Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ **Complete all entries in accordance with the instructions to the Form 5500.**	**2013** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
AMERICAN FAN COMPANY 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1988

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)

AMERICAN FAN COMPANY

2933 SYMMES RD
FAIRFIELD, OH 45014

2b Employer Identification Number (EIN) 31-0780524

2c Sponsor's telephone number 513-874-2400

2d Business code (see instructions) 333410

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.	07/07/2014	JOHN TINSLEY
	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

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address	**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:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	180
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**	154
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	22
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	176
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	176
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	160
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	4
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 3H

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).	2013
Department of Labor Employee Benefits Security Administration	▶ **File as an attachment to Form 5500.**	**This Form is Open to Public Inspection.**
Pension Benefit Guaranty Corporation		

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
AMERICAN FAN COMPANY 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN FAN COMPANY

D Employer Identification Number (EIN)
31-0780524

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	33591	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

FLEMING, BROCKSCHMIDT & DURKIN PLL

31-0781110

(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?
16	CONSULTANT	7654	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALZGI NFJ DIV VL ADM - BOSTON FINA	330 W. 9TH STREET KANSAS CITY, MO 66160	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DAVIS NY VENTURE A - BOSTON FINANC	330 W. 9TH STREET KANSAS CITY, MO 66160	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS INTL GROWTH R5 - INVESCO INVE	11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
KEELEY SMALL CAP VAL - US BANCORP 39-0281260	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LAUD INTL MKTMSTR I - BOSTON FINAN 330 W. 9TH STREET KANSAS CITY, MO 66160	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MAINSTAY LGCP GR R1 - NYLIM SERVIC 52-2206685	0.35%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MSIF MID CAP GRTH A - BOSTON FINAN	330 W. 9TH STREET KANSAS CITY, MO 66160	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NORTHERN SM CAP VAL - NORTHERN TRU 36-2723087		0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ROYCE VALUE PLUS SER - BOSTON FINA	P.O. BOX 8480 BOSTON, MA 02266	0.45%

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VIRTUS MID-CAP VAL A - VIRTUS FUND 06-0847856	0.50%

(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

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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

(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)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service	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).	**2013**
Department of Labor Employee Benefits Security Administration	▶ **File as an attachment to Form 5500.**	**This Form is Open to Public Inspection**
Pension Benefit Guaranty Corporation		

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
AMERICAN FAN COMPANY 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN FAN COMPANY

D Employer Identification Number (EIN)
31-0780524

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	45694	49895
(2) Participant contributions	1b(2)	0	9902
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	237268	236215
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	237751	233079
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	9088673	10992681
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	9609386	11521772
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	9609386	11521772

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)	262111	
(B) Participants	2a(1)(B)	571300	
(C) Others (including rollovers)	2a(1)(C)	69167	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		902578
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	24	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	9323	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		9347
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	339007	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		339007
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1235417
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		2486349

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	511427	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		511427
f Corrective distributions (see instructions)	2f		20480
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	42056	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		42056
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		573963

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		1912386
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: FLEMING BROCKSCHIMIDT & DURKIN **(2)** EIN: 31-0781110

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
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)

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

Part V Trust Information (optional)

6a Name of trust	**6b** Trust's EIN

SCHEDULE R (Form 5500)	Retirement Plan 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 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.**	**2013** **This Form is Open to Public Inspection.**

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
AMERICAN FAN COMPANY 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMERICAN FAN COMPANY

D Employer Identification Number (EIN)
31-0780524

Part I Distributions

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

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

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

EIN(s): 04-6568107 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

Part II Funding Information

(If the plan is not subject to the minimum funding requirements of section of 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): _____

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):

FLEMING,
BROCKSCHMIDT
& DURKIN PLL
Certified Public Accountants

Financial Statements

American Fan Company
401(k) Plan

December 31, 2013 and 2012

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FLEMING,
BROCKSCHMIDT
& DURKIN PLL
Certified Public Accountants

Independent Auditor's Report

To the American Fan Company 401(k) Plan and Participants:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the American Fan Company 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described 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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2013 and 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

30 Garfield Place, Suite 540, Cincinnati, Ohio 45202-4366
Telephone (513) 721-7590, Fax (513) 721-4155
www.fbd-cpa.com

Disclaimer of Opinion

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

Other Matter

The supplemental schedule of Schedule of Assets (Held at End of Year), is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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

Fleming, Brockschmidt & Durkin PLL

Fleming, Brockschmidt & Durkin PLL

Cincinnati, Ohio
June 19, 2014

AMERICAN FAN COMPANY 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2013 and 2012

ASSETS

	2013	2012
INVESTMENTS, at fair value		
Mutual funds	$ 10,992,680	$ 9,088,673
Money market fund	236,216	237,268
Total investments	11,228,896	9,325,941
RECEIVABLES		
Employer's contribution	49,895	45,694
Participants contributions	9,902	-0-
Notes receivable from participants	233,079	237,751
Total receivables	292,876	283,445
NET ASSETS AVAILABLE FOR BENEFITS	$ 11,521,772	$ 9,609,386

See accompanying notes.

AMERICAN FAN COMPANY 401(K) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years ended December 31, 2013 and 2012

	2013	2012
ADDITIONS		
Investment Income		
Net appreciation in fair value of investments	$ 1,235,479	$ 754,928
Interest income	24	27
Dividend income	338,946	229,064
	1,574,449	984,019
Interest Income on Notes Receivable from Participants	9,323	10,481
Contributions		
Participant contributions	571,300	584,624
Employer contributions	262,111	257,180
Rollover contributions	69,167	2,634
	902,578	844,438
Total additions	2,486,350	1,838,938
DEDUCTIONS		
Benefits paid to participants	531,908	552,363
Administrative expenses	42,056	1,675
Total deductions	573,964	554,038
Net increase	1,912,386	1,284,900
NET ASSETS AVAILABLE FOR BENEFITS,		
Beginning of Year	9,609,386	8,324,486
End of Year	$ 11,521,772	$ 9,609,386

See accompanying notes.

NOTE 1 - DESCRIPTION OF PLAN

The following description of the American Fan Company ("the Company") 401(k) Plan ("the Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan covering employees of the Company who have completed ninety days of service and are age nineteen or older as defined in the plan document. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan consists of three participant groups. Group A are those employees of American Fan Company in Fairfield, Ohio and those of Fan Group, Inc. non-union employees hired after February 1, 2002. Group B employees are former Asea Brown Boveri Garden City Fan non-union employees hired before February 1, 2002. Group C employees are former Asea Brown Boveri Garden City Fan union employees hired before February 1, 2002.

Contributions - Participants from all three groups may contribute a portion of gross annual compensation on a before-tax and after-tax basis subject to the limitations imposed by the Internal Revenue Code. The Company provides a matching contribution of 100% of participant contributions up to 3% of the participant's compensation for Groups A&B. The Company may also make a discretionary contribution for those non-highly compensated Group A employees as a percentage of participant's compensation at the option of the Company's Board of Directors. Group B non-highly compensated employees also receive a contribution equal to 3.7% of their annual pay.

Participant Accounts - Participant contributions and the matching Company contributions are recorded during the period in which the related compensation is earned. Each participant's account is credited with the participant's voluntary contribution, the Company's matching contribution and a proportionate share of the Plan's earnings. Employees self-direct investment selections from a number of available mutual funds. The Plan's earnings credited to participant accounts are based on the proportion that the balance of each participant's account invested in an investment fund bears to the total of all participants accounts invested in that investment fund.

Vesting - Participants are immediately vested in their contributions and the related earnings. Vesting in the Company's matching and discretionary contribution occurs over a three-year service period based on a graduated scale of 50% after two years and 100% after three years.

Notes Receivable from Participants - Participants may borrow up to 50% of their vested account balance, up to $ 50,000 maximum. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 6.50%, which are comparable to commercial loans of similar risk and terms, during 2013 and 2012. Principal and interest is paid ratably through payroll deductions.

NOTE 1 – DESCRIPTION OF PLAN - CONTINUED

Payment of Benefits – Benefits are payable to participants upon disability, retirement, death, or termination of employment from the Plan. The participants may elect to either receive a lump sum distribution or rollover the balance into another qualified plan. Withdrawals may also be made in the event of "financial hardship" defined as expenses to allow participants to purchase a principal residence, pay post-secondary education expenses or medical expenses of the participant or participant's spouse, child or dependents or to prevent eviction from the participant's primary residence.

Forfeited Accounts – Forfeited balances of terminated participants' non-vested accounts are used first to pay administrative expenses and then to reduce future Company contributions. During the years ended December 31, 2013 and 2012, $ -0- of forfeitures were used to reduce Company contributions. Administrative expenses of $ 7,654 and $ -0- were paid out of the forfeiture account during the years ended December 31, 2013 and 2012, respectively.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – The financial statements of the Plan are prepared using the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of changes in net assets available for benefits during the reporting period. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition – Investments, consisting of mutual funds, are recorded at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and disposals of investments are recorded on a trade date basis. Dividends are recorded on the ex-dividend date and interest is recorded on the accrual basis. The Plan presents in the statements of changes in net assets available for benefits, the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains and losses and the unrealized appreciation (depreciation) on those investments.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payments of Benefits – Benefits are recorded when authorized and paid.

Administrative Expenses – Administrative expenses of the Plan not paid by the Company are paid out of the assets of the Plan in accordance with ERISA. Administrative expenses include the preparation of the Form 5500, compliance testing, consulting, recordkeeping, documenting, updates, and investment management and advisory.

Date of Management's Review – Subsequent events were evaluated through June 19, 2014, which is the date the financial statements were available to be issued.

NOTE 3 – FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the 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 (level 1 measurements) and lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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 (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 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. There have been no changes in the methodologies used at December 31, 2013 and 2012.

- *Mutual and money market funds*. Valued at the net asset value of shares held by the plan at year-end.

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

NOTE 3 – FAIR VALUE MEASUREMENTS - CONTINUED

The following table sets forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2013 and 2012:

Fair Value Measurements at December 31, 2013

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Large cap equity funds	$ 3,189,628	$	$	$ 3,189,628
Mid cap equity funds	784,909			784,909
Small cap equity funds	737,610			737,610
International equity funds	842,946			842,946
Bond funds	1,676,044			1,676,044
Blended large cap fund	833,638			833,638
Blended lifecycle funds	2,927,905			2,927,905
Total mutual funds	10,992,680	-0-	-0-	10,992,680
Money market fund	236,216	-0-	-0-	236,216
Total assets at fair value	$ 11,228,896	$ -0-	$ -0-	$ 11,228,896

Fair Value Measurements at December 31, 2012

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Large cap equity funds	$ 383,263	$	$	$ 383,263
Mid cap equity funds	423,078			423,078
Small cap equity funds	244,696			244,696
International equity funds	238,333			238,333
Bond funds	1,001,719			1,001,719
Blended large cap fund	25,699			25,699
Blended lifecycle funds	6,771,885			6,771,885
Total mutual funds	9,088,673	-0-	-0-	9,088,673
Money market fund	237,268	-0-	-0-	237,268
Total assets at fair value	$ 9,325,941	$ -0-	$ -0-	$ 9,325,941

NOTE 4 – INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

The plan administrator has elected the method of compliance 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. Accordingly, as permitted under such election, the plan administrator instructed the plan's independent auditors not to perform any auditing procedures with respect to the following information certified by Fidelity Management Trust Company, the trustee of the plan, as complete and accurate, except for comparing such information certified by the trustee with information included in the plan's financial statements and supplemental schedules. The following is a summary of the investment information for the years ended December 31, 2013 and 2012.

	2013	2012
Investments, at fair value:		
Mutual funds	$ 10,992,680	$ 9,088,673
Money market fund	236,216	237,268
Investment income:		
Net appreciation (depreciation) in fair value of investments	1,235,479	754,928
Dividends and interest	338,970	229,091
Notes receivable from participants	233,079	237,751
Interest income on notes receivable from participants	9,323	10,481

NOTE 5 – INVESTMENTS

The fair value of individual investments that represent 5% or more of the Plan's net assets available for benefits as of December 31 were as follows:

	2013	2012
Allianz NFJ Dividend Value Fund	$ 1,368,949	$ *
Spartan 500 Index Advantage Fund	1,340,923	*
Invesco International Growth Fund	678,751	*
Fidelity Total Bond Fund	751,158	639,810
Fidelity Balanced Fund	833,638	*
Fidelity Freedom 2015 Fund	*	1,196,170
Fidelity Freedom 2020 Fund	*	2,764,630
Fidelity Freedom 2025 Fund	732,085	1,147,050
Fidelity Freedom 2030 Fund	*	723,281

* Fair value of investment did not equal or exceed 5% of the Plan's net assets available for benefits in the respective Plan year.

NOTE 5 – INVESTMENTS - CONTINUED

During 2013 and 2012, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $ 1,574,449 and $ 984,019, respectively as follows:

	2013	2012
Mutual funds	$ 1,574,425	$ 983,992
Money market fund	24	27
Total investment gain	$ 1,574,449	$ 984,019

NOTE 6 – TAX STATUS

The Plan obtained its latest determination letter dated March 31, 2008, in which the Internal Revenue Service stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would be sustained upon examination by the federal taxing authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 7 – PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, all amounts credited to participant accounts will be fully vested and will be paid to the participants. In case of a partial termination, only those affected will become 100% vested.

NOTE 8 – PLAN LIABILITIES

The plan owed excess contributions of approximately $ 4,077 and $ 18,646 as of December 31, 2013 and 2012, respectively. In accordance with generally accepted accounting principles, these amounts have not been accrued at year-end.

NOTE 9 – PARTY-IN-INTEREST TRANSACTIONS

Party-in-interest transactions are defined under the Department of Labor regulations as any fiduciary of the Plan, any party rendering services to the Plan, the employer and certain others. As of December 31, 2013 and 2012, certain investments include mutual funds and a money market fund sponsored by Fidelity Investments, an affiliate of Fidelity Management and a Trust Company. Fidelity Management Trust Company is the Plan trustee and, therefore, these investments qualify as party-in-interest investments. During 2013 and 2012, the Plan paid administrative fees to Fidelity Management Trust Company of $ 2,537 and $ 1,675, respectively. Beginning in 2013, the Plan's investments are managed by an investment advisor, Retirement Corporation of America (RCA). The Plan paid investment advisory and management fees of $ 31,866 to RCA during 2013. Participant loans also qualify as party-in-interest transactions.

NOTE 10 – RISKS AND UNCERTAINTIES

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

SUPPLEMENTAL SCHEDULE

AMERICAN FAN COMPANY 401(K) PLAN
EIN No.: 31-0780524
Plan No.: 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost **	(e) Current Value ***
*	Fidelity Retirement Money Market Fund	Money Market Fund (236,216 shares)		$ 236,216
	MSIF Mid Cap Growth Fund	Mutual Fund (2,352 shares)		101,977
	Davis New York Venture Fund	Mutual Fund (1,213 shares)		50,236
	Northern Small Cap Value Fund	Mutual Fund (2,020 shares)		41,988
	Keeley Small Cap Value Fund	Mutual Fund (5,607 shares)		215,218
	Laudus International MarketMasters Inv Fund	Mutual Fund (6,456 shares)		154,933
	Allianz NFJ Dividend Value Fund	Mutual Fund (85,187 shares)		1,368,949
	Mainstay LGCP Growth Fund	Mutual Fund (41,742 shares)		429,520
	Invesco International Growth Fund	Mutual Fund (19,789 shares)		678,751
	Royce Value Plus Fund	Mutual Fund (28,376 shares)		480,404
	Virtus Mid-Cap Value Fund	Mutual Fund (307 shares)		10,701
*	Fidelity Capital & Income Fund	Mutual Fund (49,984 shares)		492,841
*	Fidelity Leveraged Company Stock Fund	Mutual Fund (12,709 shares)		549,535
*	Fidelity Balanced Fund	Mutual Fund (36,643 shares)		833,638
*	Fidelity Freedom Income Fund	Mutual Fund (4,808 shares)		56,444
*	Fidelity Freedom 2000 Fund	Mutual Fund (2,761 shares)		34,315
*	Fidelity Freedom 2010 Fund	Mutual Fund (18,645 shares)		285,453
*	Fidelity Freedom 2020 Fund	Mutual Fund (28,188 shares)		440,019

SUPPLEMENTAL SCHEDULE

AMERICAN FAN COMPANY 401(K) PLAN
EIN No.: 31-0780524
Plan No.: 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013 (Continued)

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost **	(e) Current Value ***
*	Fidelity Freedom 2030 Fund	Mutual Fund (33,419 shares)		544,727
*	Fidelity Freedom 2040 Fund	Mutual Fund (7,385 shares)		70,308
*	Fidelity Total Bond Fund	Mutual Fund (71,950 shares)		751,158
*	Fidelity Freedom 2005 Fund	Mutual Fund (23,099 shares)		273,723
*	Fidelity Freedom 2015 Fund	Mutual Fund (35,381 shares)		451,113
*	Fidelity Freedom 2025 Fund	Mutual Fund (54,961 shares)		732,085
*	Fidelity Freedom 2035 Fund	Mutual Fund (643 shares)		8,668
*	Spartan Extended Market Index Fund	Mutual Fund (2,297 shares)		122,696
*	Spartan International Index Fund	Mutual Fund (228 shares)		9,262
*	Spartan 500 Index Advantage Fund	Mutual Fund (20,475 shares)		1,340,923
*	Fidelity Freedom 2045 Fund	Mutual Fund (2,183 shares)		23,945
*	Fidelity Freedom 2050 Fund	Mutual Fund (325 shares)		3,587
*	Spartan US Bond Index Fund	Mutual Fund (38,032 shares)		432,045
*	Fidelity Freedom 2055 Fund	Mutual Fund (303 shares)		3,518
*	Participant Loans	Annual interest rates 4.25% - 6.50%		233,079
	Total Investments			$ 11,461,975

* Represents a party-in-interest to the plan.

** Amounts are excluded in accordance with IRS Form 5500 instructions, Schedule H, line 4i, as all assets are participant directed.

*** Information certified as to completeness and accuracy by Fidelity Management Trust Company.

FLEMING,
BROCKSCHMIDT
& DURKIN PLL
Certified Public Accountants

Financial Statements

American Fan Company
401(k) Plan

December 31, 2013 and 2012

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STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS 4

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FLEMING,
BROCKSCHMIDT
& DURKIN PLL
Certified Public Accountants

Independent Auditor's Report

To the American Fan Company 401(k) Plan and Participants:

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the American Fan Company 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described 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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2013 and 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

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Disclaimer of Opinion

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

Other Matter

The supplemental schedule of Schedule of Assets (Held at End of Year), is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

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

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

Fleming, Brockschmidt & Durkin PLL

Fleming, Brockschmidt & Durkin PLL

Cincinnati, Ohio
June 19, 2014

AMERICAN FAN COMPANY 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2013 and 2012

ASSETS

	2013	2012
INVESTMENTS, at fair value		
Mutual funds	$ 10,992,680	$ 9,088,673
Money market fund	236,216	237,268
Total investments	11,228,896	9,325,941
RECEIVABLES		
Employer's contribution	49,895	45,694
Participants contributions	9,902	-0-
Notes receivable from participants	233,079	237,751
Total receivables	292,876	283,445
NET ASSETS AVAILABLE FOR BENEFITS	$ 11,521,772	$ 9,609,386

See accompanying notes.

AMERICAN FAN COMPANY 401(K) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years ended December 31, 2013 and 2012

	2013	2012
ADDITIONS		
Investment Income		
Net appreciation in fair value of investments	$ 1,235,479	$ 754,928
Interest income	24	27
Dividend income	338,946	229,064
	1,574,449	984,019
Interest Income on Notes Receivable from Participants	9,323	10,481
Contributions		
Participant contributions	571,300	584,624
Employer contributions	262,111	257,180
Rollover contributions	69,167	2,634
	902,578	844,438
Total additions	2,486,350	1,838,938
DEDUCTIONS		
Benefits paid to participants	531,908	552,363
Administrative expenses	42,056	1,675
Total deductions	573,964	554,038
Net increase	1,912,386	1,284,900
NET ASSETS AVAILABLE FOR BENEFITS,		
Beginning of Year	9,609,386	8,324,486
End of Year	$ 11,521,772	$ 9,609,386

See accompanying notes.

NOTE 1 - DESCRIPTION OF PLAN

The following description of the American Fan Company ("the Company") 401(k) Plan ("the Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - The Plan is a defined contribution plan covering employees of the Company who have completed ninety days of service and are age nineteen or older as defined in the plan document. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan consists of three participant groups. Group A are those employees of American Fan Company in Fairfield, Ohio and those of Fan Group, Inc. non-union employees hired after February 1, 2002. Group B employees are former Asea Brown Boveri Garden City Fan non-union employees hired before February 1, 2002. Group C employees are former Asea Brown Boveri Garden City Fan union employees hired before February 1, 2002.

Contributions - Participants from all three groups may contribute a portion of gross annual compensation on a before-tax and after-tax basis subject to the limitations imposed by the Internal Revenue Code. The Company provides a matching contribution of 100% of participant contributions up to 3% of the participant's compensation for Groups A&B. The Company may also make a discretionary contribution for those non-highly compensated Group A employees as a percentage of participant's compensation at the option of the Company's Board of Directors. Group B non-highly compensated employees also receive a contribution equal to 3.7% of their annual pay.

Participant Accounts - Participant contributions and the matching Company contributions are recorded during the period in which the related compensation is earned. Each participant's account is credited with the participant's voluntary contribution, the Company's matching contribution and a proportionate share of the Plan's earnings. Employees self-direct investment selections from a number of available mutual funds. The Plan's earnings credited to participant accounts are based on the proportion that the balance of each participant's account invested in an investment fund bears to the total of all participants accounts invested in that investment fund.

Vesting - Participants are immediately vested in their contributions and the related earnings. Vesting in the Company's matching and discretionary contribution occurs over a three-year service period based on a graduated scale of 50% after two years and 100% after three years.

Notes Receivable from Participants - Participants may borrow up to 50% of their vested account balance, up to $ 50,000 maximum. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 6.50%, which are comparable to commercial loans of similar risk and terms, during 2013 and 2012. Principal and interest is paid ratably through payroll deductions.

NOTE 1 – DESCRIPTION OF PLAN - CONTINUED

Payment of Benefits – Benefits are payable to participants upon disability, retirement, death, or termination of employment from the Plan. The participants may elect to either receive a lump sum distribution or rollover the balance into another qualified plan. Withdrawals may also be made in the event of "financial hardship" defined as expenses to allow participants to purchase a principal residence, pay post-secondary education expenses or medical expenses of the participant or participant's spouse, child or dependents or to prevent eviction from the participant's primary residence.

Forfeited Accounts – Forfeited balances of terminated participants' non-vested accounts are used first to pay administrative expenses and then to reduce future Company contributions. During the years ended December 31, 2013 and 2012, $ -0- of forfeitures were used to reduce Company contributions. Administrative expenses of $ 7,654 and $ -0- were paid out of the forfeiture account during the years ended December 31, 2013 and 2012, respectively.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – The financial statements of the Plan are prepared using the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America.

Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of changes in net assets available for benefits during the reporting period. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition – Investments, consisting of mutual funds, are recorded at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and disposals of investments are recorded on a trade date basis. Dividends are recorded on the ex-dividend date and interest is recorded on the accrual basis. The Plan presents in the statements of changes in net assets available for benefits, the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains and losses and the unrealized appreciation (depreciation) on those investments.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payments of Benefits – Benefits are recorded when authorized and paid.

Administrative Expenses – Administrative expenses of the Plan not paid by the Company are paid out of the assets of the Plan in accordance with ERISA. Administrative expenses include the preparation of the Form 5500, compliance testing, consulting, recordkeeping, documenting, updates, and investment management and advisory.

Date of Management's Review – Subsequent events were evaluated through June 19, 2014, which is the date the financial statements were available to be issued.

NOTE 3 – FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the 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 (level 1 measurements) and lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

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 (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 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. There have been no changes in the methodologies used at December 31, 2013 and 2012.

- *Mutual and money market funds*. Valued at the net asset value of shares held by the plan at year-end.

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

NOTE 3 – FAIR VALUE MEASUREMENTS - CONTINUED

The following table sets forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2013 and 2012:

Fair Value Measurements at December 31, 2013

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Large cap equity funds	$ 3,189,628	$	$	$ 3,189,628
Mid cap equity funds	784,909			784,909
Small cap equity funds	737,610			737,610
International equity funds	842,946			842,946
Bond funds	1,676,044			1,676,044
Blended large cap fund	833,638			833,638
Blended lifecycle funds	2,927,905			2,927,905
Total mutual funds	10,992,680	-0-	-0-	10,992,680
Money market fund	236,216	-0-	-0-	236,216
Total assets at fair value	$ 11,228,896	$ -0-	$ -0-	$ 11,228,896

Fair Value Measurements at December 31, 2012

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Large cap equity funds	$ 383,263	$	$	$ 383,263
Mid cap equity funds	423,078			423,078
Small cap equity funds	244,696			244,696
International equity funds	238,333			238,333
Bond funds	1,001,719			1,001,719
Blended large cap fund	25,699			25,699
Blended lifecycle funds	6,771,885			6,771,885
Total mutual funds	9,088,673	-0-	-0-	9,088,673
Money market fund	237,268	-0-	-0-	237,268
Total assets at fair value	$ 9,325,941	$ -0-	$ -0-	$ 9,325,941

NOTE 4 – INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

The plan administrator has elected the method of compliance 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. Accordingly, as permitted under such election, the plan administrator instructed the plan's independent auditors not to perform any auditing procedures with respect to the following information certified by Fidelity Management Trust Company, the trustee of the plan, as complete and accurate, except for comparing such information certified by the trustee with information included in the plan's financial statements and supplemental schedules. The following is a summary of the investment information for the years ended December 31, 2013 and 2012.

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Allianz NFJ Dividend Value Fund	$ 1,368,949	$ *
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During 2013 and 2012, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $ 1,574,449 and $ 984,019, respectively as follows:

	2013	2012
Mutual funds	$ 1,574,425	$ 983,992
Money market fund	24	27
Total investment gain	$ 1,574,449	$ 984,019

NOTE 6 – TAX STATUS

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Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would be sustained upon examination by the federal taxing authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

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Party-in-interest transactions are defined under the Department of Labor regulations as any fiduciary of the Plan, any party rendering services to the Plan, the employer and certain others. As of December 31, 2013 and 2012, certain investments include mutual funds and a money market fund sponsored by Fidelity Investments, an affiliate of Fidelity Management and a Trust Company. Fidelity Management Trust Company is the Plan trustee and, therefore, these investments qualify as party-in-interest investments. During 2013 and 2012, the Plan paid administrative fees to Fidelity Management Trust Company of $ 2,537 and $ 1,675, respectively. Beginning in 2013, the Plan's investments are managed by an investment advisor, Retirement Corporation of America (RCA). The Plan paid investment advisory and management fees of $ 31,866 to RCA during 2013. Participant loans also qualify as party-in-interest transactions.

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SUPPLEMENTAL SCHEDULE

AMERICAN FAN COMPANY 401(K) PLAN
EIN No.: 31-0780524
Plan No.: 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost **	(e) Current Value ***
*	Fidelity Retirement Money Market Fund	Money Market Fund (236,216 shares)		$ 236,216
	MSIF Mid Cap Growth Fund	Mutual Fund (2,352 shares)		101,977
	Davis New York Venture Fund	Mutual Fund (1,213 shares)		50,236
	Northern Small Cap Value Fund	Mutual Fund (2,020 shares)		41,988
	Keeley Small Cap Value Fund	Mutual Fund (5,607 shares)		215,218
	Laudus International MarketMasters Inv Fund	Mutual Fund (6,456 shares)		154,933
	Allianz NFJ Dividend Value Fund	Mutual Fund (85,187 shares)		1,368,949
	Mainstay LGCP Growth Fund	Mutual Fund (41,742 shares)		429,520
	Invesco International Growth Fund	Mutual Fund (19,789 shares)		678,751
	Royce Value Plus Fund	Mutual Fund (28,376 shares)		480,404
	Virtus Mid-Cap Value Fund	Mutual Fund (307 shares)		10,701
*	Fidelity Capital & Income Fund	Mutual Fund (49,984 shares)		492,841
*	Fidelity Leveraged Company Stock Fund	Mutual Fund (12,709 shares)		549,535
*	Fidelity Balanced Fund	Mutual Fund (36,643 shares)		833,638
*	Fidelity Freedom Income Fund	Mutual Fund (4,808 shares)		56,444
*	Fidelity Freedom 2000 Fund	Mutual Fund (2,761 shares)		34,315
*	Fidelity Freedom 2010 Fund	Mutual Fund (18,645 shares)		285,453
*	Fidelity Freedom 2020 Fund	Mutual Fund (28,188 shares)		440,019

SUPPLEMENTAL SCHEDULE

AMERICAN FAN COMPANY 401(K) PLAN
EIN No.: 31-0780524
Plan No.: 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013 (Continued)

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost **	(e) Current Value ***
*	Fidelity Freedom 2030 Fund	Mutual Fund (33,419 shares)		544,727
*	Fidelity Freedom 2040 Fund	Mutual Fund (7,385 shares)		70,308
*	Fidelity Total Bond Fund	Mutual Fund (71,950 shares)		751,158
*	Fidelity Freedom 2005 Fund	Mutual Fund (23,099 shares)		273,723
*	Fidelity Freedom 2015 Fund	Mutual Fund (35,381 shares)		451,113
*	Fidelity Freedom 2025 Fund	Mutual Fund (54,961 shares)		732,085
*	Fidelity Freedom 2035 Fund	Mutual Fund (643 shares)		8,668
*	Spartan Extended Market Index Fund	Mutual Fund (2,297 shares)		122,696
*	Spartan International Index Fund	Mutual Fund (228 shares)		9,262
*	Spartan 500 Index Advantage Fund	Mutual Fund (20,475 shares)		1,340,923
*	Fidelity Freedom 2045 Fund	Mutual Fund (2,183 shares)		23,945
*	Fidelity Freedom 2050 Fund	Mutual Fund (325 shares)		3,587
*	Spartan US Bond Index Fund	Mutual Fund (38,032 shares)		432,045
*	Fidelity Freedom 2055 Fund	Mutual Fund (303 shares)		3,518
*	Participant Loans	Annual interest rates 4.25% - 6.50%		233,079
	Total Investments			$ 11,461,975

* Represents a party-in-interest to the plan.

** Amounts are excluded in accordance with IRS Form 5500 instructions, Schedule H, line 4i, as all assets are participant directed.

*** Information certified as to completeness and accuracy by Fidelity Management Trust Company.