711.27</u>
	Total managed by PNC Institutional Investments		<u>\$ 3,941,780.27</u>	<u>4,079,130.92</u>

* Party-in-interest

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
Year Ended December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4j - Schedule of Reportable Transactions

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Party Involved	Description of Asset	Purchase Price	Selling Price	Cost	Current Value on Transaction Date	Gain (Loss)
<i>Category i - Single Transactions in Excess of 5 Percent of Net Assets</i>						
* PNC	Blackrock Liquidity Temp Fund Sales	\$ -	182,221	182,221	182,221	-
* PNC	US Treasury Note 4.375% Due 12/15/10 Sales	\$ -	394,247	371,604	394,247	22,643
* PNC	Vanguard Bond Index Fund Purchases	\$ 205,000	-	205,000	205,000	-
<i>Category iii - Series of Transactions in Excess of 5 Percent of Net Assets</i>						
* PNC	Blackrock Total Return Portfolio II Purchases	\$ 208,990	-	208,990	208,990	-
* PNC	Blackrock Liquidity Temp Fund Purchases	\$ 351,777	-	351,777	351,777	-
	Sales	-	485,942	485,942	485,942	-
* PNC	Vanguard Bond Index Fund Purchases	\$ 473,408	-	473,408	473,408	-
	Sales	-	35,000	34,974	35,000	26

* Party-in-interest

There were no reportable category ii or iv transactions for the year ended December 31, 2009.

Note: "Reportable transactions" are defined in Section 2520.103-6 of the Department of Labor's Regulations.

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
* Investment Manager: PNC Institutional Investments				
Money market fund:				
	BLACKROCK LIQUIDITY TEMP FUND	22,560	\$ 22,559.72	22,559.72
Equity securities:				
	ABB LTD	352	7,311.66	6,723.20
	AT&T INC	598	15,863.28	16,761.94
	ABBOT LABORATORIES	229	11,863.56	12,363.71
	ALLERGAN INC	99	5,214.97	6,237.99
	AMERICAN ELECTRIC POWER INC	262	8,411.98	9,114.98
	AMERICAN EXPRESS CO	237	6,299.32	9,603.24
	AMERICAN TOWER CORP CL A	161	5,883.82	6,956.81
	AMGEN INC	89	5,230.85	5,034.73
	APACHE CORPORATION	87	7,020.91	8,975.79
	APPLE INC	143	20,120.27	30,134.68
	BANK OF AMERICA CORP	452	6,240.55	6,807.12
	BAXTER INTERNATIONAL INC	127	8,613.82	7,452.36
	BRISTOL MYERS SQUIBB CO	489	10,143.64	12,347.25
	BROADCOM CORP	197	4,989.56	6,199.59
	BROCADE COMMUNICATIONS SYS	712	5,303.40	5,432.56
	BUCKRUS INTNL INC	103	4,953.03	5,806.11
	CSX CORP	120	4,947.35	5,818.80
	CAMERON INTL CORP	144	6,017.04	6,019.20
	CAPITAL ONE FINANCIAL CORP.	135	5,315.31	5,175.90
	CELANESE CORP - SERIES A	266	5,185.14	8,538.60
	CELGENE CORP	160	9,084.73	8,908.80
	CENTURYTEL INC	119	3,755.61	4,308.99
	CHEVRON CORPORATION	309	22,464.58	23,789.91
	CISCO SYSTEMS	861	19,792.61	20,612.34
	COACH INC	217	5,508.67	7,927.01
	COCA COLA CO	248	12,537.70	14,136.00
	COLGATE-PALMOLIVE CO	98	7,136.85	8,050.70
	COOPER INDUSTRIES PLC	121	5,347.98	5,159.44
	COMCAST CORPORATION CL A	265	4,290.51	4,467.90
	CORNING INC	411	5,748.57	7,936.41
	CUMMINS INC	145	6,962.02	6,649.70
	DENTSPLY INTERNATIONAL INC	179	6,990.91	6,295.43
	DOLBY LABORATORIES INC CL A	253	9,496.65	12,075.69
	DOLLAR TREE	95	3,633.77	4,588.50
	DOW CHEMICAL CO	183	4,931.50	5,056.29
	EMC CORP	334	5,265.09	5,834.98
	EBAY INC	445	8,628.07	10,470.85
	EXXON MOBIL CORP	451	34,485.05	30,753.69
	FEDEX CORPORATION	67	5,273.13	5,591.15
	FORD MOTOR COMPANY	497	4,473.50	4,970.00
	FOSTER WHEELER AG	149	5,264.72	4,386.56
	FRANKLIN RESOURCES INC	109	9,953.48	11,483.15
	FREEMPORT MCMORAN COPPER & GOLD INC	162	8,147.28	13,006.98
	GENERAL ELECTRIC CO	807	11,052.41	12,209.91
	GENERAL MILLS INC	240	15,053.45	16,994.40
	GILEAD SCIENCES	157	8,259.68	6,793.39
	GOLDCORP INC	100	4,579.27	3,934.00
	GOLDMAN SACHS GROUP INC	112	14,390.14	18,910.08

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
	GOOGLE INC CL A	30	10,030.58	18,599.40
	HESS CORPORATION	155	8,144.39	9,377.50
	HOME DEPOT INC	390	9,850.12	11,282.70
	ITT CORPORATION	159	8,703.03	7,908.66
	ILLINOIS TOOL WORKS INC	163	7,865.42	7,822.37
	INTEL CORP	951	19,869.77	19,400.40
	INTERNATIONAL BUSINESS MACHINES	252	28,547.80	32,986.80
	INVESCO LTD	220	5,038.48	5,167.80
	INTERNATIONAL PAPER CO	234	4,596.87	6,266.52
	JPMORGAN CHASE & CO	526	18,216.02	21,918.42
	JOHNSON & JOHNSON	161	10,902.22	10,370.01
	JOHNSON CONTROLS INC	294	7,703.26	8,008.56
	KOHL'S CORP	240	10,985.04	12,943.20
	MASTERCARD INC	28	6,032.12	7,167.44
	MCKESSON CORPORATION	105	5,045.16	6,562.50
	MEDCO HEALTH SOLUTIONS INC	108	4,288.64	6,902.28
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	METLIFE INC	217	8,131.00	7,670.95
	MICROSOFT CORP	838	22,724.93	25,542.24
	NYSE EURONEXT	153	4,466.78	3,870.90
	NOBLE CORPORATION	298	8,556.91	12,128.60
	NSTAR	130	4,495.87	4,784.00
	OCCIDENTAL PETROLEUM CORP	117	8,302.36	9,517.95
	ORACLE CORP	379	8,261.46	9,296.87
	PPG INDUSTRIES	83	5,029.98	4,858.82
	PARTNERRE LTD	63	5,049.60	4,703.58
	PEPSICO INC	148	9,913.77	8,998.40
	PFIZER INC	433	7,782.06	7,876.27
	PHILIP MORRIS INTERNATIONAL	349	17,337.86	16,818.31
	POLO RALPH LAUREN CORP	73	5,741.66	5,911.54
	PRAXAIR INC	66	5,511.55	5,300.46
	PRICE T ROWE GROUP INC	233	10,480.02	12,407.25
	PRICELINE.COM INC	36	3,309.64	7,862.76
	PROCTER & GAMBLE CO	177	11,734.10	10,731.51
	PUBLIC STORAGE	66	4,592.09	5,375.70
	QUALCOMM INC	290	14,775.68	13,415.40
	QUEST DIAGNOSTICS INC	121	6,797.42	7,305.98
	QUESTAR CORP	132	3,582.90	5,487.24
	RIO TINTO PLC	19	4,154.56	4,092.41
	ROCKWELL AUTOMATION INC	279	11,423.09	13,107.42
	ROSS STORES INC	148	5,384.33	6,321.08
	SCHLUMBERGER LTD	86	7,505.98	5,597.74
	SCRIPPS NETWORKS INTERACTIVE CL A	135	5,130.20	5,602.50
	SHIRE PLC	106	4,636.88	6,222.20
	JM SMUCKER CO	101	5,392.15	6,236.75
	SYNOPSYS INC	254	5,183.21	5,659.12
	TALISMAN ENERGY INC	457	6,608.41	8,518.48
	THERMO FISHER SCIENTIFIC INC	139	6,227.81	6,628.91
	3M COMPANY	175	12,351.23	14,467.25
	TIFFANY & CO	131	5,617.10	5,633.00
	THE TRAVELERS COS INC	100	5,126.41	4,986.00
	US BANCORP	374	9,071.47	8,418.74
	UNITED TECHNOLOGIES CORP	280	17,151.64	19,434.80

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4i - Schedule of Assets (Held at End of Year)

(a)	(b)	(c)	(d)	(e)
	<u>Identity of Issue</u>	<u>Principal Amount/Shares</u>	<u>Cost</u>	<u>Current Value</u>
	VIACOM INC CLASS B	493	11,915.24	14,656.89
	VISA INC	81	5,674.45	7,084.26
	WAL-MART STORES INC	256	14,624.98	13,683.20
	WALGREEN CO	211	8,109.38	7,747.92
	WELLPOINT INC	106	4,417.76	6,178.74
	WELLS FARGO CO & CO	803	21,368.62	21,672.97
	WESTERN DIGITAL CORP	143	5,155.23	6,313.45
	WILLIAMS COMPANIES INC	258	5,052.23	5,438.64
	WISCONSIN ENERGY CORP	223	9,176.66	11,112.09
	ZIMMER HOLDINGS INC	91	4,424.31	5,379.01
	Total equity securities		<u>974,237.41</u>	<u>1,084,859.93</u>
	Registered investment companies:			
	ARTISAN FUNDS INC INTERNATIONAL FUND	7,151.60	157,758.48	147,752.04
	BARON ASSET FUND	1,946.36	102,077.57	89,941.30
	BARON SMALL CAP FUND	2,327.57	47,684.14	44,828.90
	BLACKROCK TOTAL RETURN PORTFOLIO II	95,698.01	857,201.36	862,239.08
	BLACKROCK INTNL OPPORTUNITIES	1,299.61	39,621.85	41,132.78
	BLACKROCK INFLATION PROTECTED	10,794.69	111,700.71	116,366.74
	DODGE & COX INTERNATIONAL STOCK FUND	4,561.56	151,025.14	145,285.78
	ISHARES TR S&P 500 INDEX FUND	2,990.00	336,255.49	334,311.90
	ISHARES BARCLAYS 1-3 YEAR CREDIT BOND	1,397.00	144,929.79	145,232.12
	PERKINS MID CAP VALUE FUND	4,390.79	65,435.58	86,937.68
	THIRD AVE TR SMALL CAP VALUE FUND	2,290.17	39,921.74	41,658.21
	VANGUARD BOND INDEX FUND	80,645.48	822,433.90	834,680.74
	VANGUARD EMERGING MARKETS STOCK	1,984.00	68,937.39	81,344.00
			<u>2,944,983.14</u>	<u>2,971,711.27</u>
	Total managed by PNC Institutional Investments		<u>\$ 3,941,780.27</u>	<u>4,079,130.92</u>

* Party-in-interest

Ohio and Vicinity Regional Council of Carpenters -
Southwest Retirement Plan
Year Ended December 31, 2009
EIN #34-1965854; PLAN #001
Schedule H - Item 4j - Schedule of Reportable Transactions

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Party Involved	Description of Asset	Purchase Price	Selling Price	Cost	Current Value on Transaction Date	Gain (Loss)
<i>Category i - Single Transactions in Excess of 5 Percent of Net Assets</i>						
* PNC	Blackrock Liquidity Temp Fund Sales	\$ -	182,221	182,221	182,221	-
* PNC	US Treasury Note 4.375% Due 12/15/10 Sales	\$ -	394,247	371,604	394,247	22,643
* PNC	Vanguard Bond Index Fund Purchases	\$ 205,000	-	205,000	205,000	-
<i>Category iii - Series of Transactions in Excess of 5 Percent of Net Assets</i>						
* PNC	Blackrock Total Return Portfolio II Purchases	\$ 208,990	-	208,990	208,990	-
* PNC	Blackrock Liquidity Temp Fund Purchases	\$ 351,777	-	351,777	351,777	-
	Sales	-	485,942	485,942	485,942	-
* PNC	Vanguard Bond Index Fund Purchases	\$ 473,408	-	473,408	473,408	-
	Sales	-	35,000	34,974	35,000	26

* Party-in-interest

There were no reportable category ii or iv transactions for the year ended December 31, 2009.

Note: "Reportable transactions" are defined in Section 2520.103-6 of the Department of Labor's Regulations.