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

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
NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 08/01/1995

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

NATIONAL TUBE SUPPLY COMPANY

925 CENTRAL AVENUE
UNIVERSITY PARK, IL 60484

2b Employer Identification Number (EIN)
36-3720618

2c Sponsor's telephone number
708-534-2700

2d Business code (see instructions)
423500

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.		
	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:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	167
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**	165
b	Retired or separated participants receiving benefits	**6b**	21
c	Other retired or separated participants entitled to future benefits	**6c**	
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	186
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	186
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	122
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	3
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

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)** [X] 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)** [X] 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)** [X] 1 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NATIONAL TUBE SUPPLY COMPANY

D Employer Identification Number (EIN)
36-3720618

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

HANCOCK

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
01-0233346	65838	68149	126	01/01/2013	12/31/2013

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
8898	5339

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VALMARK SECURITIES
130 SPRINGSIDE DRIVE
AKRON, OH 44333

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	**(d)** Purpose	**(e)** Organization code
7207			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RETIREMENT SOLUTION GROUP, LLC
180 W. WASHINGTON ST.
CHICAGO, IL 60602

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	**(d)** Purpose	**(e)** Organization code
	5339	CONTRACT SUPPORT	5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LORIA FINANCIAL GROUP, LLC

7500 S COUNTY LINE RD
BURR RIDGE, IL 60527

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1691			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	
5	Current value of plan's interest under this contract in separate accounts at year end	5	4202866

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ INVESTMENT

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6) Total additions			7c(6)	0
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	0
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**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 NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN	**B** Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 NATIONAL TUBE SUPPLY COMPANY	**D** Employer Identification Number (EIN) 36-3720618

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).. . . . . ☐ 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)

(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 ☐

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
NATIONAL TUBE SUPPLY COMPANY

D Employer Identification Number (EIN)
36-3720618

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

a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	23993

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	48572

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	28059

a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA MID CAP VALUE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	101033

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA EMERGING MARKETS VALUE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	99681

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	39697

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	93656

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44932

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 58989

a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3254

a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK STABLE VAL

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 238027

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 224238

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 316439

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 70757

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1039504

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 106171

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36796

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32359
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40286
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14017
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11607
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO REAL RETURN		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 113600
a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3039
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2010		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 107632
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2015		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3352
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2020		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 126673
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2025		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 374467

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2030		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 176887
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2035		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14197
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2040		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51044
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2045		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79616
a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2050		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4710
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 70191
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4086
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 33162
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL COMPANY VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12841
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SPECTRUM INC		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63563

a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 211628

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL BOND MARKET FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15328

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2464

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL STOCK MARKET INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 171

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39989

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22159

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

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
NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NATIONAL TUBE SUPPLY COMPANY

D Employer Identification Number (EIN)
36-3720618

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	2843	1635
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	110886	135331
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	3082401	4202866
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	3196130	4339832
Liabilities			
g Benefit claims payable	1g		19121
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	19121
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	3196130	4320711

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)	113954	
(B) Participants	2a(1)(B)	391261	
(C) Others (including rollovers)	2a(1)(C)	91598	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		596813
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	4185	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		4185
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		581111
(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)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1182109
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	34335	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		34335
f Corrective distributions (see instructions)	2f		19121
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	3500	
(2) Contract administrator fees	2i(2)	572	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		4072
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		57528
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1124581
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

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

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

(1) Name: CLIFTONLARSONALLEN LLP (2) EIN: 41-0746749

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		450000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? 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
NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NATIONAL TUBE SUPPLY COMPANY

D Employer Identification Number (EIN)
36-3720618

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): 01-0233346

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** 5

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): _____

---

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):

NATIONAL TUBE SUPPLY COMPANY
401(K) SAVINGS PLAN
University Park, Illinois

FINANCIAL STATEMENTS
December 31, 2013 and 2012

CliftonLarsonAllen

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INDEPENDENT AUDITORS' REPORT

Plan Trustees and Plan Administrator
National Tube Supply Company 401(k) Savings Plan
University Park, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of National Tube Supply Company 401(k) Savings Plan (the "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.

Auditors' 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 (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), 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 John Hancock Life Insurance Company (U.S.A.), the Custodian 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 Custodian holds the Plan's investment assets and executes related transactions. The Plan administrator has obtained certifications from the Custodian as of and for the years ended December 31, 2013 and 2012, that the information provided to the Plan administrator by the Custodian is complete and accurate.

Disclaimer of Opinion

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

Other Matters

The supplemental schedule of assets (held at end of year) as of December 31, 2013, is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA 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 Custodian, 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Oak Brook, Illinois
October 2, 2014

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2013 and 2012

ASSETS

	2013	2012
Non-interest-bearing cash	$ 1,635	$ 2,843
Participant-directed investments, at fair value	4,202,866	3,082,401
Notes receivable from participants	135,331	110,886
Total assets	4,339,832	3,196,130

LIABILITIES

DISTRIBUTIONS PAYABLE	19,121	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 4,320,711	$ 3,196,130

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

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2013 and 2012

	2013	2012
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income	$ 581,111	$ 330,217
Interest income from notes receivable from participants	4,185	3,828
Contributions:		
Employer	113,954	93,363
Participants	391,261	338,887
Rollover	91,598	93,863
Total contributions	596,813	526,113
Total additions	1,182,109	860,158
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	53,456	125,789
Administrative expenses	4,072	3,949
Total deductions	57,528	129,738
NET INCREASE	1,124,581	730,420
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	3,196,130	2,465,710
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 4,320,711	$ 3,196,130

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

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2013 and 2012

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the National Tube Supply Company 401(k) Savings 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 established to provide deferred compensation benefits to eligible employees. Under the Plan, all of the employees of National Tube Supply Company (the "Employer"), who have met eligibility requirements, may participate in the Plan, unless they elect to waive participation. The Plan and the Trust, of which it is a part, are intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code (IRC) and similar state tax laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

All employees of the Employer are eligible to participate. Employees may become Plan members on January 1st or July 1st after attainment of eligibility. Employees must have attained the age of 18 to be eligible.

Eligible employees employed on the last day of an allocation period, as defined in the Plan document, are eligible to receive the Employer matching contributions. Eligible employees employed on the last day of an allocation period and having 1,000 hours of service are eligible to receive the discretionary profit sharing contribution.

Contributions

Each year participants may contribute through payroll deductions up to 100% of pre-tax annual compensation. Participants may also contribute amounts representing after-tax payroll deductions. Employee contribution levels may be adjusted up or down on the first day of each quarter. Participants may also roll over amounts representing distributions from qualified employee benefit or defined contribution plans.

The Employer may make a matching contribution to eligible employees in an amount to be determined at the Employer's discretion. The Employer may also make a discretionary profit sharing contribution. Each participant receives a share of the Employer's discretionary contribution, if eligible. The Employer did not make a discretionary profit sharing contribution for the years ended December 31, 2013 and 2012. Contributions are subject to certain limitations. The Employer contributions are made on a monthly basis on the last day of each month. The Employer made matching contributions of 50% of employee contributions up to a maximum of 4% of qualified compensation amounting to $113,954 and $93,363 for the years ended December 31, 2013 and 2012, respectively.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Participant Accounts

Each participant's account is credited with the participant's contribution, the Employer's matching contribution, and allocations of the Employer's discretionary contribution, forfeitures, and Plan earnings (or losses) and charged with an allocation of administrative expenses, if any. Allocations are based on participant compensation or account balances, as set forth in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Participants' Investment Options

The assets of the Plan are held by John Hancock Life Insurance Company (U.S.A.) (John Hancock), the Custodian of the Plan. The Plan currently offers various pooled separate accounts as investment options for Plan participants. Participants may change their investment options daily.

Vesting

Participants are immediately vested in their contributions and any rollover contributions plus actual earnings thereon. Vesting in the Employer's matching and discretionary contribution portions of their accounts plus actual earnings thereon is based on years of continuous service. Participants are 20% vested in their Employer contribution accounts after one year of service and vest an additional 20% for each additional year of service thereafter. Participants are 100% vested after five years of service. Upon normal retirement at age 65, death, or disability, the full value of the participant's account becomes immediately vested and is nonforfeitable.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the participant notes receivable. Loan terms range from one to five years, or longer for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at rates that range from 3.25% to 6.25%, as of December 31, 2013, which are commensurate with local prevailing rates. Principal and interest are paid ratably through payroll deductions. These loans mature at various dates through August 2039.

Payment of Benefits

Upon termination of service due to death, retirement on or after normal retirement age of 65, or other reasons, benefits are payable in a lump-sum or a direct rollover to a qualified retirement plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance. Payment of vested account balances of $1,000 up to $5,000 will automatically be rolled over into an IRA unless the participant elects a lump-sum distribution. The Plan's provisions also provide for withdrawals in the event of financial hardship, as defined by the Plan.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Forfeited Accounts

At December 31, 2013 and 2012, forfeited nonvested accounts totaled $1,635 and $2,843, respectively. The nonvested accounts may be used to reduce future Employer's matching and discretionary profit sharing contributions. For the year ended December 31, 2013, forfeitures in the amount of $2,271 were used to make corrective contributions for 2012. Forfeitures in the amount of $7,914 were used to reduce Employer contributions in 2012.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates in Preparing Financial Statements

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Investments in insurance company pooled separate accounts are reported at the value reported to the Plan by the insurance company, which approximates fair value.

Purchases and sales of securities are recorded on the trade date. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold 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, if any, are reclassified as distributions based upon the terms of the Plan document.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Employer absorbs certain administrative costs such as audit fees and administrative salaries. Although the Employer has elected to pay some administrative costs, it is not obligated to do so. If the Employer ceases to pay all or part of these costs in the future, they will be paid by the Plan's Trustee out of the assets of the Plan.

NOTE 3 - FAIR VALUE MEASUREMENTS

The Plan measures, monitors, and discloses its assets on a fair value basis in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification 820 (ASC 820), *Fair Value Measurements and Disclosures*. ASC 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to 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 are described below:

- Level 1 - Valuations based on quoted prices for identical assets or liabilities in active markets;
- Level 2 - Valuations based on quoted prices for similar assets or liabilities or identical assets or liabilities in less active markets, such as dealer or broker markets; and
- Level 3 - Valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are unobservable, such as pricing models, discounted cash flow models, and similar techniques not based on market, exchange, dealer, or broker-traded transactions.

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 maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for instruments measured at fair value and their classification in the valuation hierarchy. There have been no changes in the methodologies used at December 31, 2013 or 2012.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

Pooled separate accounts are valued at the net asset value, as reported by John Hancock and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. The pooled separate accounts mainly invest in securities traded on nationally recognized securities exchanges and active dealer markets. Participant-initiated redemptions of funds from the stable value fund may be delayed up to seven days to maintain adequate liquidity or up to 30 days if a previous withdrawal may have an adverse impact on the fund. The other pooled separate accounts do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions. Pooled separate accounts are considered Level 2 investments.

The following is a description of the nature and risks of the categories of assets by major security type:

Aggressive growth funds: These investments seek long-term capital appreciation by investing primarily in common stocks and securities which display these characteristics.

Growth funds: These investments seek long-term growth of capital by investing in common stocks, including foreign stocks.

Growth and income funds: Includes investments that seek long-term growth of capital and income by investing in solid companies with the greatest potential for future dividends, rather than current income.

Income funds: These funds seek to achieve maximum total return, consistent with preservation of capital and prudent investment management.

Conservative funds: These funds seek to achieve maximum current income, consistent with preservation of principal and liquidity by investing in high-quality, U.S. dollar-dominated money market accounts.

Target date funds: Includes investments that seek to provide high total return in the years leading up to retirement. To achieve this, the funds use an asset allocation strategy designed for investors based on their expected retirement date.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

The following table presents assets measured at fair value by classification within the fair value hierarchy as of December 31, 2013 and 2012:

	Fair Value Measurements Using			
December 31, 2013	**Quoted Prices in Active Markets for Identical Assets (Level 1)**	**Significant Other Observable Inputs (Level 2)**	**Significant Unobservable Inputs (Level 3)**	**Total**
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 529,404	$ -	$ 529,404
Growth funds	-	1,541,249	-	1,541,249
Growth and income funds	-	524,736	-	524,736
Income funds	-	360,115	-	360,115
Conservative funds	-	308,784	-	308,784
Target date funds	-	938,578	-	938,578
Total assets at fair value	$ -	$ 4,202,866	$ -	$ 4,202,866
December 31, 2012				
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 347,051	$ -	$ 347,051
Growth funds	-	1,077,732	-	1,077,732
Growth and income funds	-	515,334	-	515,334
Income funds	-	400,870	-	400,870
Conservative funds	-	282,163	-	282,163
Target date funds	-	459,251	-	459,251
Total assets at fair value	$ -	$ 3,082,401	$ -	$ 3,082,401

The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan management 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 4 - INFORMATION CERTIFIED BY THE CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Custodian has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate:

a. Investments as shown in the accompanying Statements of Net Assets Available for Benefits of $4,202,866 and $3,082,401 as of December 31, 2013 and 2012, respectively.

b. Notes receivable from participants as shown in the accompanying Statements of Net Assets Available for Benefits of $135,331 and $110,886 as of December 31, 2013 and 2012, respectively.

c. Investment income as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $581,111 and $330,217 for the years ended December 31, 2013 and 2012, respectively.

d. Interest income from notes receivable from participants as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $4,185 and $3,828 for the years ended December 31, 2013 and 2012, respectively.

The Plan's investments are held by John Hancock. The fair value of individual investments that represent 5% or more of the Plan's net assets as of December 31, 2013 and 2012 are as follows:

	2013	2012
Pooled separate account:		
Retirement Living 2025	$ 374,467	$ *
Lifestyle Balanced	316,439	374,720
Lifestyle Growth	1,039,504	738,906
Lifestyle Aggressive	224,238	*
John Hancock Stable Value	238,027	225,251

* - Less than 5% of the Plan's net assets for 2012.

During the years ended December 31, the Plan's investments appreciated in fair value as follows:

	2013	2012
Pooled separate accounts	$ 581,111	$ 330,217

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

NOTE 5 - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are funds managed by John Hancock. John Hancock is the Custodian and investment manager of the Plan; therefore, these transactions qualify as party-in-interest. Certain costs of administering the Plan are paid by the Plan sponsor and are not material to the total net assets of the Plan. Assets managed by and held with John Hancock aggregated $4,202,866 and $3,082,401 at December 31, 2013 and 2012, respectively.

NOTE 6 - 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. In the event of Plan termination, participants would become 100% vested in their accounts. Any unallocated assets of the Plan would be allocated to participant accounts and distributed in such a manner as the Employer may determine.

NOTE 7 - INCOME TAX STATUS

The Plan adopted a volume submitter prototype plan, which received a favorable opinion letter from the IRS as of March 31, 2008, which stated that the Plan is designed in accordance with applicable sections of the IRC and with respect to the tax-qualified status of the Plan. The volume submitter prototype plan opinion letter has been relied upon by this Plan. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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 if the organization has taken an uncertain position that more-likely-than-not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 8 - 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 value of investment securities will occur in the near term and that such changes could materially affect the participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

NOTE 9 - SUBSEQUENT EVENTS

Management evaluated subsequent events through October 2, 2014, the date the financial statements were available to be issued. Events or transactions occurring after December 31, 2013, but prior to October 2, 2014 that provided additional evidence about conditions that existed at December 31, 2013, have been recognized in the financial statements for the year ended December 31, 2013. Events or transactions that provided evidence about conditions that did not exist at December 31, 2013, but arose before the financial statements were available to be issued have not been recognized in the financial statements for the year ended December 31, 2013.

SUPPLEMENTAL INFORMATION

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR) -
PLAN EMPLOYER ID 36-3720618 PLAN NUMBER 001
December 31, 2013

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
		Pooled separate accounts:		
*	John Hancock U.S.A.	Retirement Living 2010	(1)	$ 107,632
*	John Hancock U.S.A.	Retirement Living 2015	(1)	3,352
*	John Hancock U.S.A.	Retirement Living 2020	(1)	126,673
*	John Hancock U.S.A.	Retirement Living 2025	(1)	374,467
*	John Hancock U.S.A.	Retirement Living 2030	(1)	176,887
*	John Hancock U.S.A.	Retirement Living 2035	(1)	14,197
*	John Hancock U.S.A.	Retirement Living 2040	(1)	51,044
*	John Hancock U.S.A.	Retirement Living 2045	(1)	79,616
*	John Hancock U.S.A.	Retirement Living 2050	(1)	4,710
*	John Hancock U.S.A.	Lifestyle Conservative	(1)	70,757
*	John Hancock U.S.A.	Lifestyle Moderate	(1)	106,171
*	John Hancock U.S.A.	Lifestyle Balanced	(1)	316,439
*	John Hancock U.S.A.	Lifestyle Growth	(1)	1,039,504
*	John Hancock U.S.A.	Lifestyle Aggressive	(1)	224,238
*	John Hancock U.S.A.	Real Estate Securities Funds	(1)	3,039
*	John Hancock U.S.A.	DFA Emerging Markets Value	(1)	99,681
*	John Hancock U.S.A.	DFA International Value	(1)	39,697
*	John Hancock U.S.A.	Mid Cap Stock Fund	(1)	40,286
*	John Hancock U.S.A.	Small Cap Growth Index	(1)	70,191
*	John Hancock U.S.A.	International Equity Index Fund	(1)	3,254
*	John Hancock U.S.A.	Small Cap Index Fund	(1)	4,086
*	John Hancock U.S.A.	EuroPacific Growth Fund	(1)	44,932
*	John Hancock U.S.A.	Small Company Value Fund	(1)	12,841
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*	John Hancock U.S.A.	Columbia Mid Cap Value	(1)	101,033
*	John Hancock U.S.A.	Value Fund	(1)	22,159
*	John Hancock U.S.A.	Mid Cap Index Fund	(1)	32,359
*	John Hancock U.S.A.	Oppenheimer Global	(1)	11,607
*	John Hancock U.S.A.	Utilities Fund	(1)	39,989
*	John Hancock U.S.A.	Total Stock Market Index Fund	(1)	171
*	John Hancock U.S.A.	The Growth Fund of America	(1)	211,628
*	John Hancock U.S.A.	Mass Investors Fund	(1)	36,796
*	John Hancock U.S.A.	Equity Income Fund	(1)	93,656
*	John Hancock U.S.A.	500 Index Fund	(1)	23,993
*	John Hancock U.S.A.	American Balanced Fund	(1)	48,572
*	John Hancock U.S.A.	BlackRock Global Allocation	(1)	28,059
*	John Hancock U.S.A.	Mutual Global Discovery	(1)	14,017
*	John Hancock U.S.A.	Global Bond Fund	(1)	58,989
*	John Hancock U.S.A.	PIMCO Real Return	(1)	113,600
*	John Hancock U.S.A.	T. Rowe Price Spectrum Inc.	(1)	63,563
*	John Hancock U.S.A.	Total Return Fund	(1)	2,464
*	John Hancock U.S.A.	Total Bond Market Fund	(1)	15,328
*	John Hancock U.S.A.	John Hancock Stable Value	(1)	238,027
		Total pooled separate accounts		4,202,866
*	Participants	Participant loans - 3.25% - 6.25%, with various maturities through August 2039		135,331
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES				$ 4,338,197

The above information has been certified as complete and accurate by John Hancock Life Insurance Company (U.S.A.), the Custodian of the Plan.

* Represents party-in-interest.

(1) Cost information may be omitted as the investment is participant-directed.

NATIONAL TUBE SUPPLY COMPANY
401(K) SAVINGS PLAN
University Park, Illinois

FINANCIAL STATEMENTS
December 31, 2013 and 2012

CliftonLarsonAllen

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INDEPENDENT AUDITORS' REPORT

Plan Trustees and Plan Administrator
National Tube Supply Company 401(k) Savings Plan
University Park, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of National Tube Supply Company 401(k) Savings Plan (the "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.

Auditors' 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 (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), 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 John Hancock Life Insurance Company (U.S.A.), the Custodian 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 Custodian holds the Plan's investment assets and executes related transactions. The Plan administrator has obtained certifications from the Custodian as of and for the years ended December 31, 2013 and 2012, that the information provided to the Plan administrator by the Custodian is complete and accurate.

Disclaimer of Opinion

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

Other Matters

The supplemental schedule of assets (held at end of year) as of December 31, 2013, is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA 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 Custodian, 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Oak Brook, Illinois
October 2, 2014

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2013 and 2012

ASSETS

	2013	2012
Non-interest-bearing cash	$ 1,635	$ 2,843
Participant-directed investments, at fair value	4,202,866	3,082,401
Notes receivable from participants	135,331	110,886
Total assets	4,339,832	3,196,130

LIABILITIES

DISTRIBUTIONS PAYABLE	19,121	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 4,320,711	$ 3,196,130

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

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2013 and 2012

	2013	2012
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income	$ 581,111	$ 330,217
Interest income from notes receivable from participants	4,185	3,828
Contributions:		
Employer	113,954	93,363
Participants	391,261	338,887
Rollover	91,598	93,863
Total contributions	596,813	526,113
Total additions	1,182,109	860,158
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	53,456	125,789
Administrative expenses	4,072	3,949
Total deductions	57,528	129,738
NET INCREASE	1,124,581	730,420
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	3,196,130	2,465,710
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 4,320,711	$ 3,196,130

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

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2013 and 2012

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the National Tube Supply Company 401(k) Savings 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 established to provide deferred compensation benefits to eligible employees. Under the Plan, all of the employees of National Tube Supply Company (the "Employer"), who have met eligibility requirements, may participate in the Plan, unless they elect to waive participation. The Plan and the Trust, of which it is a part, are intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code (IRC) and similar state tax laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

All employees of the Employer are eligible to participate. Employees may become Plan members on January 1st or July 1st after attainment of eligibility. Employees must have attained the age of 18 to be eligible.

Eligible employees employed on the last day of an allocation period, as defined in the Plan document, are eligible to receive the Employer matching contributions. Eligible employees employed on the last day of an allocation period and having 1,000 hours of service are eligible to receive the discretionary profit sharing contribution.

Contributions

Each year participants may contribute through payroll deductions up to 100% of pre-tax annual compensation. Participants may also contribute amounts representing after-tax payroll deductions. Employee contribution levels may be adjusted up or down on the first day of each quarter. Participants may also roll over amounts representing distributions from qualified employee benefit or defined contribution plans.

The Employer may make a matching contribution to eligible employees in an amount to be determined at the Employer's discretion. The Employer may also make a discretionary profit sharing contribution. Each participant receives a share of the Employer's discretionary contribution, if eligible. The Employer did not make a discretionary profit sharing contribution for the years ended December 31, 2013 and 2012. Contributions are subject to certain limitations. The Employer contributions are made on a monthly basis on the last day of each month. The Employer made matching contributions of 50% of employee contributions up to a maximum of 4% of qualified compensation amounting to $113,954 and $93,363 for the years ended December 31, 2013 and 2012, respectively.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Participant Accounts

Each participant's account is credited with the participant's contribution, the Employer's matching contribution, and allocations of the Employer's discretionary contribution, forfeitures, and Plan earnings (or losses) and charged with an allocation of administrative expenses, if any. Allocations are based on participant compensation or account balances, as set forth in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Participants' Investment Options

The assets of the Plan are held by John Hancock Life Insurance Company (U.S.A.) (John Hancock), the Custodian of the Plan. The Plan currently offers various pooled separate accounts as investment options for Plan participants. Participants may change their investment options daily.

Vesting

Participants are immediately vested in their contributions and any rollover contributions plus actual earnings thereon. Vesting in the Employer's matching and discretionary contribution portions of their accounts plus actual earnings thereon is based on years of continuous service. Participants are 20% vested in their Employer contribution accounts after one year of service and vest an additional 20% for each additional year of service thereafter. Participants are 100% vested after five years of service. Upon normal retirement at age 65, death, or disability, the full value of the participant's account becomes immediately vested and is nonforfeitable.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the participant notes receivable. Loan terms range from one to five years, or longer for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at rates that range from 3.25% to 6.25%, as of December 31, 2013, which are commensurate with local prevailing rates. Principal and interest are paid ratably through payroll deductions. These loans mature at various dates through August 2039.

Payment of Benefits

Upon termination of service due to death, retirement on or after normal retirement age of 65, or other reasons, benefits are payable in a lump-sum or a direct rollover to a qualified retirement plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance. Payment of vested account balances of $1,000 up to $5,000 will automatically be rolled over into an IRA unless the participant elects a lump-sum distribution. The Plan's provisions also provide for withdrawals in the event of financial hardship, as defined by the Plan.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Forfeited Accounts

At December 31, 2013 and 2012, forfeited nonvested accounts totaled $1,635 and $2,843, respectively. The nonvested accounts may be used to reduce future Employer's matching and discretionary profit sharing contributions. For the year ended December 31, 2013, forfeitures in the amount of $2,271 were used to make corrective contributions for 2012. Forfeitures in the amount of $7,914 were used to reduce Employer contributions in 2012.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates in Preparing Financial Statements

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Investments in insurance company pooled separate accounts are reported at the value reported to the Plan by the insurance company, which approximates fair value.

Purchases and sales of securities are recorded on the trade date. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold 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, if any, are reclassified as distributions based upon the terms of the Plan document.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Employer absorbs certain administrative costs such as audit fees and administrative salaries. Although the Employer has elected to pay some administrative costs, it is not obligated to do so. If the Employer ceases to pay all or part of these costs in the future, they will be paid by the Plan's Trustee out of the assets of the Plan.

NOTE 3 - FAIR VALUE MEASUREMENTS

The Plan measures, monitors, and discloses its assets on a fair value basis in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification 820 (ASC 820), *Fair Value Measurements and Disclosures*. ASC 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to 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 are described below:

- Level 1 - Valuations based on quoted prices for identical assets or liabilities in active markets;
- Level 2 - Valuations based on quoted prices for similar assets or liabilities or identical assets or liabilities in less active markets, such as dealer or broker markets; and
- Level 3 - Valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are unobservable, such as pricing models, discounted cash flow models, and similar techniques not based on market, exchange, dealer, or broker-traded transactions.

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 maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for instruments measured at fair value and their classification in the valuation hierarchy. There have been no changes in the methodologies used at December 31, 2013 or 2012.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

Pooled separate accounts are valued at the net asset value, as reported by John Hancock and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. The pooled separate accounts mainly invest in securities traded on nationally recognized securities exchanges and active dealer markets. Participant-initiated redemptions of funds from the stable value fund may be delayed up to seven days to maintain adequate liquidity or up to 30 days if a previous withdrawal may have an adverse impact on the fund. The other pooled separate accounts do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions. Pooled separate accounts are considered Level 2 investments.

The following is a description of the nature and risks of the categories of assets by major security type:

Aggressive growth funds: These investments seek long-term capital appreciation by investing primarily in common stocks and securities which display these characteristics.

Growth funds: These investments seek long-term growth of capital by investing in common stocks, including foreign stocks.

Growth and income funds: Includes investments that seek long-term growth of capital and income by investing in solid companies with the greatest potential for future dividends, rather than current income.

Income funds: These funds seek to achieve maximum total return, consistent with preservation of capital and prudent investment management.

Conservative funds: These funds seek to achieve maximum current income, consistent with preservation of principal and liquidity by investing in high-quality, U.S. dollar-dominated money market accounts.

Target date funds: Includes investments that seek to provide high total return in the years leading up to retirement. To achieve this, the funds use an asset allocation strategy designed for investors based on their expected retirement date.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

The following table presents assets measured at fair value by classification within the fair value hierarchy as of December 31, 2013 and 2012:

	Fair Value Measurements Using			
December 31, 2013	**Quoted Prices in Active Markets for Identical Assets (Level 1)**	**Significant Other Observable Inputs (Level 2)**	**Significant Unobservable Inputs (Level 3)**	**Total**
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 529,404	$ -	$ 529,404
Growth funds	-	1,541,249	-	1,541,249
Growth and income funds	-	524,736	-	524,736
Income funds	-	360,115	-	360,115
Conservative funds	-	308,784	-	308,784
Target date funds	-	938,578	-	938,578
Total assets at fair value	$ -	$ 4,202,866	$ -	$ 4,202,866
December 31, 2012				
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 347,051	$ -	$ 347,051
Growth funds	-	1,077,732	-	1,077,732
Growth and income funds	-	515,334	-	515,334
Income funds	-	400,870	-	400,870
Conservative funds	-	282,163	-	282,163
Target date funds	-	459,251	-	459,251
Total assets at fair value	$ -	$ 3,082,401	$ -	$ 3,082,401

The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan management 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 4 - INFORMATION CERTIFIED BY THE CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Custodian has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate:

a. Investments as shown in the accompanying Statements of Net Assets Available for Benefits of $4,202,866 and $3,082,401 as of December 31, 2013 and 2012, respectively.

b. Notes receivable from participants as shown in the accompanying Statements of Net Assets Available for Benefits of $135,331 and $110,886 as of December 31, 2013 and 2012, respectively.

c. Investment income as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $581,111 and $330,217 for the years ended December 31, 2013 and 2012, respectively.

d. Interest income from notes receivable from participants as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $4,185 and $3,828 for the years ended December 31, 2013 and 2012, respectively.

The Plan's investments are held by John Hancock. The fair value of individual investments that represent 5% or more of the Plan's net assets as of December 31, 2013 and 2012 are as follows:

	2013	2012
Pooled separate account:		
Retirement Living 2025	$ 374,467	$ *
Lifestyle Balanced	316,439	374,720
Lifestyle Growth	1,039,504	738,906
Lifestyle Aggressive	224,238	*
John Hancock Stable Value	238,027	225,251

* - Less than 5% of the Plan's net assets for 2012.

During the years ended December 31, the Plan's investments appreciated in fair value as follows:

	2013	2012
Pooled separate accounts	$ 581,111	$ 330,217

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

NOTE 5 - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are funds managed by John Hancock. John Hancock is the Custodian and investment manager of the Plan; therefore, these transactions qualify as party-in-interest. Certain costs of administering the Plan are paid by the Plan sponsor and are not material to the total net assets of the Plan. Assets managed by and held with John Hancock aggregated $4,202,866 and $3,082,401 at December 31, 2013 and 2012, respectively.

NOTE 6 - 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. In the event of Plan termination, participants would become 100% vested in their accounts. Any unallocated assets of the Plan would be allocated to participant accounts and distributed in such a manner as the Employer may determine.

NOTE 7 - INCOME TAX STATUS

The Plan adopted a volume submitter prototype plan, which received a favorable opinion letter from the IRS as of March 31, 2008, which stated that the Plan is designed in accordance with applicable sections of the IRC and with respect to the tax-qualified status of the Plan. The volume submitter prototype plan opinion letter has been relied upon by this Plan. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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 if the organization has taken an uncertain position that more-likely-than-not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 8 - 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 value of investment securities will occur in the near term and that such changes could materially affect the participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

NOTE 9 - SUBSEQUENT EVENTS

Management evaluated subsequent events through October 2, 2014, the date the financial statements were available to be issued. Events or transactions occurring after December 31, 2013, but prior to October 2, 2014 that provided additional evidence about conditions that existed at December 31, 2013, have been recognized in the financial statements for the year ended December 31, 2013. Events or transactions that provided evidence about conditions that did not exist at December 31, 2013, but arose before the financial statements were available to be issued have not been recognized in the financial statements for the year ended December 31, 2013.

SUPPLEMENTAL INFORMATION

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR) -
PLAN EMPLOYER ID 36-3720618 PLAN NUMBER 001
December 31, 2013

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
		Pooled separate accounts:		
*	John Hancock U.S.A.	Retirement Living 2010	(1)	$ 107,632
*	John Hancock U.S.A.	Retirement Living 2015	(1)	3,352
*	John Hancock U.S.A.	Retirement Living 2020	(1)	126,673
*	John Hancock U.S.A.	Retirement Living 2025	(1)	374,467
*	John Hancock U.S.A.	Retirement Living 2030	(1)	176,887
*	John Hancock U.S.A.	Retirement Living 2035	(1)	14,197
*	John Hancock U.S.A.	Retirement Living 2040	(1)	51,044
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*	John Hancock U.S.A.	T. Rowe Price Spectrum Inc.	(1)	63,563
*	John Hancock U.S.A.	Total Return Fund	(1)	2,464
*	John Hancock U.S.A.	Total Bond Market Fund	(1)	15,328
*	John Hancock U.S.A.	John Hancock Stable Value	(1)	238,027
		Total pooled separate accounts		4,202,866
*	Participants	Participant loans - 3.25% - 6.25%, with various maturities through August 2039		135,331
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES				$ 4,338,197

The above information has been certified as complete and accurate by John Hancock Life Insurance Company (U.S.A.), the Custodian of the Plan.

* Represents party-in-interest.

(1) Cost information may be omitted as the investment is participant-directed.

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
SCHEDULE OF ASSETS (HELD AT END OF YEAR) -
PLAN EMPLOYER ID 36-3720618 PLAN NUMBER 001
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
		Pooled separate accounts:		
*	John Hancock U.S.A.	Retirement Living 2010	(1)	$ 107,632
*	John Hancock U.S.A.	Retirement Living 2015	(1)	3,352
*	John Hancock U.S.A.	Retirement Living 2020	(1)	126,673
*	John Hancock U.S.A.	Retirement Living 2025	(1)	374,467
*	John Hancock U.S.A.	Retirement Living 2030	(1)	176,887
*	John Hancock U.S.A.	Retirement Living 2035	(1)	14,197
*	John Hancock U.S.A.	Retirement Living 2040	(1)	51,044
*	John Hancock U.S.A.	Retirement Living 2045	(1)	79,616
*	John Hancock U.S.A.	Retirement Living 2050	(1)	4,710
*	John Hancock U.S.A.	Lifestyle Conservative	(1)	70,757
*	John Hancock U.S.A.	Lifestyle Moderate	(1)	106,171
*	John Hancock U.S.A.	Lifestyle Balanced	(1)	316,439
*	John Hancock U.S.A.	Lifestyle Growth	(1)	1,039,504
*	John Hancock U.S.A.	Lifestyle Aggressive	(1)	224,238
*	John Hancock U.S.A.	Real Estate Securities Funds	(1)	3,039
*	John Hancock U.S.A.	DFA Emerging Markets Value	(1)	99,681
*	John Hancock U.S.A.	DFA International Value	(1)	39,697
*	John Hancock U.S.A.	Mid Cap Stock Fund	(1)	40,286
*	John Hancock U.S.A.	Small Cap Growth Index	(1)	70,191
*	John Hancock U.S.A.	International Equity Index Fund	(1)	3,254
*	John Hancock U.S.A.	Small Cap Index Fund	(1)	4,086
*	John Hancock U.S.A.	EuroPacific Growth Fund	(1)	44,932
*	John Hancock U.S.A.	Small Company Value Fund	(1)	12,841
*	John Hancock U.S.A.	Small Cap Value Index	(1)	33,162
*	John Hancock U.S.A.	Columbia Mid Cap Value	(1)	101,033
*	John Hancock U.S.A.	Value Fund	(1)	22,159
*	John Hancock U.S.A.	Mid Cap Index Fund	(1)	32,359
*	John Hancock U.S.A.	Oppenheimer Global	(1)	11,607
*	John Hancock U.S.A.	Utilities Fund	(1)	39,989
*	John Hancock U.S.A.	Total Stock Market Index Fund	(1)	171
*	John Hancock U.S.A.	The Growth Fund of America	(1)	211,628
*	John Hancock U.S.A.	Mass Investors Fund	(1)	36,796
*	John Hancock U.S.A.	Equity Income Fund	(1)	93,656
*	John Hancock U.S.A.	500 Index Fund	(1)	23,993
*	John Hancock U.S.A.	American Balanced Fund	(1)	48,572
*	John Hancock U.S.A.	BlackRock Global Allocation	(1)	28,059
*	John Hancock U.S.A.	Mutual Global Discovery	(1)	14,017
*	John Hancock U.S.A.	Global Bond Fund	(1)	58,989
*	John Hancock U.S.A.	PIMCO Real Return	(1)	113,600
*	John Hancock U.S.A.	T. Rowe Price Spectrum Inc.	(1)	63,563
*	John Hancock U.S.A.	Total Return Fund	(1)	2,464
*	John Hancock U.S.A.	Total Bond Market Fund	(1)	15,328
*	John Hancock U.S.A.	John Hancock Stable Value	(1)	238,027
		Total pooled separate accounts		4,202,866
*	Participants	Participant loans - 3.25% - 6.25%, with various maturities through August 2039		135,331
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES				$ 4,338,197

The above information has been certified as complete and accurate by John Hancock Life Insurance Company (U.S.A.), the Custodian of the Plan.

* Represents party-in-interest.

(1) Cost information may be omitted as the investment is participant-directed.

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2013 and 2012

ASSETS

	2013	2012
Non-interest-bearing cash	$ 1,635	$ 2,843
Participant-directed investments, at fair value	4,202,866	3,082,401
Notes receivable from participants	135,331	110,886
Total assets	4,339,832	3,196,130

LIABILITIES

DISTRIBUTIONS PAYABLE	19,121	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 4,320,711	$ 3,196,130

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

NATIONAL TUBE SUPPLY COMPANY 401(K) SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2013 and 2012

	2013	2012
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income	$ 581,111	$ 330,217
Interest income from notes receivable from participants	4,185	3,828
Contributions:		
Employer	113,954	93,363
Participants	391,261	338,887
Rollover	91,598	93,863
Total contributions	596,813	526,113
Total additions	1,182,109	860,158
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	53,456	125,789
Administrative expenses	4,072	3,949
Total deductions	57,528	129,738
NET INCREASE	1,124,581	730,420
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	3,196,130	2,465,710
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 4,320,711	$ 3,196,130

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

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the National Tube Supply Company 401(k) Savings 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 established to provide deferred compensation benefits to eligible employees. Under the Plan, all of the employees of National Tube Supply Company (the "Employer"), who have met eligibility requirements, may participate in the Plan, unless they elect to waive participation. The Plan and the Trust, of which it is a part, are intended to satisfy all of the requirements for a qualified retirement plan under the appropriate provisions of the Internal Revenue Code (IRC) and similar state tax laws. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Eligibility

All employees of the Employer are eligible to participate. Employees may become Plan members on January 1st or July 1st after attainment of eligibility. Employees must have attained the age of 18 to be eligible.

Eligible employees employed on the last day of an allocation period, as defined in the Plan document, are eligible to receive the Employer matching contributions. Eligible employees employed on the last day of an allocation period and having 1,000 hours of service are eligible to receive the discretionary profit sharing contribution.

Contributions

Each year participants may contribute through payroll deductions up to 100% of pre-tax annual compensation. Participants may also contribute amounts representing after-tax payroll deductions. Employee contribution levels may be adjusted up or down on the first day of each quarter. Participants may also roll over amounts representing distributions from qualified employee benefit or defined contribution plans.

The Employer may make a matching contribution to eligible employees in an amount to be determined at the Employer's discretion. The Employer may also make a discretionary profit sharing contribution. Each participant receives a share of the Employer's discretionary contribution, if eligible. The Employer did not make a discretionary profit sharing contribution for the years ended December 31, 2013 and 2012. Contributions are subject to certain limitations. The Employer contributions are made on a monthly basis on the last day of each month. The Employer made matching contributions of 50% of employee contributions up to a maximum of 4% of qualified compensation amounting to $113,954 and $93,363 for the years ended December 31, 2013 and 2012, respectively.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Participant Accounts

Each participant's account is credited with the participant's contribution, the Employer's matching contribution, and allocations of the Employer's discretionary contribution, forfeitures, and Plan earnings (or losses) and charged with an allocation of administrative expenses, if any. Allocations are based on participant compensation or account balances, as set forth in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Participants' Investment Options

The assets of the Plan are held by John Hancock Life Insurance Company (U.S.A.) (John Hancock), the Custodian of the Plan. The Plan currently offers various pooled separate accounts as investment options for Plan participants. Participants may change their investment options daily.

Vesting

Participants are immediately vested in their contributions and any rollover contributions plus actual earnings thereon. Vesting in the Employer's matching and discretionary contribution portions of their accounts plus actual earnings thereon is based on years of continuous service. Participants are 20% vested in their Employer contribution accounts after one year of service and vest an additional 20% for each additional year of service thereafter. Participants are 100% vested after five years of service. Upon normal retirement at age 65, death, or disability, the full value of the participant's account becomes immediately vested and is nonforfeitable.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the participant notes receivable. Loan terms range from one to five years, or longer for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at rates that range from 3.25% to 6.25%, as of December 31, 2013, which are commensurate with local prevailing rates. Principal and interest are paid ratably through payroll deductions. These loans mature at various dates through August 2039.

Payment of Benefits

Upon termination of service due to death, retirement on or after normal retirement age of 65, or other reasons, benefits are payable in a lump-sum or a direct rollover to a qualified retirement plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance. Payment of vested account balances of $1,000 up to $5,000 will automatically be rolled over into an IRA unless the participant elects a lump-sum distribution. The Plan's provisions also provide for withdrawals in the event of financial hardship, as defined by the Plan.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Forfeited Accounts

At December 31, 2013 and 2012, forfeited nonvested accounts totaled $1,635 and $2,843, respectively. The nonvested accounts may be used to reduce future Employer's matching and discretionary profit sharing contributions. For the year ended December 31, 2013, forfeitures in the amount of $2,271 were used to make corrective contributions for 2012. Forfeitures in the amount of $7,914 were used to reduce Employer contributions in 2012.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates in Preparing Financial Statements

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Investments in insurance company pooled separate accounts are reported at the value reported to the Plan by the insurance company, which approximates fair value.

Purchases and sales of securities are recorded on the trade date. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold 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, if any, are reclassified as distributions based upon the terms of the Plan document.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Employer absorbs certain administrative costs such as audit fees and administrative salaries. Although the Employer has elected to pay some administrative costs, it is not obligated to do so. If the Employer ceases to pay all or part of these costs in the future, they will be paid by the Plan's Trustee out of the assets of the Plan.

NOTE 3 - FAIR VALUE MEASUREMENTS

The Plan measures, monitors, and discloses its assets on a fair value basis in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification 820 (ASC 820), *Fair Value Measurements and Disclosures.* ASC 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to 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 are described below:

- Level 1 - Valuations based on quoted prices for identical assets or liabilities in active markets;
- Level 2 - Valuations based on quoted prices for similar assets or liabilities or identical assets or liabilities in less active markets, such as dealer or broker markets; and
- Level 3 - Valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are unobservable, such as pricing models, discounted cash flow models, and similar techniques not based on market, exchange, dealer, or broker-traded transactions.

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 maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for instruments measured at fair value and their classification in the valuation hierarchy. There have been no changes in the methodologies used at December 31, 2013 or 2012.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

Pooled separate accounts are valued at the net asset value, as reported by John Hancock and as supported by the unit prices of actual purchase and sale transactions occurring as of or close to the financial statement date. The pooled separate accounts mainly invest in securities traded on nationally recognized securities exchanges and active dealer markets. Participant-initiated redemptions of funds from the stable value fund may be delayed up to seven days to maintain adequate liquidity or up to 30 days if a previous withdrawal may have an adverse impact on the fund. The other pooled separate accounts do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions. Pooled separate accounts are considered Level 2 investments.

The following is a description of the nature and risks of the categories of assets by major security type:

Aggressive growth funds: These investments seek long-term capital appreciation by investing primarily in common stocks and securities which display these characteristics.

Growth funds: These investments seek long-term growth of capital by investing in common stocks, including foreign stocks.

Growth and income funds: Includes investments that seek long-term growth of capital and income by investing in solid companies with the greatest potential for future dividends, rather than current income.

Income funds: These funds seek to achieve maximum total return, consistent with preservation of capital and prudent investment management.

Conservative funds: These funds seek to achieve maximum current income, consistent with preservation of principal and liquidity by investing in high-quality, U.S. dollar-dominated money market accounts.

Target date funds: Includes investments that seek to provide high total return in the years leading up to retirement. To achieve this, the funds use an asset allocation strategy designed for investors based on their expected retirement date.

NOTE 3 - FAIR VALUE MEASUREMENTS (continued)

The following table presents assets measured at fair value by classification within the fair value hierarchy as of December 31, 2013 and 2012:

	Fair Value Measurements Using			
December 31, 2013	**Quoted Prices in Active Markets for Identical Assets (Level 1)**	**Significant Other Observable Inputs (Level 2)**	**Significant Unobservable Inputs (Level 3)**	**Total**
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 529,404	$ -	$ 529,404
Growth funds	-	1,541,249	-	1,541,249
Growth and income funds	-	524,736	-	524,736
Income funds	-	360,115	-	360,115
Conservative funds	-	308,784	-	308,784
Target date funds	-	938,578	-	938,578
Total assets at fair value	$ -	$ 4,202,866	$ -	$ 4,202,866
December 31, 2012				
Pooled separate accounts:				
Aggressive growth funds	$ -	$ 347,051	$ -	$ 347,051
Growth funds	-	1,077,732	-	1,077,732
Growth and income funds	-	515,334	-	515,334
Income funds	-	400,870	-	400,870
Conservative funds	-	282,163	-	282,163
Target date funds	-	459,251	-	459,251
Total assets at fair value	$ -	$ 3,082,401	$ -	$ 3,082,401

The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future values. Furthermore, although the Plan management 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 4 - INFORMATION CERTIFIED BY THE CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Custodian has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate:

a. Investments as shown in the accompanying Statements of Net Assets Available for Benefits of $4,202,866 and $3,082,401 as of December 31, 2013 and 2012, respectively.

b. Notes receivable from participants as shown in the accompanying Statements of Net Assets Available for Benefits of $135,331 and $110,886 as of December 31, 2013 and 2012, respectively.

c. Investment income as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $581,111 and $330,217 for the years ended December 31, 2013 and 2012, respectively.

d. Interest income from notes receivable from participants as shown in the accompanying Statements of Changes in Net Assets Available for Benefits of $4,185 and $3,828 for the years ended December 31, 2013 and 2012, respectively.

The Plan's investments are held by John Hancock. The fair value of individual investments that represent 5% or more of the Plan's net assets as of December 31, 2013 and 2012 are as follows:

	2013	2012
Pooled separate account:		
Retirement Living 2025	$ 374,467	$ *
Lifestyle Balanced	316,439	374,720
Lifestyle Growth	1,039,504	738,906
Lifestyle Aggressive	224,238	*
John Hancock Stable Value	238,027	225,251

* - Less than 5% of the Plan's net assets for 2012.

During the years ended December 31, the Plan's investments appreciated in fair value as follows:

	2013	2012
Pooled separate accounts	$ 581,111	$ 330,217

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

NOTE 5 - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are funds managed by John Hancock. John Hancock is the Custodian and investment manager of the Plan; therefore, these transactions qualify as party-in-interest. Certain costs of administering the Plan are paid by the Plan sponsor and are not material to the total net assets of the Plan. Assets managed by and held with John Hancock aggregated $4,202,866 and $3,082,401 at December 31, 2013 and 2012, respectively.

NOTE 6 - 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. In the event of Plan termination, participants would become 100% vested in their accounts. Any unallocated assets of the Plan would be allocated to participant accounts and distributed in such a manner as the Employer may determine.

NOTE 7 - INCOME TAX STATUS

The Plan adopted a volume submitter prototype plan, which received a favorable opinion letter from the IRS as of March 31, 2008, which stated that the Plan is designed in accordance with applicable sections of the IRC and with respect to the tax-qualified status of the Plan. The volume submitter prototype plan opinion letter has been relied upon by this Plan. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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 if the organization has taken an uncertain position that more-likely-than-not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

NOTE 8 - 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 value of investment securities will occur in the near term and that such changes could materially affect the participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

NOTE 9 - SUBSEQUENT EVENTS

Management evaluated subsequent events through October 2, 2014, the date the financial statements were available to be issued. Events or transactions occurring after December 31, 2013, but prior to October 2, 2014 that provided additional evidence about conditions that existed at December 31, 2013, have been recognized in the financial statements for the year ended December 31, 2013. Events or transactions that provided evidence about conditions that did not exist at December 31, 2013, but arose before the financial statements were available to be issued have not been recognized in the financial statements for the year ended December 31, 2013.

Electronic Filing Authorization for the 2013 Form 5500 / Form 5500-SF

Name of Plan: National Tube Supply Company 401(k) Savings Plan

Plan Year End: 12/31/2013

Part I Authorization of Practitioner to Electronically Sign and File

I hereby authorize our TPA to electronically sign and file the above-named return/report through EFAST2.

I understand that in granting this authority:

- I/We must manually sign and date page 1 of the Form 5500 and / or page 2 of Form 5500-SF and provide a scanned copy of that signature page to our TPA before the electronic filing can be initiated;
- Our TPA will retain a copy of this written authorization in its records;
- Our TPA will notify the individual(s) signing below as plan administrator/sponsor about any inquiries and information it receives from EFAST2, DOL, IRS, or PBGC regarding this annual return/report; and
- A copy of my signature, as it appears on page 1 of the Form 5500 and / or page 2 of the Form 5500-SF, will be included with the return/report posted by the Department of Labor on the Internet for public disclosure.
- Our TPA shall not be deemed a Plan Administrator or other fiduciary with respect to the Plan solely on account of the services performed under this authorization

This authorization is applicable only to the filing for the above-named Plan and applies only for Plan year end stated above.

Plan Administrator / Sponsor _____ Date 10/1/14

Part II Acknowledgement of Receipt of Authorization

On behalf of your TPA, I hereby certify that the firm will use the authority granted only for the express purposes described above; that the firm will not disclose confidential information to any parties other than the DOL, as required for EFAST filing; and that the firm will take reasonable steps to assure that confidential information provided by the Plan Administrator or Plan Sponsor is protected from unauthorized disclosure.

TPA: _____ Date_____

(Signature & Title)

The designated service provider must retain this authorization.

Do not submit this form to the DOL unless requested to do so.

Form **5558**
(Rev. August 2012)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File Certain Employee Plan Returns

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions.
▶ Information about Form 5558 and its instructions is at *www.irs.gov/form5558*

OMB No. 1545-0212

File With IRS Only

Part I Identification

A Name of filer, plan administrator, or plan sponsor (see instructions)
National Tube Supply Company
Number, street, and room or suite no. (If a P.O. box, see instructions)
925 Central Avenue
City or town, state, and ZIP code
University Park IL 60484

B Filer's identifying number (see instructions)
Employer identification number (EIN) (9 digits XX-XXXXXXX)
36-3720618
Social security number (SSN) (9 digits XXX-XX-XXXX)

C Plan name	Plan number	Plan year ending— MM	DD	YYYY
National Tube Supply Company 401(k) Savings Plan	0 0 1	12	31	2013

Part II Extension of Time To File Form 5500 Series, and/or Form 8955-SSA

1 ☐ Check this box if you are requesting an extension of time on line 2 to file the first Form 5500 series return/report for the plan listed in Part 1, C above.

2 I request an extension of time until 10 / 15 / 2014 to file Form 5500 series (see instructions).
Note. A signature IS NOT required if you are requesting an extension to file Form 5500 series.

3 I request an extension of time until 10 / 15 / 2014 to file Form 8955-SSA (see instructions).
Note. A signature IS NOT required if you are requesting an extension to file Form 8955-SSA.

The application **is automatically approved** to the date shown on line 2 and/or line 3 (above) if: **(a)** the Form 5558 is filed on or before the normal due date of Form 5500 series, and/or Form 8955-SSA for which this extension is requested, and **(b)** the date on line 2 and/or line 3 (above) is not later than the 15th day of the third month after the normal due date.

Part III Extension of Time To File Form 5330 *(see instructions)*

4 I request an extension of time until / / to file Form 5330.
You may be approved for up to a 6 month extension to file Form 5330, after the normal due date of Form 5330.

a Enter the Code section(s) imposing the tax . . . . . ▶ a

b Enter the payment amount attached . . . . . ▶ b

c For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date . . . ▶ c

5 State in detail why you need the extension:
Additional time needed for EFAST compliance

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Edward J. Emering, EA

Signature ▶ **Date** ▶ 07/21/2014

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

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 ☒ 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 National Tube Supply Company 401(k) Savings Plan

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 08/01/1995

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

925 Central Avenue

University Park IL 60484

2b Employer Identification Number (EIN) 36-3720618

2c Sponsor's telephone number (708) 534-2700

2d Business code (see instructions) 423500

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	Signature of plan administrator	Date 10/15/14	Gary Chess Enter name of individual signing as plan administrator
SIGN HERE	Signature of employer/plan sponsor	Date 10/15/14	Gary Chess 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)