

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2013 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2013 or fiscal plan year beginning <u>01/01/2013</u> and ending <u>12/31/2013</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☐ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information	
1a Name of plan <u>BRICKER & ECKLER, LLP 401(K) PLAN AND TRUST</u>	1b Three-digit plan number (PN) ▶	<u>002</u>
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>BRICKER & ECKLER LLP</u> <u>100 S 3RD STREET</u> <u>COLUMBUS, OH 43215-4236</u>	1c Effective date of plan <u>01/01/1968</u>	2b Employer Identification Number (EIN) <u>31-4359739</u>
	2c Sponsor's telephone number <u>614-227-2300</u>	2d Business code (see instructions) <u>541110</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	<u>07/11/2014</u>	<u>STEVEN P. ODUM</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	<u>07/11/2014</u>	<u>STEVEN P. ODUM</u>
	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 ☒ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address		3b Administrator's EIN	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		3c Administrator's telephone number 4b EIN 4c PN	
5 Total number of participants at the beginning of the plan year		5	302
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	222
b Retired or separated participants receiving benefits		6b	0
c Other retired or separated participants entitled to future benefits.....		6c	64
d Subtotal. Add lines 6a , 6b , and 6c		6d	286
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits		6e	2
f Total. Add lines 6d and 6e		6f	288
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	286
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2R 3B 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) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 BRICKER & ECKLER, LLP 401(K) PLAN AND TRUST	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 BRICKER & ECKLER LLP	D Employer Identification Number (EIN) 31-4359739

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

GBQ PARTNERS

230 WEST STREET
SUITE 700
COLUMBUS, OH 43215

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	OTHER	11400	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☐

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

MERRILL LYNCH, PIERCE, FENNER AND S

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 51 52 59 60 62 63 65 71 72	RECORDKEEPER	64848	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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
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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:

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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 BRICKER & ECKLER, LLP 401(K) PLAN AND TRUST		B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 BRICKER & ECKLER LLP		D Employer Identification Number (EIN) 31-4359739

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	50
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)		0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	58	334
(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)	511261	562989
(9) Value of interest in common/collective trusts	1c(9)	14171333	18064086
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	33914919	34832567
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	46599787	53192561

		(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)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	95197358	106652587

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	95197358	106652587
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	2451796	
(B) Participants	2a(1)(B)	1959539	
(C) Others (including rollovers)	2a(1)(C)	126424	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		4537759
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	29633	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		29633
(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)	1403693	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1403693
(3) Rents	2b(3)		
(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)		
(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)		1592486
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4116174
c Other income	2c		4399786
d Total income. Add all income amounts in column (b) and enter total	2d		16079531

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4514532	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		4514532
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		54068
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	55702	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		55702
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4624302

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		11455229
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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: GBQ PARTNERS LLC

(2) EIN: 20-2122306

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:

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.)

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.)

	Yes	No	Amount
4a		X	
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.)		X	
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.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		5000000
4e	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		X	
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?		X	
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.)	X		
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation		Retirement Plan Information This schedule is required to be filed under 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.		OMB No. 1210-0110 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 BRICKER & ECKLER, LLP 401(K) PLAN AND TRUST				B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 BRICKER & ECKLER LLP				D Employer Identification Number (EIN) 31-4359739	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 94-1687665					
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.					
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....				3	
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)					
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☐ No ☐ N/A					
If the plan is a defined benefit plan, go to line 8.					
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____					
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.					
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....				6a	
b Enter the amount contributed by the employer to the plan for this plan year.....				6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)				6c	
If you completed line 6c, skip lines 8 and 9.					
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... ☐ Yes ☐ No ☐ N/A					
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?..... ☐ Yes ☐ No ☐ N/A					
Part III Amendments					
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No					
Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.					
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No					
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No					
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No					
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No					
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.				Schedule R (Form 5500) 2013 v. 130118	

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

• **Financial Statements**
• with Supplemental Information
•

• **Bricker & Eckler LLP**
• **401(k) Plan and Trust**
•

• December 31, 2013 and 2012
•



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To the Executive Committee
Bricker & Eckler LLP
401(k) Plan and Trust
Columbus, Ohio

Independent Auditor's Report

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Bricker & Eckler LLP 401(k) Plan and Trust (the Plan), which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2013 and 2012, the related statements of changes in net assets available for benefits – modified cash basis 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 controls 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 our audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) 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 asset information summarized in the notes to the financial statements, which was certified by Bank of America, N.A., the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2013 and 2012, and for the years then ended, that the information provided to the plan administrator by the trustee is complete and accurate.

To the Executive Committee
Bricker & Eckler LLP
401(k) Plan and Trust
Page 2

Basis of Accounting

We draw attention to the footnotes to the financial statements, which describe the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

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 assets (held at end of year) as of December 31, 2013, 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 this supplemental schedule.

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.

GBQ Partners LLC

Columbus, Ohio
July 2, 2014

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BRICKER & ECKLER LLP 401(k) PLAN AND TRUST

Statement of Net Assets Available for Benefits - Modified Cash Basis December 31, 2013

	Self-Directed	Participant-Directed	Total
Assets			
Cash and cash equivalents	\$ 5,372,110	\$ 384	\$ 5,372,494
Investments, at fair value:			
Mutual funds	36,345,092	34,832,567	71,177,659
Common stocks	9,264,145	-	9,264,145
Corporate bonds	1,643,265	-	1,643,265
Certificate of deposits	52,037	-	52,037
Preferred stocks	515,912	-	515,912
Common collective trusts	-	18,149,418	18,149,418
	47,820,451	52,981,985	100,802,436
Notes receivable from participants	-	562,989	562,989
Net assets available for benefits at fair value	53,192,561	53,545,358	106,737,919
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	-	(85,332)	(85,332)
NET ASSETS AVAILABLE FOR BENEFITS	\$ 53,192,561	\$ 53,460,026	\$ 106,652,587

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

BRICKER & ECKLER LLP 401(k) PLAN AND TRUST

Statement of Net Assets Available for Benefits - Modified Cash Basis December 31, 2012

	Self-Directed	Participant-Directed	Total
Assets			
Cash and cash equivalents	\$ 4,301,944	\$ 58	\$ 4,302,002
Investments, at fair value:			
Mutual funds	32,249,806	33,914,919	66,164,725
Common stocks	7,675,053	-	7,675,053
Corporate bonds	1,563,371	-	1,563,371
Certificate of deposits	407,666	-	407,666
Preferred stocks	401,947	-	401,947
Common collective trusts	-	14,261,508	14,261,508
	42,297,843	48,176,427	90,474,270
Notes receivable from participants	-	511,261	511,261
Net assets available for benefits at fair value	46,599,787	48,687,746	95,287,533
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	-	(90,175)	(90,175)
NET ASSETS AVAILABLE FOR BENEFITS	\$ 46,599,787	\$ 48,597,571	\$ 95,197,358

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

BRICKER & ECKLER LLP 401(k) PLAN AND TRUST

Statement of Changes in Net Assets Available for Benefits - Modified Cash Basis For the Year Ended December 31, 2013

	Self-Directed	Participant-Directed	Total
Additions to Net Assets Attributed to:			
Investment income:			
Net appreciation in fair value of investments	\$ 4,096,351	\$ 5,726,165	\$ 9,822,516
Dividend income	-	1,513,362	1,513,362
Interest income on notes receivable from participants	1,897	27,736	29,633
	4,098,248	7,267,263	11,365,511
Contributions:			
Employer	649,221	1,802,575	2,451,796
Rollovers	-	126,424	126,424
Employee	566,321	1,393,218	1,959,539
Total contributions	1,215,542	3,322,217	4,537,759
Total additions	5,313,790	10,589,480	15,903,270
Deductions from Net Assets Attributed to:			
Benefits paid to participants	517,638	4,050,962	4,568,600
Administrative expenses	-	55,702	55,702
Total deductions	517,638	4,106,664	4,624,302
Net increase prior to transfers	4,796,152	6,482,816	11,278,968
Intra plan transfers	1,796,622	(1,796,622)	-
Transfers from related plan	-	176,261	176,261
Net increase	6,592,774	4,862,455	11,455,229
Net Assets Available for Benefits:			
Beginning of Year	46,599,787	48,597,571	95,197,358
End of Year	\$ 53,192,561	\$ 53,460,026	\$ 106,652,587

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

BRICKER & ECKLER LLP 401(k) PLAN AND TRUST

Statement of Changes in Net Assets Available for Benefits - Modified Cash Basis For the Year Ended December 31, 2012

	Self-Directed	Participant-Directed	Total
Additions to Net Assets Attributed to:			
Investment income:			
Net appreciation in fair value of investments	\$ 4,516,766	\$ 3,223,832	\$ 7,740,598
Dividend income	-	1,537,170	1,537,170
Interest income on notes receivable from participants	1,419	27,946	29,365
	<u>4,518,185</u>	<u>4,788,948</u>	<u>9,307,133</u>
Contributions:			
Employer	689,129	1,997,158	2,686,287
Rollovers	-	68,164	68,164
Employee	741,592	1,555,879	2,297,471
Total contributions	<u>1,430,721</u>	<u>3,621,201</u>	<u>5,051,922</u>
Total additions	<u>5,948,906</u>	<u>8,410,149</u>	<u>14,359,055</u>
Deductions from Net Assets Attributed to:			
Benefits paid to participants	1,355,509	2,255,100	3,610,609
Administrative expenses	-	46,642	46,642
Total deductions	<u>1,355,509</u>	<u>2,301,742</u>	<u>3,657,251</u>
Net increase prior to transfers	4,593,397	6,108,407	10,701,804
Intra plan transfers	(631,443)	631,443	-
Transfers from related plan	26,078	291,417	317,495
Net increase	<u>3,988,032</u>	<u>7,031,267</u>	<u>11,019,299</u>
Net Assets Available for Benefits:			
Beginning of Year	42,611,755	41,566,304	84,178,059
End of Year	<u>\$ 46,599,787</u>	<u>\$ 48,597,571</u>	<u>\$ 95,197,358</u>

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

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Plan Description

The following description of Bricker & Eckler LLP 401(k) Plan and Trust (the Plan) provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General

The Plan was established effective January 1, 1968, by Bricker & Eckler LLP (the Employer and the Administrator) as a defined contribution, money purchase pension plan. Effective January 1, 1982, the Plan was amended to a profit-sharing plan. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Beginning January 1, 1989, employees, excluding associate attorneys who are excluded from the Plan, having attained 21 years of age and having completed at least one year of service immediately preceding January 1, 1989, became participants as of January 1, 1989. All other employees become participants on either January 1 or July 1 following the date on which he or she attains 21 years of age and completes one year of service.

On December 31, 2002, The Bricker & Eckler LLP Money Purchase Pension Plan and Trust was merged into the Plan. Prior to the merger, the Plans covered eligible employees at Bricker & Eckler LLP.

Contributions

Funding is provided by salary deferral contributions from Plan participants, rollover contributions and employer contributions. Plan participants may elect to contribute between 1% and 75% of compensation provided that their salary deferral contributions do not exceed federal limits. Participants who have attained the age of 50 before the end of the Plan year are eligible to make catch-up contributions. The Employer shall contribute on behalf of each eligible participant who is an employee at any time during the payroll period an amount equal to the sum of 5.7% of each such participant's compensation up to the taxable wage base plus 11.4% of each eligible participant's compensation in excess of the taxable wage base. Additionally, the Employer shall make an employer matching contribution on behalf of each participant who has satisfied the eligibility requirements (the January 1 or July 1 following on or after the date he or she attains age 21 or completes 2 years of service), in an amount equal to 100% of such participant's elective contributions up to 2% of compensation.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Contributions are subject to certain limitations. Employee amounts and employer contributions credited to a participant's account are non-forfeitable.

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Plan Description (continued)

Participant Accounts

Each participant's account is credited with the employer contribution, participant contribution, and, if applicable, an allocation of Plan earnings and losses and administrative expenses. Allocations are based on participant earnings or losses or account balances as defined in the Plan agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Self-Directed Accounts

The Plan permits any participant to separately direct the investing activity of their assets in the Plan. As such, the funds are segregated and accounted for separately from the pooled account.

Notes Receivable from Participants

All participants who are eligible to contribute to the Plan are eligible to borrow a portion of their vested account (excluding Roth salary deferrals, subject to provisions established in the Plan agreement. All loans (including mortgage) are secured by all or a portion of the assets within a participant's individual account. Interest rates are 2% over the prime rate at the time of the loan and range from 5.25% to 10.25%. Principal and interest are paid ratably through payroll deductions.

Payment of Benefits

A participant may receive the value of his or her account upon: (1) retirement on or after age 65, (2) early retirement [age 55], (3) disability or (4) termination of employment. Distributions upon termination of employment are made under terms defined by the Plan agreement or deferred until retirement or early retirement age is attained. In addition, a participant may receive an in-service distribution of the value of his or her account, or a portion thereof, after the attainment of age 59½ (excluding Roth salary deferrals and account transfers from the Bricker & Eckler LLP Money Purchase Pension Plan). A participant may receive an in-service distribution of the value of the account attributable to the Bricker & Eckler LLP Money Purchase Pension Plan after the attainment of age 62. Upon death of a participant, the value of his or her account will be distributed to his or her designated beneficiary.

Distributions are made in the form of the qualified joint and 50% survivor annuity for married participants and the life annuity for unmarried participants; however, the Plan permits the following optional forms of distribution: (1) lump-sum in cash, (2) life annuity, (3) life annuity with 10 years guaranteed payments, (4) non-periodic installment payments, (5) periodic installment payments, (6) life annuity with guaranteed payments and (7) qualified joint and 75% survivor annuity for a married participant.

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the modified cash basis of accounting. Certain contributions and the related assets are recognized when received rather than when earned. The accompanying financial statements are not intended to present the Plan's financial position and results of operations in conformity with accounting principles generally accepted in the United States of America.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Plan invests in investment contracts through a common/collective trust. The statements of net assets available for benefits present the fair value of the investment contracts, as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statements of changes in net assets available for benefits are prepared on a contract value basis.

Use of Estimates

The preparation of financial statements on a modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

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

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

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.

Payment of Benefits

Benefits are recorded when paid.

Summary of Significant Accounting Policies (continued)

Contributions

Employer contributions are recognized when received. As such, any contributions from a prior year made by participants, who are partners, in order to contribute up to the maximum permitted by the Code, are recognized in the year received. All employer contributions are 100% vested when contributed.

Administrative Expenses

Administrative expenses for broker expenses and professional services are recorded when paid from Plan assets. All such expenses were paid by the Plan in 2013 and 2012.

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 the 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.
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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.
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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.
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BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Fair Value Measurements (continued)

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.

<i>Mutual Funds:</i>	Valued at the net asset value of shares held by the Plan at year-end.
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<i>Common Stocks, Corporate Bonds and Preferred Stocks:</i>	Valued at the closing price reported on the active market on which they are traded.
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<i>Certificate of Deposits:</i>	Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.
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<i>Common Collective Trusts:</i>	Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.
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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.

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Fair Value Measurements (continued)

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

Assets at Fair Value as of December 31, 2013

	Level 1	Level 2	Level 3	Total
<i>Mutual funds:</i>				
Growth funds	\$ 6,185,294	\$ -	\$ -	\$ 6,185,294
Value funds	11,480,020	-	-	11,480,020
Bond funds	9,917,015	-	-	9,917,015
International funds	7,250,238	-	-	7,250,238
Self-directed funds	36,345,092	-	-	36,345,092
<i>Self-directed accounts:</i>				
Common stocks	9,264,145	-	-	9,264,145
Corporate bonds	1,643,265	-	-	1,643,265
Certificate of deposits	52,037	-	-	52,037
Preferred stocks	515,912	-	-	515,912
<i>Common collective trusts</i>	<u>-</u>	<u>18,149,418</u>	<u>-</u>	<u>18,149,418</u>
Total assets at fair value	<u>\$ 82,653,018</u>	<u>\$ 18,149,418</u>	<u>\$ -</u>	<u>\$ 100,802,436</u>

Assets at Fair Value as of December 31, 2012

	Level 1	Level 2	Level 3	Total
<i>Mutual funds:</i>				
Growth funds	\$ 7,553,404	\$ -	\$ -	\$ 7,553,404
Value funds	9,379,293	-	-	9,379,293
Bond funds	11,023,214	-	-	11,023,214
International funds	5,959,008	-	-	5,959,008
Self-directed funds	32,249,806	-	-	32,249,806
<i>Self-directed accounts:</i>				
Common stocks	7,675,053	-	-	7,675,053
Corporate bonds	1,563,371	-	-	1,563,371
Certificate of deposits	407,666	-	-	407,666
Preferred stocks	401,947	-	-	401,947
<i>Common collective trusts</i>	<u>-</u>	<u>14,261,508</u>	<u>-</u>	<u>14,261,508</u>
Total assets at fair value	<u>\$ 76,212,762</u>	<u>\$ 14,261,508</u>	<u>\$ -</u>	<u>\$ 90,474,270</u>

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Investment Contracts with Invesco

During 2013 and 2012, the Plan held a collective trust fund, INVESCO (Invesco) Stable Fund (the Trust). Invesco maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The trust issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

Because the investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the stable value investment contract. The investment contract is presented on the face of the statements of net assets available for benefits at fair value with an adjustment to contract value in arriving at net assets available for benefits. Contract value, as reported to the Plan by Invesco, represents contributions made under the contracts, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There were no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate was based on a formula agreed upon with the issuer. Such interest rates are reviewed on a quarterly basis for resetting.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under Employee Retirement Income Security Act of 1974. The plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

The guaranteed investment contract does not permit the Company to terminate the agreement prior to the scheduled maturity date.

The following were the average yields for the guaranteed investment contract for 2013 and 2012:

	2013	2012
Average yields:		
Based on actual earnings	1.28 %	1.51 %
Based on interest rate credited to participants	1.27 %	1.69 %

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Information Prepared and Certified by Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by the trustee. Assets that represent 5% or more of the Plan's net assets at December 31 are separately identified.

	2013	2012
<i>Cash</i>	\$ 384	\$ 58
<i>Common Collective Trusts:</i>		
Invesco Stable Value Retirement**	10,568,090	10,693,302
SSgA S&P 500 Index Fund Tier E	7,495,996	3,478,030
<i>Mutual Funds:</i>		
PIMCO Total Return Fund	8,388,099	9,301,266
JP Morgan Mid Cap Value Fund	5,343,686	*
Others	21,100,782	24,613,654
<i>Notes Receivable from Participants</i>	562,989	511,261
<i>Self-Directed Accounts</i>	<u>53,192,561</u>	<u>46,599,787</u>
	<u>\$106,652,587</u>	<u>\$ 95,197,358</u>

* Investment did not represent more than 5% of Plan assets as of the specified date.

** This amount represents contract value for this investment.

The trustee also certified to the completeness and accuracy of the following related to the aforementioned assets for the years ended December 31:

	2013	2012
Net appreciation in fair value of investments	\$ 9,822,516	\$ 7,740,598
Interest and dividend income	1,542,995	1,566,535

Plan Termination

Although it has not expressed any intent to do so, the Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

BRICKER & ECKLER LLP
401(k) PLAN AND TRUST
Notes to Financial Statements
December 31, 2013 and 2012

Tax Status

The Internal Revenue Service has determined and informed the plan sponsor by a letter dated September 30, 2010, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

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 not be sustained upon examination by the Internal Revenue Service. 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 tax 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.

Party-in-Interest Transactions

Certain Plan investments are shares of mutual funds managed by Bank of America, N.A. (BOA). BOA is the trustee of the Plan and, therefore, these transactions qualify as party-in-interest transactions. GBQ Partners LLC performs auditing services for the Plan and these transactions qualify as party-in-interest. Fees paid by the Plan for these services amounted to \$55,702 in 2013 and \$46,642 in 2012.

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, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the accompanying 2013 statement of net assets available for benefits.

Subsequent Events

Effective January 1, 2014, the Plan was amended to provide for a "true-up" of the employer matching contribution for the Plan year and to accelerate the eligibility and entry date requirements for employees electing to make participant elective contributions.

Subsequent Events – Date of Management's Evaluation

The Plan has evaluated subsequent events through the date of the Independent Auditor's Report, the date on which the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION

BRICKER & ECKLER LLP 401(k) PLAN AND TRUST

EIN: 31-4359739

PN: 002

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

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
**	Invesco	Stable Value Retirement	\$ 10,568,090
	PIMCO	Total Return Fund	8,388,099
	State Street Global Advisors Ltd.	SSgA S&P 500 Index Fund Tier E	7,495,996
	T. Rowe Price	Equity Income Fund	3,050,402
	Alger	Small Cap Institutional	958,496
	American Funds	Europacific Growth Fund	3,494,180
	PIMCO	Real Return Fund	1,528,916
	Goldman Sachs	Small Cap Value Fund	3,085,932
	Mainstay	Large Cap Growth Fund	3,450,865
	Prudential	Jennison Mid Cap Fund	1,775,933
	Harbor	International Fund	3,756,442
	JP Morgan	Mid Cap Value Fund	5,343,686
*	Bank of America, N.A.	Self-Directed Accounts	53,192,561
*	Notes Receivable from Participants	Notes receivable from participants with interest rates ranging from 5.25% - 10.25% due at various maturity dates through February 2028	562,989
			<u>\$ 106,652,587</u>

* Denotes party-in-interest

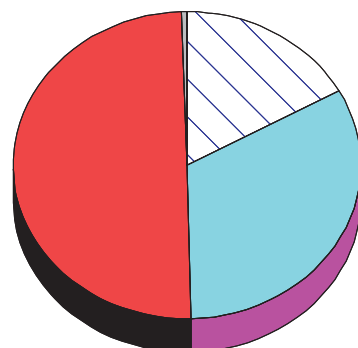
** Investment reported at contract value

See Independent Auditor's Report.

STATEMENT OF ASSETS
FOR THE PERIOD 01/01/2013 - 12/31/2013

BRICKER & ECKLER LLP 401(K) PLAN
CONSOLIDATION

ALLOCATION OF PLAN ASSETS



16.94% COMMON / COLLECTIVE TRUSTS	32.66% MUTUAL FUNDS
49.87% OTHER ASSETS	0.53% LOANS
0.00% PENDING SETTLEMENT FUNDS	0.00% ACCRUED INCOME

Investment Category	Shares/ Units	Price/ NAV	Cost/Book Value	Market Value	% Total Value
<u>COMMON / COLLECTIVE TRUSTS</u>					
INVESTCO STABLE VALUE RET CL 4	10,568,089.7500	1.000	10,568,089.75	10,568,089.75	9.91%
SSGA S&P 500 INDEX FUND CL E	473,232.1070	15.840	6,182,356.24	7,495,996.57	7.03%
TOTAL COMMON / COLLECTIVE TRUSTS			16,750,445.99	18,064,086.32	16.94%
<u>MUTUAL FUNDS</u>					
ALGER SMALL CAP GRWTH INSTL I	33,234.9194	28.840	895,846.74	958,495.08	0.90%
PIMCO TOTAL RETURN PORT. INSTL	784,667.8191	10.690	8,577,430.59	8,388,098.99	7.86%
PRUDENTIAL JENNISON MID-CAP Z	43,861.0238	40.490	1,286,921.58	1,775,932.85	1.67%
TROWE PRICE EQUITY INCOME FD	93,085.1973	32.770	2,287,183.48	3,050,401.92	2.86%
PIMCO REAL RETURN FD CL INST	139,372.4617	10.970	1,613,606.14	1,528,915.90	1.43%
AMERICAN EUROPACIFIC GR FD R5	71,331.0800	48.980	2,934,695.64	3,493,796.30	3.28%

Balances include pending activity

STATEMENT OF ASSETS

FOR THE PERIOD 01/01/2013 - 12/31/2013

BRICKER & ECKLER LLP 401(K) PLAN

CONSOLIDATION

Investment Category	Shares/ Units	Price/ NAV	Cost/Book Value	Market Value	% Total Value
GOLDMAN:SM CAP VAL;INS	54,773.3702	56.340	2,611,526.18	3,085,931.68	2.89%
JP MORGAN:MID VALUE;INST	152,155.0771	35.120	4,840,260.70	5,343,686.31	5.01%
HARBOR INTERNATIONAL FUND	53,267.7598	70.520	3,168,443.56	3,756,442.42	3.52%
MAINSTAY LARGE CAP GROWTH FUND	331,495.2316	10.410	2,620,247.68	3,450,865.36	3.24%
TOTAL MUTUAL FUNDS			30,836,162.29	34,832,566.81	32.66%
<u>OTHER ASSETS</u>					
SELF-DIRECT ACCT	43,728,084.8197	1.000	43,728,084.82	43,728,084.82	41.00%
SELF-DIRECT ACCT	9,000,480.7809	1.000	9,000,480.77	9,000,480.78	8.44%
SELF-DIRECT ACCT	463,995.0098	1.000	463,995.01	463,995.01	0.44%
TOTAL OTHER ASSETS			53,192,560.60	53,192,560.61	49.87%
<u>LOANS</u>					
LOAN FUND	562,989.2500	1.000	562,989.25	562,989.25	0.53%
<u>PENDING SETTLEMENT FUNDS</u>					
PENDING SETTLEMENT FUND	50.0000	1.000	50.00	50.00	0.00%
INVESTMENT TOTAL			101,342,208.13	106,652,252.99	100.00%

Balances include pending activity

STATEMENT OF ASSETS
FOR THE PERIOD 01/01/2013 - 12/31/2013

BRICKER & ECKLER LLP 401(K) PLAN

CONSOLIDATION

Investment Category	Shares/ Units	Price/ NAV	Cost/Book Value	Market Value	% Total Value
UNINVESTED CASH			0.00	0.00	0.00%
ACCRUED INCOME			333.97	333.97	0.00%
TOTAL ASSETS			101,342,542.10	106,652,586.96	100.00%

A portion of the balance displayed in the BIF Money Fund or the Merrill Lynch Bank Deposit Program (MLBD Program) may contain a pending deposit. If cash funds are invested / deposited in the BIF or MLBD Program, sweep activity details are available upon request.

Balances include pending activity