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 05/01/2013 and ending 04/30/2014

A This return/report is for:
- [X] 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. . . . . ▶ [X]

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
OHIO CARPENTERS' ANNUITY PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 05/01/1994

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

BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY FUND

700 TOWER DRIVE
SUITE 300
TROY, MI 48098

2b Employer Identification Number (EIN)
34-1778747

2c Sponsor's telephone number
248-813-9800

2d Business code (see instructions)
238300

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.	02/04/2015	DARRIS GAROUFALIS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	02/09/2015	MARY WEIR
	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)

LEGACY PROFESSIONALS LLP

311 S. WACKER DRIVE, STE. 4000
CHICAGO, IL 60606

Preparer's telephone number (optional)
312-368-0500

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**	9984
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**	7265
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	3185
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	10450
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	53
f	Total. Add lines **6d** and **6e**.	**6f**	10503
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	10503
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	987

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service 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 05/01/2013 and ending 04/30/2014

A Name of plan
OHIO CARPENTERS' ANNUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY FUND

D Employer Identification Number (EIN)
34-1778747

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)

NEW YORK LIFE INVESTMENT MANAGEMENT

52-2206685

(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?
19 21 36 38 49 50 63 65 68 15	NONE	756057	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

MACKAY SHIELDS

13-4080466

(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?
28 51 52	NONE	218206	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

MEKETA INVESTMENT GROUP

04-2659023

(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?
27	NONE	199984	Yes [ ] No [X]	Yes [ ] No [X]		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)

SHUMAKER, LOOP & KENDRICK, LLP

34-4439491

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	91672	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

SEGAL SELECT INSURANCE SERVICES

46-0619194

(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?
23 53	NONE	54432	Yes [X] No [ ]	Yes [ ] No [X]	18630	Yes [ ] No [X]

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

SHARON RUTKOWSKI

34-1778747

(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?
30	EMPLOYEE	58018	Yes [ ] No [X]	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)

LEGACY PROFESSIONALS LLP

32-0043599

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	56454	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

BENESYS, INC.

38-2383171

(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?
14	NONE	42450	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

ROGER NEWMAN

34-1778747

(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?
30	EMPLOYEE	32422	Yes [ ] No [X]	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)

BANK OF NEW YORK MELLON

13-5160382

(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?
19 50 57 62 71 72	NONE	31355	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

MACALA & PIATT, LLC

34-1933033

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	30875	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

PATRICIA HOSLER

34-1778747

(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?
30	EMPLOYEE	30576	Yes [ ] No [ ]	Yes [ ] No [ ]	0	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)

EXODUS INTEGRITY SERVICES, INC.

31-1563335

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	NONE	28600	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

JBM COMPUTER CONSULTANTS, INC.

16-1173118

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	NONE	17990	Yes [ ] No [X]	Yes [ ] No [X]		Yes [ ] No [ ]

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

KEY BANK

34-0797057

(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?
27 99	NONE	13496	Yes [ ] No [X]	Yes [ ] No [X]		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)

DELOITTE & TOUCHE LLP

13-3891517

(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?
40	NONE	4870	Yes ☐ No ☐	Yes ☐ No ☐	0	Yes ☐ No ☐

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

VORYS, SATER, SEYMOUR & PEAS

31-4333125

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	2496	Yes ☐ No ☐	Yes ☐ No ☐	0	Yes ☐ No ☐

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

UNITED ACTUARIAL SERVICES, INC.

35-2156428

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	NONE	6500	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
SEGAL SELECT INSURANCE SERVICES	53	13762

(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.
ULLICO CASUALTY GROUP 52-2197710	COMMISSIONS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
SEGAL SELECT INSURANCE SERVICES	53	4868

(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.
RLI INSURANCE 37-0915434	COMMISSIONS

(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
PATRICIA HOSLER 34-1778747	30	DID NOT RESPOND TO MULTIPLE PLAN REQUESTS FOR INFORMATION REGARDING INDIRECT COMPENSATION RECEIVED.

(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
DELOITTE & TOUCHE LLP 13-3891517	10	DID NOT RESPOND TO MULTIPLE PLAN REQUESTS FOR INFORMATION REGARDING INDIRECT COMPENSATION RECEIVED.

(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
VORYS, SATER, SEYMOUR & PEAS 31-4333125	29	DID NOT RESPOND TO MULTIPLE PLAN REQUESTS FOR INFORMATION REGARDING INDIRECT COMPENSATION RECEIVED.

(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 05/01/2013 and ending 04/30/2014

A Name of plan
OHIO CARPENTERS' ANNUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY FUND

D Employer Identification Number (EIN)
34-1778747

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: EB TEMPORARY INVESTMENT

b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON

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)
25-6078093-023	C	2200498

a Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL NATURAL RES STOCK INDX NL FD

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

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)
90-0337987-287	C	16115308

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)

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)

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)

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	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of 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 05/01/2013 and ending 04/30/2014

A Name of plan
OHIO CARPENTERS' ANNUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY FUND

D Employer Identification Number (EIN)
34-1778747

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	405546	1027370
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4236535	2132572
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	867827	2251822
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1463950	19531
(2) U.S. Government securities	1c(2)	17050549	20843140
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	11674046	12200621
(B) All other	1c(3)(B)	38602440	49974050
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	349398	1714938
(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)		
(9) Value of interest in common/collective trusts	1c(9)	1295713	18315806
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	133543443	116834400
(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	209489447	225314250
Liabilities			
g Benefit claims payable	1g	269263	0
h Operating payables	1h	22901	78012
i Acquisition indebtedness	1i		
j Other liabilities	1j	767336	976165
k Total liabilities (add all amounts in lines 1g through1j)	1k	1059500	1054177
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	208429947	224260073

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)	17051315	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)	1173	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		17052488
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	618	
(B) U.S. Government securities	2b(1)(B)	579347	
(C) Corporate debt instruments	2b(1)(C)	2907201	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3487166
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	24978	
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3368572	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3393550
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	38576468	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	39362730	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-786262
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-1016248	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-1016248

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		1115701
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		6889468
c Other income	2c		75803
d Total income. Add all **income** amounts in column (b) and enter total	2d		30211666
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	12232870	
(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)		12232870
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	208382	
(2) Contract administrator fees	2i(2)	322405	
(3) Investment advisory and management fees	2i(3)	933003	
(4) Other	2i(4)	684880	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2148670
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		14381540
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		15830126
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) [X] Unqualified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: LEGACY PROFESSIONALS LLP **(2)** EIN: 32-0043599

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ..... ☐ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

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 05/01/2013 and ending 04/30/2014

A Name of plan
OHIO CARPENTERS' ANNUITY PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY FUND

D Employer Identification Number (EIN)
34-1778747

Part I Distributions

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

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

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

EIN(s): 13-3808042

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

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

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

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):

OHIO CARPENTERS' ANNUITY PLAN

FINANCIAL STATEMENTS

APRIL 30, 2014

OHIO CARPENTERS' ANNUITY PLAN

FINANCIAL STATEMENTS WITH SUPPLEMENTARY INFORMATION

APRIL 30, 2014 AND 2013

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PROFESSIONALS LLP
CERTIFIED PUBLIC ACCOUNTANTS

REPORT OF INDEPENDENT AUDITORS

To the Participants and Trustees of
Ohio Carpenters' Annuity Plan

Report on the Financial Statements

We have audited the accompanying financial statements of Ohio Carpenters' Annuity Plan (the Plan), which comprise the statements of net assets available for benefits as of April 30, 2014 and 2013 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 our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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Opinion
In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Ohio Carpenters' Annuity Plan as of April 30, 2014 and 2013, and the changes in net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Legacy Professionals LLP

Chicago, Illinois

December 11, 2014

OHIO CARPENTERS' ANNUITY PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

APRIL 30, 2014 AND 2013

	2014	2013
ASSETS		
INVESTMENTS - at fair value		
U.S. Government and Government Agency obligations	$ 20,843,140	$ 17,050,549
Corporate bonds and notes	62,174,671	50,276,486
Corporate stocks	1,714,938	349,397
Mutual funds	116,834,400	133,543,443
Common and collective trust	16,115,308	-
Short-term investment funds	2,220,029	2,759,663
Total investments	219,902,486	203,979,538
RECEIVABLES		
Employer contributions	2,132,572	1,430,768
Accrued interest and dividends	851,567	662,777
Settlement income	71,299	-
Due from related organizations - net	394,501	2,057,828
Due from broker	917	1,425
Total receivables	3,450,856	4,152,798
OTHER ASSETS	77,215	203,626
CASH	1,027,370	405,546
Total assets	224,457,927	208,741,508
LIABILITIES AND NET ASSETS		
LIABILITIES		
Accounts payable	78,012	42,298
Due to broker	119,842	-
Total liabilities	197,854	42,298
NET ASSETS AVAILABLE FOR BENEFITS	$ 224,260,073	$ 208,699,210

See accompanying notes to financial statements.

OHIO CARPENTERS' ANNUITY PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED APRIL 30, 2014 AND 2013

	2014	2013
ADDITIONS		
Investment income		
Net appreciation in fair value of investments	$ 6,202,266	$ 12,962,628
Interest and dividends	6,881,109	6,760,363
	13,083,375	19,722,991
Less investment expenses	(933,003)	(856,505)
Investment income - net	12,150,372	18,866,486
Employer contributions - net	17,052,488	16,609,955
Settlement income	71,299	-
Miscellaneous income	4,504	-
Total additions	29,278,663	35,476,441
DEDUCTIONS		
Benefits paid	12,502,133	10,629,125
Administrative expenses	1,019,699	755,925
Total deductions	13,521,832	11,385,050
NET INCREASE BEFORE ALLOCATION OF NET ASSETS	15,756,831	24,091,391
NET ASSETS ALLOCATED TO OHIO & VICINITY CARPENTERS' FRINGE BENEFIT FUND, INC.	(195,968)	-
NET INCREASE	15,560,863	24,091,391
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	208,699,210	184,607,819
End of year	$ 224,260,073	$ 208,699,210

See accompanying notes to financial statements.

NOTE 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting - The accompanying financial statements of Ohio Carpenters' Annuity Plan (the Plan) have been prepared using the accrual basis of accounting.

Investments - The investments of the Plan are reported at fair value. The fair value of a financial instrument is the amount that would be received to sell that asset (or paid to transfer a liability) in an orderly transaction between market participants at the measurement date (the exit price).

Purchases and sales of the investments are reflected on a trade-date basis.

Dividend income is recorded on the ex dividend date. Interest income is recorded on the accrual basis.

Contributions Receivable - Employer contributions due and not paid prior to the year end are recorded as contributions receivable and also include amounts for liquidated damages and underpayments. Employer contributions due as determined by payroll compliance audits are recorded as income when collected. An allowance for uncollectible accounts is considered unnecessary and is not provided.

Payment of Benefits - Benefit payments to participants are recorded upon distribution. At April 30, 2014 there were no distributions approved for payment that were not yet paid at year end. At April 30, 2013, $269,263 of distributions had been approved but not yet paid at year end.

Expenses - Certain investment related expenses are included in net appreciation in fair value of investments.

Estimates - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures in the financial statements. Actual results could differ from those estimates.

Reclassifications - Certain prior year amounts have been reclassified to conform to the current year presentation.

Subsequent Events - Subsequent events have been evaluated through December 11, 2014, which is the date the financial statements were available to be issued.

NOTE 2. DESCRIPTION OF THE PLAN

The Plan was established May 1, 1994 as a result of collective bargaining agreements between the Northeast Ohio District Council of Carpenters, the South Central Ohio District Council of Carpenters and the Construction Employers Association of Cleveland to provide retirement benefits for eligible participants. The Plan is financed entirely by employer contributions as specified in the collective bargaining agreements. Participant contributions are not permitted under the Plan. The Plan is a multiemployer defined contribution retirement plan, subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. Benefits under the plan are not insured by the Pension Benefit Guaranty Corporation.

Under the current provisions of the Plan, each participant's account becomes vested after two years of credited service. The Plan defines a year of service as a year during which a participant completes 200 hours or more of service. Participants 55 years of age or older are exempted from the two year vesting requirement. Each participant's account is credited with the contributions made on his or her behalf and allocations of the Plan's net earnings. The participants do not direct the investment choices of the Plan. The benefit to which participants are entitled is the benefit provided from their account.

Upon death, disability, retirement, or separation from service for more than twelve consecutive months, participants and their beneficiaries are entitled to receive their account balance subject to the payment provisions of the Plan. Benefits may be paid either in quarterly cash installment payments over a specified period not to exceed 10 years, or in a lump-sum payment.

Participants who are not yet vested will forfeit their account balance as of the date on which a one-year break in service is incurred. A "one-year break in service" is generally any Plan year during which a participant earns less than 200 hours of service. Participants who become reemployed under the applicable collective bargaining agreement before incurring five consecutive one-year breaks in service have their previously forfeited balance restored to them. Forfeitures are generally used to defray the administrative expenses of the Plan. Forfeited account balances at April 30, 2014 and 2013 totaled $303,833 and $43,330 respectively.

New York Life Investment Management LLC (New York Life) and its affiliates are responsible for participant recordkeeping and distributions to Plan participants at the direction of the Board of Trustees. New York Life is a trustee of the Plan's investment assets and maintains custody of a majority of Plan assets.

Participants should refer to the summary plan description for more complete information.

NOTE 3. PRIORITIES UPON TERMINATION

It is the intent of the Trustees to continue the Plan in full force and effect; however, the right to discontinue the Plan is reserved to the Trustees. Termination shall not permit any part of the Plan assets to be used for or diverted to purposes other than the exclusive benefit of participants and their beneficiaries, except that provision may be made for the payment of necessary expenses resulting from termination of the Plan.

In the event of termination, all participants will become 100% vested and the net assets of the Plan will be allocated to pay benefits in priorities as prescribed by ERISA and its related regulations. Whether or not a particular participant will receive full benefits should the Plan terminate at some future time will depend on the sufficiency of the Plan's net assets at that time and the priority of those benefits.

NOTE 4. PARTICIPATION IN MULTIEMPLOYER PLANS

As described in Note 15, administrative duties previously performed by shared employees were transitioned to a third party administrator effective January 1, 2014. At April 30, 2014 the Plan had no employees participating in multiemployer plans.

Defined Benefit Pension Plan

The Plan's full-time employees were covered by a multiemployer defined benefit pension plan.

The risk of participating in multiemployer pension plans is different from single employer plans. Assets contributed to a multiemployer defined benefit pension plan by one employer may be used to provide benefits to employees of other participating employers. If a participating employer stops contributing to the plan, the unfunded obligations of the plan may be borne by the remaining participating employers.

The Plan's participation in the multiemployer defined benefit pension plan for the years ended April 30, 2014 and 2013 is outlined in the following table. Plan considered to be significant are identified. The "EIN/PN" column provides the employer identification number (EIN) and the three-digit plan number (PN). The most recent Pension Protection Act (PPA) zone status provides an indication of the financial health of the plan. Among other factors, plans in the red zone are below 65 percent funded, plans in the yellow zone are between 65 percent and 80 percent funded, and plans in the green zone are at least 80 percent funded. The "FIP/RP Status Pending/Implemented" column indicates plans for which a financial improvement plan (FIP) or rehabilitation plan (RP) is either pending or has been implemented. In addition to regular plan contributions, the Plan may be subject to a surcharge if the plan is in the red zone. The "Surcharge Imposed" column indicates whether a surcharge has been imposed on contributions to the plan. The last column specifies the year end date of the plan to which the annual report (Form 5500) relates.

NOTE 4. PARTICIPATION IN MULTIEMPLOYER PLANS (CONTINUED)

Defined Benefit Pension Plan (continued)

Pension Plan	EIN/PN	Pension Protection Act Zone Status 2014	Pension Protection Act Zone Status 2013	FIP/RP Status Pending / Implemented	Contributions 2014	Contributions 2013	Surcharged Imposed	Most Recently Available Annual Report (Form 5500)
Ohio Carpenters' Pension Plan	34-6574360/001	Red as of 5/1/14	Red as of 5/1/13	Implemented	$ 24,769	$ 25,004	Yes	4/30/2013

Contributions to the plan listed above were made monthly under the terms of a participation agreement, which was terminated pursuant to the transition to third party administration. The Plan did not contribute more than 5% of the total contributions to this plan during the years ended April 30, 2014 and 2013. The significant plan identified above has zone statuses that reflect extended amortization and asset smoothing pension provided by law to amortize losses incurred in 2008.

Defined Contribution Retirement Plan

The Plan's full-time employees were also covered by a multiemployer defined contribution retirement plan. The plan was financed entirely by employer contributions as specified in the collective bargaining agreement. Contributions to the defined contribution retirement plan for the years ended April 30, 2014 and 2013 were $4,608 and $5,093 respectively.

Welfare Plan that Provides Postretirement Benefits

The Plan's full-time salaried employees were covered by a multiemployer health and welfare plan that provides health and welfare benefits to retirees and to eligible employees working under collective bargaining agreements and their dependents. Contributions to this plan for the years ended April 30, 2014 and 2013 were $33,664 and $33,659 respectively.

NOTE 5. TAX STATUS

The Plan obtained its latest determination letter, dated March 18, 2014, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements under section 401(a) of the Internal Revenue Code and was, therefore, exempt from federal income taxes under the provisions of Section 501(a). The Plan has been amended since receiving this letter. The Plan's administrator and the Plan's counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code, and that the Plan is qualified and the related trust is tax exempt as of the financial statement date.

The Plan files Form 5500, *Annual Return/Report of Employee Benefit Plan.* The Plan's returns are subject to examination by the Internal Revenue Service until the applicable statute of limitations expires.

NOTE 6. FUNDING POLICY

The participating employers contribute such amounts as are specified in the collective bargaining agreements which vary depending on the geographic area as well as type of work performed. The hourly contribution rates for the years ended April 30, 2014 and 2013 ranged from $.24 to $5.00 and $.20 to $4.25 per hour, respectively.

Employer contributions are net of payments to various other annuity funds under reciprocal agreements for work performed by their participants in the jurisdiction of the Ohio & Vicinity Carpenters' Regional Council of Carpenters.

NOTE 7. INVESTMENTS

The following summary presents the aggregate fair value for each of the Plan's investment categories. Investments that represent 5% or more of the Plan's net assets available for benefits are separately identified.

	2014	2013	
U.S. Government and Government Agency obligations	$ 20,843,140	$ 17,050,549	
Corporate bonds and notes	62,174,671	50,276,486	
Corporate stocks	1,714,938	349,397	
Mutual funds:			
MainStay S & P 500 Index Fund	25,000,419	56,472,805	
Goldman Sachs Small Cap Value Fund	17,141,045	13,655,991	
Vanguard Inflation-Protected Securities Fund	40,290,399	37,255,905	
Vanguard FTSE All World Index Inst.	15,653,972	9,287,134	*
Others	18,748,565	16,871,608	
Common and collective trust:			
SSgA S&P Global LargeMidCap Fund	16,115,308	-	
Short-term investment funds	2,220,029	2,759,663	
Total	$ 219,902,486	$ 203,979,538	

* Not 5%

NOTE 7. INVESTMENTS (CONTINUED)

The Plan's investments, including investments bought, sold, as well as held during the year, appreciated (depreciated) in value as follows:

	2014	2013
U.S. Government and Government Agency obligations	$ (612,915)	$ (158,450)
Corporate bonds and notes	(1,184,759)	1,777,428
Corporate stocks	(4,835)	(815,245)
Mutual funds	6,889,467	12,158,895
Common and collective trust	1,115,308	-
	$ 6,202,266	$ 12,962,628

NOTE 8. FAIR VALUE MEASUREMENTS

The *Fair Value Measurements and Disclosures* Topic of the FASB Accounting Standards Codification established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

Basis of Fair Value Measurement

Level 1	Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities
Level 2	Quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly
Level 3	Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable

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

The following tables set forth, by level within the fair value hierarchy, the Plan's investment assets at fair value as of April 30, 2014 and 2013. As required, assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. At April 30, 2014 and 2013, the Plan held no assets at fair value classified within Level 3.

NOTE 8. FAIR VALUE MEASUREMENTS (CONTINUED)

	Total	Fair Value Measurements at 4/30/2014 Using Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
U.S. Government and Government Agency obligations:				
U.S. Treasury securities	$ 11,612,274	$ 11,612,274	$ -	$ -
Federal agency securities	9,230,866	-	9,230,866	-
Total U.S. Government and Government Agency obligations	20,843,140	11,612,274	9,230,866	-
Corporate bonds and notes	62,174,671	-	62,174,671	-
Corporate stocks - financial	1,714,938	1,714,938	-	-
Mutual funds:				
Large-cap blended equity	25,000,419	25,000,419	-	-
Small-cap value equity	17,141,045	17,141,045	-	-
Short-term, high quality fixed income	2,016,577	2,016,577	-	-
Treasury inflation protection	40,290,399	40,290,399	-	-
International equity index	15,653,972	15,653,972	-	-
Real estate investment trust index	5,814,502	5,814,502	-	-
Large-cap growth international equity	10,917,486	10,917,486	-	-
Total mutual funds	116,834,400	116,834,400	-	-
Common and collective trust - equity	16,115,308	-	16,115,308	-
Short-term investment funds	2,220,029	-	2,220,029	-
Total	$ 219,902,486	$ 130,161,612	$ 89,740,874	$ -

NOTE 8. FAIR VALUE MEASUREMENTS (CONTINUED)

	Total	Fair Value Measurements at 4/30/2013 Using Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservabl Inputs (Level 3)
U.S. Government and Government Agency obligations:				
U.S. Treasury securities	$ 7,459,480	$ 7,459,480	$ -	$ -
Federal agency securities	9,591,069	-	9,591,069	-
Total U.S. Government and Government Agency obligations	17,050,549	7,459,480	9,591,069	-
Corporate bonds and notes	50,276,486	-	50,276,486	-
Corporate stocks - financial	349,397	349,397	-	-
Mutual funds:				
Large-cap blended equity	56,472,805	56,472,805	-	-
Small-cap value equity	13,655,991	13,655,991	-	-
Short-term, high quality fixed income	2,016,415	2,016,415	-	-
Treasury inflation protection	37,255,905	37,255,905	-	-
International equity index	9,287,134	9,287,134	-	-
Real estate investment trust index	5,681,172	5,681,172	-	-
Large-cap growth international equity	9,174,021	9,174,021	-	-
Total mutual funds	133,543,443	133,543,443	-	-
Short-term investment funds	2,759,663	-	2,759,663	-
Total	$ 203,979,538	$ 141,352,320	$ 62,627,218	$ -

Level 1 Measurements

Corporate stocks and U.S. Treasury securities are traded in active markets on national and international securities exchanges and are valued at closing prices on the last business day of each period presented.

The fair values of the mutual funds are determined by reference to the funds' underlying assets, which are principally marketable equity and fixed income securities. Shares held in mutual funds are traded on national securities exchanges and are valued at the net asset value on the last business day of each period presented.

NOTE 8. FAIR VALUE MEASUREMENTS (CONTINUED)

Level 2 Measurements

U.S. Government Agency obligations, and corporate bonds and notes are generally valued by benchmarking model-derived prices to quoted market prices and trade data for identical or comparable securities. To the extent that quoted market prices are not available, fair value is determined based on a valuation model that include inputs such as interest rate yield curves and credit spreads. Other securities traded in markets that are not considered active are valued based on quoted market prices, broker or dealer quotations, or alternative pricing sources with reasonable levels of price transparency. Securities that trade infrequently and therefore have little or not price transparency are valued using the investment manager's best estimate.

Significant inputs into the valuation of the Plan's Level 2 investments are the interest rates and the length to maturity of the holdings. A summary of these inputs at April 30, 2014 and 2013 are presented in the tables below:

	4/30/2014	
	Weighted Average Interest Rate	Weighted Average Length to Maturity in Years
Federal agency securities	4.67%	23.30
Corporate bonds and notes	5.71%	9.18

	4/30/2013	
	Weighted Average Interest Rate	Weighted Average Length to Maturity in Years
Federal agency securities	5.02%	20.82
Corporate bonds and notes	5.90%	9.48

The fair value of the common and collective trust is based on the net asset value per share, without further adjustment, by reference to the fund's underlying assets, which consist primarily of marketable equity securities. Units held may be issued and redeemed without written notice, on a daily basis, at the net asset value as determined at the close of business every day.

Short-term investment funds are valued at cost which approximates their fair value.

NOTE 9. RELATED ORGANIZATIONS

The Plan has several related tax-exempt organizations which include a defined benefit pension plan, a defined benefit health and welfare plan, a regional council and a service corporation. The Trustees of the Plan also serve as trustees of the defined benefit pension plan, and two of the Trustees serve on the administrative committee of the service corporation. Certain Trustees also serve as trustees of the health and welfare plan. Officers of the regional council serve as Trustees to the Plan.

The Plan shared office facilities and staff with the health and welfare fund through December 2012, and the pension fund through December 2013. The majority of common administrative expenses of the combined facility were initially paid by the service corporation (Ohio & Vicinity Carpenters' Fringe Benefit Funds, Inc.) and were allocated annually on the basis of time spent by personnel. These common expenses included salary, benefit plan contributions and rent. Total expenses allocated to the Plan for the years ended April 30, 2014 and 2013 were $463,895 and $398,775 respectively. As described in Note 15, administrative duties previously performed by shared staff were transitioned to a third party administrator effective January 1, 2014.

NOTE 10. RISKS AND UNCERTAINTIES

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

NOTE 11. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

During the years ended April 30, 2014 and 2013, the Plan invested in the MainStay S&P 500 Index Fund I (MainStay). MainStay is a division of New York Life Investment Management LLC (New York Life). Since New York Life is the trustee of the Plan's investment assets, these transactions qualify as exempt party-in-interest transactions. New York Life's fees for administering the investments are offset against the overall rate of return generated by the investment for the funds' various investors. The net income from these investments recognized by the Plan was $6,804,305 and $8,773,827 for the years ended April 30, 2014 and 2013, respectively.

NOTE 12. PROHIBITED TRANSACTION

A removed Trustee (see Note 13 below) received gifts and other items of value from an investment service provider. Such transactions are prohibited by ERISA §406. During the year ended April 30, 2013, the removed Trustee made restitution to the Plan, and therefore, this transaction was corrected.

NOTE 13. FEDERAL INVESTIGATION

On August 11, 2011, the United States Attorney General's Office for the Northern District of Ohio issued a grand jury subpoena to the Plan. On October 4, 2011, additional subpoenas were issued to related carpenter benefit funds. This matter was resolved during the year ended April 30, 2013 and the Plan received restitution as ordered by the United States District Court in regards to the federal investigation.

NOTE 14. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2014	2013
Net assets available for benefits per the financial statements	$ 224,260,073	$ 208,699,210
Amounts allocated to withdrawing participants at year end	-	(269,263)
Net assets available for benefits per the Form 5500	$ 224,260,073	$ 208,429,947

The following is a reconciliation of benefits paid to or for participants per the financial statements to the Form 5500 for the year ended April 30, 2014:

Benefits paid to or for participants per the financial statements	$ 12,502,133
Less - Amounts allocated to withdrawing participants at April 30, 2013	(269,263)
Benefits paid to or for participants per the Form 5500	$ 12,232,870

NOTE 15. ALLOCATION OF NET ASSETS TO OVCFBF

Prior to January 1, 2014, administrative duties for the Plan and related organizations were performed by Ohio & Vicinity Carpenters' Fringe Benefit Fund Inc. (OVCFBF). On January 1, 2014, most administrative duties were transitioned to a third party administrator. OVCFBF continues to provide services to the Plan and related organizations, mainly operating as an agent for the collection of employer contributions and wage deductions. The Trustees of the Plan, along with governance of the related organizations, authorized that OVCFBF retain the balance of funds which had accumulated over several previous years and which primarily arose from the collection of liquidated damages, penalties and interest from delinquent employers. Such amounts had been reserved in previous years for the purpose of offsetting future expenses of the Plan and related organizations. The Plan's pro-rata portion of this allocation to OVCFBF was $195,968. This total was previously reflected as an other asset on the statement of net assets available for benefits. In the event of dissolution of OVCFBF, any remaining net assets would be allocated back to the Plan and related organizations on a pro-rata basis to be used for the exclusive benefit of participants and their beneficiaries, except that provision may be made for the payment of necessary and reasonable expenses.

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PROFESSIONALS LLP
CERTIFIED PUBLIC ACCOUNTANTS

REPORT OF INDEPENDENT AUDITORS ON SUPPLEMENTAL SCHEDULES

To the Participants and Trustees of
Ohio Carpenters' Annuity Plan

We have audited the financial statements of Ohio Carpenters' Annuity Plan as of and for the years ended April 30, 2014 and 2013 and our report thereon dated December 11, 2014 which expressed an unmodified opinion on those financial statements, appears on Page 2. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. Supplemental Schedule 1 and 2 are presented for the purpose of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosures under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Legacy Professionals LLP

Chicago, Illinois

December 11, 2014

SCHEDULE C OTHER SERVICE PROVIDER SERVICE CODES STATEMENT 1

NAME	SERVICE CODES
NEW YORK LIFE INVESTMENT MANAGEMENT	19
NEW YORK LIFE INVESTMENT MANAGEMENT	21
NEW YORK LIFE INVESTMENT MANAGEMENT	36
NEW YORK LIFE INVESTMENT MANAGEMENT	38
NEW YORK LIFE INVESTMENT MANAGEMENT	49
NEW YORK LIFE INVESTMENT MANAGEMENT	50
NEW YORK LIFE INVESTMENT MANAGEMENT	63
NEW YORK LIFE INVESTMENT MANAGEMENT	65
NEW YORK LIFE INVESTMENT MANAGEMENT	68
NEW YORK LIFE INVESTMENT MANAGEMENT	15
BANK OF NEW YORK MELLON	19
BANK OF NEW YORK MELLON	50
BANK OF NEW YORK MELLON	57
BANK OF NEW YORK MELLON	62
BANK OF NEW YORK MELLON	71
BANK OF NEW YORK MELLON	72

CODES TO SCHEDULE C, LINE 2(B)

SCHEDULE H OTHER RECEIVABLES STATEMENT 2

DESCRIPTION	BEGINNING	ENDING
ACCRUED INTEREST & DIVIDENDS	662,777.	851,567.
DUE FROM BROKER	1,425.	917.
PREPAID EXPENSES	7,658.	77,215.
INTEREST IN THE SHARED FRINGE CORP.	195,967.	0.
SETTLEMENT RECEIVABLE	0.	71,299.
UNREMITTED CONTRIBUTIONS	0.	1,250,824.
TOTAL TO SCHEDULE H, LINE 1B(3)	867,827.	2,251,822.

SCHEDULE H OTHER PLAN LIABILITIES STATEMENT 3

DESCRIPTION	BEGINNING	ENDING
DUE TO BROKER	19,397.	119,842.
DUE TO RELATED ORGANIZATIONS - NET	747,939.	856,323.
TOTAL TO SCHEDULE H, LINE 1J	767,336.	976,165.

SCHEDULE H — OTHER INCOME — STATEMENT 4

DESCRIPTION	AMOUNT
MISCELLANEOUS INCOME	4,504.
SETTLEMENT INCOME	71,299.
TOTAL TO SCHEDULE H, LINE 2C	75,803.

SCHEDULE H — OTHER ADMINISTRATIVE EXPENSES — STATEMENT 5

DESCRIPTION	AMOUNT
COMPUTER SUPPLIES AND EXPENSE	60,617.
DEPRECIATION	6,760.
FRINGE BENEFIT CONTRIBUTIONS	63,041.
INSURANCE	54,432.
MISCELLANEOUS EXPENSES	30,615.
OFFICE EXPENSE	7,395.
PAYROLL TAXES	12,386.
PRINTING AND POSTAGE	20,394.
RENT	11,012.
SALARIES	190,956.
TELEPHONE	4,441.
COLLECTION FEES	26,863.
ALLOCATION OF OVCFBF NET ASSETS	195,968.
TOTAL TO SCHEDULE H, LINE 2I(4)	684,880.

Schedule H, Line 4i
Schedule of Assets (Held at End of Year)

Suplemental Schedule 1

Ohio Carpenters' Annuity Fund
Schedule of Assets Held for Investment Purposes
EIN: 34-1778747
Year Ended April 30, 2014

Investment Type	Reference	Revalued Cost	FMV	Per 5500 at FMV
Interest Bearing Cash - see Statement of Interest Bearing Cash				
Total Interest Bearing Cash	pg. 2	19,531	19,531	19,531
U.S. Government Securities	pg. 6	20,983,985	20,843,140	20,843,140
Corporate Debt Instruments - Preferred	pg. 9	12,713,831	12,200,621	12,200,621
Corporate Debt Instruments	pg. 26	50,331,409	49,974,050	49,974,050
Corporate Stock - Preferred	pg. 26	1,719,772	1,714,938	1,714,938
Common Collective Trust Funds				
EB Temporary Investment	pg. 27	2,200,498	2,200,498	2,200,498
SSgA S&P Global Natural Resources Stock Index NL Fund	pg. 28	15,000,000	16,115,308	16,115,308
Total Common and Collective Funds		17,200,498	18,315,806	18,315,806
Registered Investment Companies				
Held at New York Life	pg. 28	101,710,131	116,834,400	116,834,400

Schedule H, Line 4i
Schedule of Assets (Held at End of Year)

Supplemental Schedule 1

Ohio Carpenters' Annuity Fund
Schedule of Interest Bearing Cash
EIN: 34-1778747
Year Ended April 30, 2014

Interest Bearing Cash	**At Cost**	**At FMV**
Key Bank - Trust Account	19,531	19,531

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
	U. S. GOVERNMENT SECURITIES				
280,000.0000	U S TREASURY BOND 6.250% 05/15/2030 DD 11/15/99	433,562.64	140.0625	392,175.00	41,387.64-
520,000.0000	U S TREASURY BOND 5.375% 02/15/2031 DD 02/15/01	743,112.24	129.2344	672,018.88	71,093.36-
510,000.0000	U S TREASURY BOND 3.125% 11/15/2041 DD 11/15/11	536,296.62	94.6562	482,746.62	53,550.00-
760,000.0000	U S TREASURY BOND 2.875% 05/15/2043 DD 05/15/13	644,502.57	89.1562	677,587.12	33,084.55
1,575,000.0000	U S TREASURY NOTE 2.750% 02/15/2024 DD 02/15/14	1,581,866.56	100.8750	1,588,781.25	6,914.69
1,915,000.0000	U S TREASURY NOTE 1.375% 09/30/2018 DD 09/30/11	1,913,050.20	99.4531	1,904,526.87	8,523.33-
1,550,000.0000	U S TREASURY NOTE 0.375% 04/15/2015 DD 04/15/12	1,553,757.84	100.2617	1,554,056.35	298.51
3,910,000.0000	U S TREASURY NOTE 0.375% 06/15/2015 DD 06/15/12	3,918,006.99	100.2773	3,920,842.43	2,835.44
72,813.4920	FHLMC POOL #1B-2141 VAR RT 03/01/2035 DD 03/01/05	77,487.32	105.5153	76,829.43	657.89-
419,537.2730	FHLMC POOL #A4-0122 6.000% 12/01/2035 DD 11/01/05	471,704.96	113.2077	474,948.69	3,243.73
149,017.7770	FHLMC POOL #G0-2355 5.500% 07/01/2034 DD 09/01/06	162,211.14	111.0699	165,514.02	3,302.88

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
83,483.4400	FHLMC POOL #G0-8194 6.500% 04/01/2037 DD 04/01/07	95,115.98	112.4087	93,842.73	1,273.25-
290,688.7900	FHLMC POOL #G0-6251 4.000% 02/01/2041 DD 02/01/11	321,040.84	105.1612	305,692.01	15,348.83-
73,859.0240	FHLMC POOL #C9-1017 6.000% 02/01/2027 DD 02/01/07	80,711.96	111.6794	82,485.37	1,773.41
57,994.0900	FHLMC POOL #1L-0087 VAR RT 06/01/2035 DD 06/01/05	62,145.58	106.9023	61,997.04	148.54-
19,085.2290	FHLMC POOL #B1-4931 4.500% 05/01/2019 DD 05/01/04	20,349.85	105.9655	20,223.77	126.08-
7,251.3960	FHLMC POOL #B1-5000 4.500% 06/01/2019 DD 06/01/04	7,731.94	105.9831	7,685.26	46.68-
99,019.7150	FHLMC POOL #B1-5283 4.500% 06/01/2019 DD 06/01/04	105,580.84	105.9772	104,938.42	642.42-
211,734.2900	FHLMC POOL #Q0-2662 4.500% 08/01/2041 DD 08/01/11	225,100.01	108.1920	229,079.69	3,979.68
281,279.0400	FHLMC POOL #Q0-2664 4.500% 08/01/2041 DD 08/01/11	301,364.11	107.4998	302,374.65	1,010.54
363,208.8500	FHLMC POOL #Q0-5775 4.000% 01/01/2042 DD 01/01/12	378,134.46	105.1802	382,023.85	3,889.39
491,184.5800	FHLMC POOL #Q1-4034 3.500% 12/01/2042 DD 12/01/12	495,252.20	101.7911	499,982.31	4,730.11
376,887.1400	FHLMC POOL #U9-0490 4.000% 06/01/2042 DD 06/01/12	386,544.86	104.2890	393,051.97	6,507.11

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
215,152.1800	FHLMC POOL #U9-0773 4.000% 01/01/2043 DD 01/01/13	237,213.59	104.2890	224,380.20	12,833.39-
675,634.0400	FHLMC POOL #U9-0784 3.500% 01/01/2043 DD 01/01/13	666,766.33	100.8073	681,088.82	14,322.49
41,207.5990	FNMA POOL #0255891 5.000% 10/01/2020 DD 09/01/05	44,266.46	107.7511	44,401.67	135.21
45,970.9350	FNMA POOL #0256686 6.000% 04/01/2037 DD 03/01/07	49,790.97	108.7358	49,986.89	195.92
60,239.4600	FNMA POOL #0257233 4.500% 06/01/2023 DD 05/01/08	64,648.13	106.4974	64,153.51	494.62-
27,901.6180	FNMA POOL #0357944 6.000% 09/01/2035 DD 09/01/05	31,362.42	112.6052	31,418.68	56.26
48,261.2710	FNMA POOL #0357945 6.000% 09/01/2035 DD 09/01/05	53,930.62	112.6385	54,360.80	430.18
101,982.6360	FNMA POOL #0357985 4.500% 09/01/2020 DD 09/01/05	109,605.63	106.3063	108,414.04	1,191.59-
317,284.1800	FNMA POOL #0AL1711 4.500% 08/01/2041 DD 04/01/12	349,679.91	108.1335	343,090.77	6,589.14-
305,474.4900	FNMA POOL #0AK4571 3.500% 03/01/2042 DD 03/01/12	325,783.73	101.5909	310,334.39	15,449.34-
231,588.5100	FNMA POOL #0AT5296 3.500% 05/01/2043 DD 04/01/13	247,899.29	101.5871	235,264.12	12,635.17-
186,468.9430	FNMA POOL #0555531 5.500% 06/01/2033 DD 05/01/03	204,667.93	111.9408	208,734.94	4,067.01

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
3,721.8450	FNMA POOL #0555569 6.000% 05/01/2016 DD 06/01/03	3,747.98	102.3043	3,807.61	59.63
760.6930	FNMA POOL #0725239 6.000% 12/01/2014 DD 02/01/04	766.03	100.2088	762.28	3.75-
94,597.4740	FNMA POOL #0725425 5.500% 04/01/2034 DD 04/01/04	104,188.61	111.3068	105,293.48	1,104.87
15,690.0340	FNMA POOL #0725551 5.500% 06/01/2019 DD 05/01/04	17,095.17	107.2405	16,826.07	269.10-
103,017.4830	FNMA POOL #0725613 5.500% 06/01/2034 DD 06/01/04	113,329.35	111.3473	114,707.19	1,377.84
66,742.4200	FNMA POOL #0735580 5.000% 06/01/2035 DD 05/01/05	72,641.56	110.1371	73,508.20	866.64
151,619.6800	FNMA POOL #0745148 5.000% 01/01/2036 DD 12/01/05	164,787.52	109.9473	166,701.77	1,914.25
14,477.6650	FNMA POOL #0773588 5.500% 07/01/2034 DD 07/01/04	15,926.89	110.3425	15,975.02	48.13
352,569.2080	FNMA POOL #0778535 5.500% 06/01/2034 DD 07/01/04	395,793.44	112.0256	394,967.95	825.49-
23,790.9660	FNMA POOL #0781825 5.500% 12/01/2034 DD 12/01/04	26,172.43	111.2243	26,461.34	288.91
59,785.4750	FNMA POOL #0785726 5.000% 07/01/2019 DD 07/01/04	64,335.45	106.1942	63,488.76	846.69-
52,374.3530	FNMA POOL #0786490 5.500% 07/01/2034 DD 07/01/04	57,616.97	111.3449	58,316.21	699.24

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
928,270.7510	FNMA POOL #0788645 5.000% 07/01/2034 DD 07/01/04	1,010,337.50	110.0472	1,021,536.17	11,198.67
55,886.5760	FNMA POOL #0795409 6.000% 09/01/2034 DD 09/01/04	62,189.70	111.6024	62,370.80	181.10
38,216.6770	FNMA POOL #0813939 5.000% 12/01/2020 DD 11/01/05	41,053.53	107.7351	41,172.79	119.26
143,208.8040	FNMA POOL #0826201 5.000% 07/01/2035 DD 06/01/05	155,645.93	109.9915	157,517.52	1,871.59
19,725.0770	FNMA POOL #0828658 5.000% 09/01/2020 DD 09/01/05	21,189.33	106.2053	20,949.08	240.25-
77,856.6480	FNMA POOL #0835817 6.000% 10/01/2035 DD 10/01/05	87,002.59	112.1501	87,316.38	313.79
38,582.5340	FNMA POOL #0837189 5.000% 12/01/2020 DD 02/01/06	41,446.50	108.7915	41,974.55	528.05
102,777.9320	FNMA POOL #0843487 6.000% 10/01/2035 DD 10/01/05	116,039.74	113.4384	116,589.68	549.94
150,379.0400	FNMA POOL #0905917 5.500% 01/01/2037 DD 12/01/06	168,580.26	112.6726	169,436.00	855.74
33,220.7550	FNMA POOL #0909860 6.500% 02/01/2037 DD 02/01/07	39,531.43	114.5802	38,064.41	1,467.02-
216,509.6500	FNMA POOL #0995023 5.500% 08/01/2037 DD 10/01/08	236,828.62	111.1870	240,730.72	3,902.10
159,992.3600	FNMA POOL #0AA5893 4.500% 07/01/2039 DD 07/01/09	178,952.48	108.4352	173,488.12	5,464.36-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
223,665.4300	GNMA II POOL #0AB9233 4.000% 11/20/2042 DD 11/01/12	249,672.94	106.0418	237,178.94	12,494.00-
196,480.5680	GNMA POOL #0642007 6.000% 06/15/2036 DD 06/01/06	222,178.68	114.7327	225,427.50	3,248.82
415,000.0000	U S TREASURY NOTE 2.750% 11/15/2023 DD 11/15/13	416,687.63	101.0938	419,539.27	2,851.64
TOTAL U. S. GOVERNMENT SECURITIES		20,983,984.98		20,843,140.37	140,844.61-
	CORPORATE DEBT INSTRUMENTS - PREFERRED				
70,000.0000	AT&T INC 2.400% 08/15/2016 DD 08/18/11	73,023.02	103.1713	72,219.91	803.11-
315,000.0000	AT&T INC 3.875% 08/15/2021 DD 08/18/11	349,580.39	104.6939	329,785.79	19,794.60-
200,000.0000	ABU DHABI NATIONAL ENERGY 144A 6.250% 09/16/2019 DD 09/14/09	240,250.00	117.3750	234,750.00	5,500.00-
400,000.0000	ANHEUSER-BUSCH INBEV WORLDWIDE 5.375% 11/15/2014 DD 11/15/10	428,718.40	102.6103	410,441.20	18,277.20-
390,000.0000	BANC OF AMERICA COMMERCIA 2 A4 VAR RT 04/10/2049 DD 06/01/07	451,396.53	110.3306	430,289.34	21,107.19-
61,796.3810	BAYVIEW COMMERCIA 4A A1 144A VAR RT 12/25/2036 DD 10/30/06	52,335.42	87.5250	54,087.28	1,751.86
390,000.0000	BEAR STEARNS COMMERCIA PW16 A4 VAR RT 06/11/2040 DD 06/01/07	455,383.89	111.8888	436,366.32	19,017.57-
80,000.0000	BEAR STEARNS COS LLC/THE 5.300% 10/30/2015 DD 10/31/05	88,254.64	106.6835	85,346.80	2,907.84-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
100,000.0000	BEAR STEARNS COS LLC/THE 7.250% 02/01/2018 DD 02/01/08	124,529.10	118.9351	118,935.10	5,594.00-
155,000.0000	BOEING CO/THE 8.750% 08/15/2021 DD 08/15/91	224,822.85	135.4008	209,871.24	14,951.61-
330,000.0000	CNOOC FINANCE 2011 LTD 144A 4.250% 01/26/2021 DD 01/26/11	362,400.06	103.1745	340,475.85	21,924.21-
300,000.0000	CATERPILLAR INC 7.900% 12/15/2018 DD 12/05/08	402,507.30	125.2069	375,620.70	26,886.60-
495,000.0000	CD 2006-CD3 MORTGAGE TR CD3 A5 5.617% 10/15/2048 DD 10/01/06	557,869.95	108.0976	535,083.12	22,786.83-
715,000.0000	CITIGROUP INC 5.000% 09/15/2014 DD 09/16/04	749,601.71	101.6044	726,471.46	23,130.25-
300,000.0000	CITIGROUP COMMERCIAL MOR C7 A4 VAR RT 12/10/2049 DD 04/01/08	357,009.00	112.4164	337,249.20	19,759.80-
405,000.0000	COMMERCIAL MORTGAGE LO LS1 A4B VAR RT 12/10/2049 DD 03/01/08	477,665.91	110.6890	448,290.45	29,375.46-
275,000.0000	ENI SPA 144A 4.150% 10/01/2020 DD 10/01/10	289,787.58	105.7536	290,822.40	1,034.82
55,000.0000	FORD MOTOR CO 4.750% 01/15/2043 DD 01/08/13	54,978.44	98.7476	54,311.18	667.26-
38,672.8900	GS MORT SEC CORP II COM GG2 A6 VAR RT 08/10/2038 DD 08/01/04	40,112.05	100.0605	38,696.29	1,415.76-
560,000.0000	GS MORTGAGE SECURITIES GG6 A4 VAR RT 04/10/2038 DD 03/01/06	621,639.76	106.1800	594,608.00	27,031.76-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
300,613.3900	GS MORTGAGE SECURITIES GG10 A4 VAR RT 08/10/2045 DD 07/01/07	345,949.22	111.0463	333,820.05	12,129.17-
1,000,000.0000	GOLDMAN SACHS GROUP INC/THE 5.350% 01/15/2016 DD 01/17/06	1,089,405.25	107.2922	1,072,922.00	16,483.25-
250,000.0000	HSBC HOLDINGS PLC 5.100% 04/05/2021 DD 04/05/11	296,547.25	112.5100	281,275.00	15,272.25-
170,000.0000	HEALTH CARE SERVICE CORP 144A 4.700% 01/15/2021 DD 01/07/11	189,422.16	106.1954	180,532.18	8,889.98-
130,000.0000	HUTCHISON WHAMPOA INTERNA 144A 7.625% 04/09/2019 DD 04/09/09	167,120.07	121.9044	158,475.72	8,644.35-
210,000.0000	JP MORGAN CHASE COMMER LDPX A3 5.420% 01/15/2049 DD 03/01/07	240,238.74	109.5982	230,156.22	10,082.52-
625,000.0000	MEDTRONIC INC 1.375% 04/01/2018 DD 03/26/13	627,874.38	99.1111	619,444.38	8,430.00-
445,000.0000	NBCUNIVERSAL MEDIA LLC 5.150% 04/30/2020 DD 04/30/11	539,107.27	114.1666	508,041.37	31,065.90-
270,000.0000	PETRONAS CAPITAL LTD 144A 5.250% 08/12/2019 DD 08/12/09	318,392.37	112.0218	302,458.86	15,933.51-
100,000.0000	PFIZER INC 7.200% 03/15/2039 DD 03/24/09	150,371.80	138.0686	138,068.60	12,303.20-
310,000.0000	PHILIP MORRIS INTERNATIONAL IN 4.375% 11/15/2041 DD 11/15/11	325,222.55	98.0264	303,881.84	21,340.71-
190,000.0000	PROCTER & GAMBLE CO/THE 1.450% 08/15/2016 DD 08/15/11	195,192.32	101.6727	193,178.13	2,014.19-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
85,000.0000	RIO TINTO FINANCE USA LTD 3.750% 09/20/2021 DD 09/19/11	90,828.88	103.8669	88,286.87	2,542.01-
600,000.0000	SBA TOWER TRUST 144A 2.933% 12/15/2042 DD 08/09/12	621,483.60	101.5016	609,009.60	12,474.00-
200,000.0000	SIEMENS FINANCIERINGSMAATSCHAP 6.125% 08/17/2026 DD 08/16/06	265,688.00	122.8410	245,682.00	20,006.00-
120,000.0000	TJX COS INC 6.950% 04/15/2019 DD 04/07/09	152,946.72	121.9762	146,371.44	6,575.28-
70,000.0000	TIMBERSTAR TRUST 1A A 144A 5.668% 10/15/2036 DD 10/30/06	79,955.40	108.3279	75,829.53	4,125.87-
140,000.0000	VF CORP 3.500% 09/01/2021 DD 08/24/11	150,980.06	103.3728	144,721.92	6,258.14-
405,000.0000	WACHOVIA BANK COMMERCIA C33 A4 VAR RT 02/15/2051 DD 08/01/07	465,238.49	109.8133	444,743.87	20,494.62-
TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED		12,713,830.53		12,200,621.21	513,209.32-
CORPORATE DEBT INSTRUMENTS					
330,000.0000	CONTINENTAL RUBBER OF AMERICA 4.500% 09/15/2019	342,540.00	105.9900	349,767.00	7,227.00
400,000.0000	AK STEEL CORP 8.750% 12/01/2018 DD 06/01/13	441,000.00	111.7500	447,000.00	6,000.00
315,000.0000	TIME WARNER INC 7.700% 05/01/2032 DD 04/08/02	448,301.39	137.6429	433,575.14	14,726.25-
400,000.0000	ALLIANT TECHSYSTEMS INC 144A 5.250% 10/01/2021 DD 11/01/13	400,000.00	103.7500	415,000.00	15,000.00

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
100,000.0000	ALLY FINANCIAL INC 7.500% 09/15/2020 DD 03/15/11	123,500.00	118.5000	118,500.00	5,000.00-
20,000.0000	ALLY FINANCIAL INC 4.625% 06/26/2015 DD 06/26/12	21,075.00	103.7700	20,754.00	321.00-
265,000.0000	ALTERRA FINANCE LLC 6.250% 09/30/2020 DD 09/27/10	314,752.69	115.1490	305,144.85	9,607.84-
132,000.0000	ALTRIA GROUP INC 9.950% 11/10/2038 DD 11/10/08	219,986.72	163.1857	215,405.12	4,581.60-
355,000.0000	ALTRIA GROUP INC 5.375% 01/31/2044 DD 10/31/13	353,487.70	107.1975	380,551.13	27,063.43
270,000.0000	AMERICAN INTERNATIONAL GROUP I 4.875% 09/15/2016 DD 09/13/11	300,575.61	108.8021	293,765.67	6,809.94-
400,000.0000	AMERICAN INTERNATIONAL GROUP I 4.125% 02/15/2024 DD 10/02/13	399,748.00	104.6458	418,583.20	18,835.20
350,000.0000	AMERICAN TOWER CORP 4.500% 01/15/2018 DD 12/07/10	387,927.40	108.1130	378,395.50	9,531.90-
235,000.0000	AMERIGAS FINANCE LLC / AMERIGA 6.750% 05/20/2020 DD 01/12/12	260,262.50	108.7500	255,562.50	4,700.00-
30,000.0000	AMERIGAS FINANCE LLC / AMERIGA 7.000% 05/20/2022 DD 01/12/12	33,525.00	110.0000	33,000.00	525.00-
164,000.0000	AMERIGAS PARTNERS LP / AMERIGA 6.250% 08/20/2019 DD 08/10/11	175,280.00	107.0000	175,480.00	200.00
580,000.0000	AMGEN INC 4.100% 06/15/2021 DD 06/30/11	651,407.86	106.7905	619,384.90	32,022.96-

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450,000.0000	ANGLO AMERICAN CAPITAL PL 144A 9.375% 04/08/2019 DD 04/08/09	599,634.45	127.9330	575,698.50	23,935.95-
350,000.0000	ARAMARK CORP 5.750% 03/15/2020 DD 09/15/13	359,187.50	104.8750	367,062.50	7,875.00
195,000.0000	ASIA ALUMINUM HLDGS LTD 144A 8.000% 12/23/2011 DD 12/23/04	19.50	0.0000	0.00	19.50-
270,000.0000	AVON PRODUCTS INC 4.600% 03/15/2020 DD 03/12/13	290,007.27	102.1553	275,819.31	14,187.96-
290,000.0000	BANK OF AMERICA CORP 4.000% 04/01/2024 DD 04/01/14	288,912.50	100.5038	291,461.02	2,548.52
200,000.0000	BERRY PETROLEUM CO 6.750% 11/01/2020 DD 11/01/10	208,000.00	105.6250	211,250.00	3,250.00
400,000.0000	BOMBARDIER INC 144A 4.750% 04/15/2019 DD 04/03/14	400,320.00	101.7500	407,000.00	6,680.00
175,000.0000	BUILDING MATERIALS CORP O 144A 6.875% 08/15/2018 DD 08/12/10	185,062.50	104.3750	182,656.25	2,406.25-
225,000.0000	BUILDING MATERIALS CORP O 144A 6.750% 05/01/2021 DD 04/29/11	244,812.50	108.2500	243,562.50	1,250.00-
610,000.0000	BUNGE LTD FINANCE CORP 3.200% 06/15/2017 DD 06/15/12	636,125.08	104.3598	636,594.78	469.70
325,000.0000	CF INDUSTRIES INC 3.450% 06/01/2023 DD 05/23/13	324,665.10	97.7261	317,609.83	7,055.27-
270,000.0000	CHC HELICOPTER SA 9.250% 10/15/2020 DD 04/15/12	287,887.50	107.5000	290,250.00	2,362.50

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645,758.0500	CVS PASS-THROUGH TRUST 144A 4.704% 01/10/2036 DD 12/19/13	645,758.05	104.0000	671,588.37	25,830.32
465,000.0000	CAPITAL ONE FINANCIAL CORP 2.150% 03/23/2015 DD 03/23/12	474,882.18	101.4760	471,863.40	3,018.78-
390,000.0000	CAPITAL ONE BANK USA NA 3.375% 02/15/2023 DD 02/11/13	396,833.58	98.7777	385,233.03	11,600.55-
40,000.0000	CHESAPEAKE ENERGY CORP 6.500% 08/15/2017 DD 08/16/05	44,800.00	112.1250	44,850.00	50.00
415,000.0000	CHESAPEAKE ENERGY CORP 4.875% 04/15/2022 DD 04/24/14	414,956.25	100.1250	415,518.75	562.50
350,000.0000	ACCESS MIDSTREAM PARTNERS LP / 6.125% 07/15/2022 DD 01/11/12	376,687.50	108.1250	378,437.50	1,750.00
575,000.0000	CITIGROUP INC 3.375% 03/01/2023 DD 02/20/13	595,447.00	97.5123	560,695.73	34,751.27-
20,000.0000	COLLINS & AIKMAN PRODS CO 144A 12.875% 08/15/2012 DD 08/26/04	0.00	0.0000	0.00	0.00
231,000.0000	COMMSCOPE INC 144A 8.250% 01/15/2019 DD 01/14/11	252,367.50	108.2500	250,057.50	2,310.00-
15,000.0000	CONCHO RESOURCES INC 7.000% 01/15/2021 DD 12/14/10	16,875.00	111.0000	16,650.00	225.00-
25,000.0000	CONCHO RESOURCES INC 5.500% 10/01/2022 DD 03/12/12	26,687.50	104.8750	26,218.75	468.75-
135,000.0000	CONCHO RESOURCES INC 5.500% 04/01/2023 DD 08/17/12	138,412.50	104.1250	140,568.75	2,156.25

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365,000.0000	CONSTELLATION BRANDS INC 7.250% 09/01/2016 DD 08/15/06	419,750.00	112.5000	410,625.00	9,125.00-
94,000.0000	CONSTELLATION BRANDS INC 8.375% 12/15/2014 DD 12/05/07	103,870.00	104.2500	97,995.00	5,875.00-
73,000.0000	COPANO ENERGY LLC / COPANO ENE 7.125% 04/01/2021 DD 04/05/11	84,497.50	113.2730	82,689.29	1,808.21-
635,000.0000	COUNTRYWIDE FINANCIAL CORP 6.250% 05/15/2016 DD 05/16/06	708,513.32	109.4973	695,307.86	13,205.46-
80,000.0000	CROWN CASTLE INTERNATIONAL COR 5.250% 01/15/2023 DD 10/15/12	83,800.00	102.7500	82,200.00	1,600.00-
60,000.0000	DR HORTON INC 4.750% 02/15/2023 DD 02/05/13	61,800.00	99.5000	59,700.00	2,100.00-
55,000.0000	DISH DBS CORP 4.625% 07/15/2017 DD 05/16/12	55,825.00	106.3750	58,506.25	2,681.25
385,000.0000	DISCOVER FINANCIAL SERVICES 6.450% 06/12/2017 DD 12/12/07	453,105.35	114.0552	439,112.52	13,992.83-
300,000.0000	DUQUESNE LIGHT HOLDINGS I 144A 6.400% 09/15/2020 DD 09/13/10	369,743.40	117.4594	352,378.20	17,365.20-
75,000.0000	DISH DBS CORP 7.125% 02/01/2016 DD 08/01/06	82,875.00	109.2500	81,937.50	937.50-
450,000.0000	ENERGY TRANSFER PARTNERS LP 5.200% 02/01/2022 DD 01/17/12	514,494.45	109.3372	492,017.40	22,477.05-
520,000.0000	ENLINK MIDSTREAM PARTNER LP 2.700% 04/01/2019 DD 03/19/14	519,220.00	100.7178	523,732.56	4,512.56

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325,000.0000	FIRST DATA CORP 144A 8.875% 08/15/2020 DD 08/20/10	370,500.00	110.8750	360,343.75	10,156.25-
85,000.0000	FORD MOTOR CO 9.215% 09/15/2021 DD 03/15/98	114,267.97	130.9619	111,317.62	2,950.35-
115,000.0000	FORD MOTOR CO 8.900% 01/15/2032 DD 01/15/98	157,763.56	138.1258	158,844.67	1,081.11
55,000.0000	FORD MOTOR CO 7.450% 07/16/2031 DD 07/16/99	73,181.74	130.4902	71,769.61	1,412.13-
255,000.0000	FORD MOTOR CREDIT CO LLC 8.125% 01/15/2020 DD 12/14/09	328,131.96	127.1743	324,294.47	3,837.49-
100,000.0000	FORD MOTOR CREDIT CO LLC 5.875% 08/02/2021 DD 08/01/11	116,685.30	115.9180	115,918.00	767.30-
350,000.0000	FREESCALE SEMICONDUCTOR I 144A 5.000% 05/15/2021 DD 05/21/13	339,500.00	101.0000	353,500.00	14,000.00
280,000.0000	FRESENIUS MEDICAL CARE US 144A 5.875% 01/31/2022 DD 01/26/12	320,600.00	106.5000	298,200.00	22,400.00-
75,000.0000	FRESENIUS MEDICAL CARE US FINA 6.875% 07/15/2017 DD 01/15/08	86,625.00	113.0000	84,750.00	1,875.00-
78,000.0000	GCI INC 8.625% 11/15/2019 DD 05/15/10	83,070.00	106.8750	83,362.50	292.50
425,000.0000	GLP CAPITAL LP / GLP FINA 144A 4.375% 11/01/2018 DD 10/30/13	426,575.00	103.5000	439,875.00	13,300.00
300,000.0000	GAZPROM OAO VIA GAZ CAPIT 144A 4.950% 07/19/2022 DD 07/19/12	315,480.00	90.0000	270,000.00	45,480.00-

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705,000.0000	GENWORTH HOLDINGS INC 7.625% 09/24/2021 DD 03/25/11	863,864.70	124.9552	880,934.16	17,069.46
15,000.0000	GEORGIA-PACIFIC LLC 8.875% 05/15/2031 DD 05/08/01	22,942.94	147.0285	22,054.28	888.66-
350,000.0000	GOODYEAR TIRE & RUBBER CO/THE 6.500% 03/01/2021 DD 02/25/13	366,187.50	108.2500	378,875.00	12,687.50
425,000.0000	HCA INC 5.000% 03/15/2024 DD 03/17/14	425,725.00	99.2500	421,812.50	3,912.50-
115,000.0000	HARTFORD FINANCIAL SERVICES GR 6.000% 01/15/2019 DD 05/12/08	132,838.80	116.1267	133,545.71	706.91
400,000.0000	HARTFORD FINANCIAL SERVICES GR 5.500% 03/30/2020 DD 03/23/10	478,074.80	114.2389	456,955.60	21,119.20-
500,000.0000	HERTZ CORP/THE 5.875% 10/15/2020 DD 10/16/12	546,250.00	106.0000	530,000.00	16,250.00-
25,000.0000	HOST HOTELS & RESORTS LP 5.250% 03/15/2022 DD 09/15/12	27,875.00	109.8679	27,466.98	408.02-
83,000.0000	HOST HOTELS & RESORTS LP 3.750% 10/15/2023 DD 03/28/13	84,660.00	98.2971	81,586.59	3,073.41-
111,000.0000	HUGHES SATELLITE SYSTEMS CORP 6.500% 06/15/2019 DD 12/15/11	123,487.50	110.0000	122,100.00	1,387.50-
305,000.0000	HUNTINGTON BANCSHARES INC/OH 7.000% 12/15/2020 DD 12/17/10	383,366.40	120.2922	366,891.21	16,475.19-
395,000.0000	ICAHN ENTERPRISES LP / IC 144A 6.000% 08/01/2020 DD 08/01/13	405,097.50	105.5000	416,725.00	11,627.50

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55,000.0000	ICAHN ENTERPRISES LP / IC 144A 5.875% 02/01/2022 DD 01/29/14	54,987.50	101.5000	55,825.00	837.50
220,000.0000	ING US INC 5.500% 07/15/2022 DD 07/15/13	241,777.00	113.3154	249,293.88	7,516.88
325,000.0000	ING US INC STEP 02/15/2018 DD 02/11/2013	332,174.00	103.1812	335,338.90	3,164.90
335,000.0000	IPALCO ENTERPRISES INC 144A 7.250% 04/01/2016 DD 04/15/08	376,037.50	109.7500	367,662.50	8,375.00-
350,000.0000	JBS USA LLC / JBS USA FIN 144A 8.250% 02/01/2020 DD 01/30/12	381,062.50	109.4500	383,075.00	2,012.50
170,000.0000	JEFFERIES GROUP LLC 6.450% 06/08/2027 DD 06/08/07	190,592.95	107.4471	182,660.07	7,932.88-
200,000.0000	JEFFERIES GROUP LLC 6.875% 04/15/2021 DD 06/28/10	226,248.00	116.1820	232,364.00	6,116.00
130,000.0000	JEFFERIES GROUP LLC 5.125% 01/20/2023 DD 01/18/13	141,068.59	105.5785	137,252.05	3,816.54-
455,000.0000	KB HOME 7.250% 06/15/2018 DD 04/03/06	494,243.75	112.5000	511,875.00	17,631.25
320,000.0000	KINDER MORGAN FINANCE CO 144A 6.000% 01/15/2018 DD 12/20/10	355,428.80	109.3835	350,027.20	5,401.60-
25,000.0000	LAMAR MEDIA CORP 5.875% 02/01/2022 DD 02/09/12	27,343.75	106.7500	26,687.50	656.25-
450,000.0000	LENNAR CORP 6.950% 06/01/2018 DD 05/04/10	504,117.00	113.2500	509,625.00	5,508.00

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445,000.0000	LIBERTY MUTUAL GROUP INC 144A 6.500% 03/15/2035 DD 03/22/05	494,212.55	118.5504	527,549.28	33,336.73
620,000.0000	LIBERTY MUTUAL GROUP INC 144A 4.250% 06/15/2023 DD 06/18/13	613,756.00	102.6764	636,593.68	22,837.68
31,000.0000	L BRANDS INC 8.500% 06/15/2019 DD 12/15/09	38,440.00	120.5000	37,355.00	1,085.00-
275,000.0000	L BRANDS INC 7.000% 05/01/2020 DD 05/04/10	321,406.25	114.0000	313,500.00	7,906.25-
85,000.0000	LINCOLN NATIONAL CORP 8.750% 07/01/2019 DD 06/22/09	110,793.25	129.9344	110,444.24	349.01-
325,000.0000	LINN ENERGY LLC / LINN ENERGY 7.750% 02/01/2021 DD 09/13/10	355,875.00	107.0000	347,750.00	8,125.00-
510,000.0000	LORILLARD TOBACCO CO 8.125% 06/23/2019 DD 06/23/09	652,953.00	124.3135	633,998.85	18,954.15-
300,000.0000	MGM RESORTS INTERNATIONAL 6.750% 10/01/2020 DD 04/01/13	329,250.00	110.5100	331,530.00	2,280.00
251,000.0000	MACY'S RETAIL HOLDINGS INC VAR RT 07/15/2015 DD 06/26/08	287,790.58	108.3060	271,848.06	15,942.52-
335,000.0000	MALLINCKRODT INTERNATIONAL FIN 3.500% 04/15/2018 DD 10/15/13	339,745.28	99.2500	332,487.50	7,257.78-
200,000.0000	MARATHON PETROLEUM CORP 3.500% 03/01/2016 DD 09/01/11	213,858.20	104.5610	209,122.00	4,736.20-
205,000.0000	MARKWEST ENERGY PARTNERS LP / 6.250% 06/15/2022 DD 11/03/11	228,062.50	107.7500	220,887.50	7,175.00-

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100,000.0000	MARKWEST ENERGY PARTNERS LP / 5.500% 02/15/2023 DD 08/10/12	109,750.00	103.7500	103,750.00	6,000.00-
50,000.0000	MARKWEST ENERGY PARTNERS LP / 4.500% 07/15/2023 DD 01/10/13	52,125.00	97.5000	48,750.00	3,375.00-
360,000.0000	MEDCO HEALTH SOLUTIONS INC 7.125% 03/15/2018 DD 03/18/08	449,350.20	118.5776	426,879.36	22,470.84-
1,150,000.0000	MERRILL LYNCH & CO INC 6.050% 05/16/2016 DD 05/16/06	1,269,301.00	109.1115	1,254,782.25	14,518.75-
64,978.7380	MERRILL LYNCH MORTGAGE IN C A1 VAR RT 07/25/2029 DD 06/22/04	64,008.47	100.2959	65,171.01	1,162.54
400,000.0000	METROPCS WIRELESS INC 6.625% 11/15/2020 DD 11/17/10	415,960.00	106.7500	427,000.00	11,040.00
245,000.0000	MORGAN STANLEY 5.000% 11/24/2025 DD 11/22/13	243,885.25	103.7535	254,196.08	10,310.83
600,000.0000	MORGAN STANLEY 6.000% 04/28/2015 DD 04/28/08	653,862.00	105.2120	631,272.00	22,590.00-
220,000.0000	MORGAN STANLEY 4.875% 11/01/2022 DD 10/23/12	237,155.82	105.5252	232,155.44	5,000.38-
226,139.5300	MORGAN STANLEY CAPITAL IQ15 A4 VAR RT 06/11/2049 DD 08/01/07	263,551.61	111.1490	251,351.83	12,199.78-
175,452.5450	MORTGAGE EQUITY CON FF2 A 144A VAR RT 02/25/2042 DD 03/07/07	143,116.05	80.0000	140,362.04	2,754.01-
400,000.0000	NCR CORP 5.000% 07/15/2022 DD 01/15/13	405,000.00	101.7500	407,000.00	2,000.00

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610,000.0000	NVR INC 3.950% 09/15/2022 DD 09/10/12	629,763.30	99.8711	609,213.71	20,549.59-
210,000.0000	NV ENERGY INC 6.250% 11/15/2020 DD 11/22/10	259,298.97	117.9634	247,723.14	11,575.83-
390,000.0000	O'REILLY AUTOMOTIVE INC 4.625% 09/15/2021 DD 09/19/11	435,504.81	107.3685	418,737.15	16,767.66-
85,000.0000	PPL ENERGY SUPPLY LLC 4.600% 12/15/2021 DD 12/16/11	91,736.42	101.8754	86,594.09	5,142.33-
350,000.0000	PENSKE TRUCK LEASING CO L 144A 3.750% 05/11/2017 DD 05/11/12	379,513.05	106.5095	372,783.25	6,729.80-
80,000.0000	PETROHAWK ENERGY CORP 6.250% 06/01/2019 DD 05/20/11	90,100.00	108.6500	86,920.00	3,180.00-
500,000.0000	PLAINS EXPLORATION & PRODUCTIO 7.625% 04/01/2020 DD 03/29/10	562,500.00	109.8750	549,375.00	13,125.00-
290,000.0000	PROTECTIVE LIFE CORP 8.450% 10/15/2039 DD 10/09/09	377,848.35	141.0150	408,943.50	31,095.15
240,000.0000	PRUDENTIAL FINANCIAL INC 7.375% 06/15/2019 DD 06/08/09	297,364.80	123.6260	296,702.40	662.40-
375,000.0000	PRUDENTIAL FINANCIAL INC VAR RT 06/15/2043 DD 11/19/12	370,775.00	103.2500	387,187.50	16,412.50
66,000.0000	PUBLIC SERVICE CO OF NEW MEXIC 7.950% 05/15/2018 DD 05/13/08	82,493.66	119.0631	78,581.65	3,912.01-
500,000.0000	PUGET ENERGY INC 6.500% 12/15/2020 DD 12/06/10	584,820.50	118.8244	594,122.00	9,301.50

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
155,000.0000	QVC INC 144A 3.125% 04/01/2019 DD 03/18/14	154,733.40	100.5602	155,868.31	1,134.91
450,000.0000	QEP RESOURCES INC 5.375% 10/01/2022 DD 03/01/12	439,875.00	100.2500	451,125.00	11,250.00
180,000.0000	REGENCY ENERGY PARTNERS LP / R 6.875% 12/01/2018 DD 10/27/10	196,650.00	106.1250	191,025.00	5,625.00-
45,000.0000	REGIONS BANK/BIRMINGHAM AL 6.450% 06/26/2037 DD 06/26/07	49,387.50	115.7717	52,097.27	2,709.77
395,000.0000	REGIONS BANK/BIRMINGHAM AL 7.500% 05/15/2018 DD 05/16/08	490,005.01	118.0123	466,148.59	23,856.42-
111,000.0000	ROCKWOOD SPECIALTIES GROUP INC 4.625% 10/15/2020 DD 09/25/12	117,105.00	102.5000	113,775.00	3,330.00-
350,000.0000	ROYAL BANK OF SCOTLAND GROUP P 6.400% 10/21/2019 DD 10/21/09	421,572.20	115.7495	405,123.25	16,448.95-
350,000.0000	ROYAL BANK OF SCOTLAND GROUP P 6.125% 12/15/2022 DD 12/04/12	376,561.50	106.4364	372,527.40	4,034.10-
50,000.0000	RYLAND GROUP INC/THE 6.625% 05/01/2020 DD 04/29/10	55,187.50	108.5000	54,250.00	937.50-
55,000.0000	SBA TELECOMMUNICATIONS INC 8.250% 08/15/2019 DD 02/15/10	60,912.50	105.6000	58,080.00	2,832.50-
95,000.0000	SLM CORP 8.000% 03/25/2020 DD 03/22/10	109,843.75	115.5000	109,725.00	118.75-
155,000.0000	SLM CORP 6.250% 01/25/2016 DD 01/14/11	168,562.50	107.8750	167,206.25	1,356.25-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
60,000.0000	SM ENERGY CO 6.625% 02/15/2019 DD 08/15/11	64,575.00	106.8750	64,125.00	450.00-
116,000.0000	SPX CORP 6.875% 09/01/2017 DD 08/16/10	130,210.00	113.5000	131,660.00	1,450.00
365,000.0000	SABMILLER HOLDINGS INC 144A 1.850% 01/15/2015 DD 01/17/12	372,011.29	100.8728	368,185.72	3,825.57-
260,000.0000	SAMSON INVESTMENT CO 144A VAR RT 02/15/2020 DD 02/08/12	276,250.00	105.5000	274,300.00	1,950.00-
400,000.0000	SANTANDER UK PLC 144A 5.000% 11/07/2023 DD 11/07/13	398,724.00	105.5926	422,370.40	23,646.40
80,000.0000	SCHAEFFLER FINANCE BV 144A 8.500% 02/15/2019 DD 02/09/12	91,300.00	112.3900	89,912.00	1,388.00-
50,000.0000	SCHAEFFLER FINANCE BV 144A 7.750% 02/15/2017 DD 02/09/12	56,812.50	113.5000	56,750.00	62.50-
55,000.0000	SPRINT CAPITAL CORP 6.875% 11/15/2028 DD 11/16/98	56,237.50	98.7500	54,312.50	1,925.00-
17,000.0000	SPRINT CAPITAL CORP 8.750% 03/15/2032 DD 03/14/02	20,102.50	111.8750	19,018.75	1,083.75-
500,000.0000	SPRINT NEXTEL CORP 7.000% 08/15/2020 DD 08/14/12	518,750.00	108.7500	543,750.00	25,000.00
65,000.0000	SPRINT NEXTEL CORP 6.000% 11/15/2022 DD 11/14/12	67,762.50	100.7500	65,487.50	2,275.00-
38,000.0000	STARWOOD HOTELS & RESORTS WORL 6.750% 05/15/2018 DD 05/23/08	46,280.12	117.6116	44,692.41	1,587.71-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
225,000.0000	TNK-BP FINANCE SA 144A 7.250% 02/02/2020 DD 02/02/10	269,718.75	106.0000	238,500.00	31,218.75-
55,000.0000	TELEFONICA EMISIONES SAU 5.462% 02/16/2021 DD 02/16/11	60,620.73	112.5959	61,927.75	1,307.02
430,000.0000	TELEFONICA EMISIONES SAU 4.570% 04/27/2023 DD 04/29/13	430,053.06	104.5878	449,727.54	19,674.48
425,000.0000	TESORO CORP 5.125% 04/01/2024 DD 03/18/14	425,931.25	99.5000	422,875.00	3,056.25-
425,000.0000	TOLL BROTHERS FINANCE CORP 4.000% 12/31/2018 DD 11/21/13	425,920.75	102.1250	434,031.25	8,110.50
280,000.0000	TORCHMARK CORP 9.250% 06/15/2019 DD 06/30/09	380,900.80	129.2379	361,866.12	19,034.68-
250,000.0000	TRIUMPH GROUP INC 8.625% 07/15/2018 DD 06/16/10	277,500.00	105.7500	264,375.00	13,125.00-
275,000.0000	TYSON FOODS INC 4.500% 06/15/2022 DD 06/13/12	303,638.50	105.8499	291,087.23	12,551.27-
75,000.0000	USG CORP 6.300% 11/15/2016 DD 05/15/07	79,875.00	108.0000	81,000.00	1,125.00
420,000.0000	UNITED AIR 2014 - 1 B PTT 4.750% 10/11/2023 DD 04/07/14	421,556.25	100.9380	423,939.60	2,383.35
50,000.0000	VALEANT PHARMACEUTICALS I 144A 6.875% 12/01/2018 DD 11/23/10	53,000.00	105.5000	52,750.00	250.00-
310,000.0000	VALE SA 5.625% 09/11/2042 DD 09/11/12	323,849.25	96.7520	299,931.20	23,918.05-

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
315,000.0000	VALIDUS HOLDINGS LTD 8.875% 01/26/2040 DD 01/26/10	410,596.20	141.6777	446,284.76	35,688.56
249,000.0000	VENTAS REALTY LP / VENTAS CAPI 2.700% 04/01/2020 DD 03/19/13	253,034.05	99.0776	246,703.22	6,330.83-
365,000.0000	VERIZON COMMUNICATIONS INC 5.150% 09/15/2023 DD 09/18/13	363,817.40	110.2336	402,352.64	38,535.24
35,000.0000	VIDEOTRON LTD 6.375% 12/15/2015 DD 12/15/05	35,437.50	100.2500	35,087.50	350.00-
135,000.0000	VIRGIN MEDIA SECURED FINANCE P 5.250% 01/15/2021 DD 07/15/11	145,477.62	102.7500	138,712.50	6,765.12-
425,000.0000	VIRGIN MEDIA SECURED FIN 144A 5.500% 01/15/2025 DD 03/28/14	425,000.00	100.6250	427,656.25	2,656.25
530,000.0000	WELLPOINT INC 4.350% 08/15/2020 DD 08/12/10	597,723.93	107.9619	572,198.07	25,525.86-
32,000.0000	WEYERHAEUSER CO 7.375% 10/01/2019 DD 10/01/09	40,475.90	121.7857	38,971.42	1,504.48-
430,000.0000	WHIRLPOOL CORP 2.400% 03/01/2019 DD 02/25/14	429,028.20	100.0405	430,174.15	1,145.95
80,000.0000	WHITING PETROLEUM CORP 6.500% 10/01/2018 DD 09/24/10	86,200.00	105.5000	84,400.00	1,800.00-
325,000.0000	WHITING PETROLEUM CORP 5.000% 03/15/2019 DD 09/12/13	325,137.50	105.2500	342,062.50	16,925.00
395,000.0000	WHITING PETROLEUM CORP 5.750% 03/15/2021 DD 09/12/13	411,787.50	107.2500	423,637.50	11,850.00

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220,000.0000		WILLIAMS COS INC/THE 3.700% 01/15/2023 DD 12/18/12	222,224.42	92.3328	203,132.16	19,092.26-
135,000.0000		WPX ENERGY INC 6.000% 01/15/2022 DD 11/14/11	146,137.50	103.3750	139,556.25	6,581.25-
115,000.0000		WYNDHAM WORLDWIDE CORP 2.950% 03/01/2017 DD 03/07/12	118,384.11	103.5661	119,101.02	716.91
205,000.0000		WYNDHAM WORLDWIDE CORP 4.250% 03/01/2022 DD 03/07/12	217,008.08	101.6334	208,348.47	8,659.61-
30,000.0000	*	QUEBECOR F ESCROW 0.000% 01/15/2015 DD 12/18/06	0.00	0.0000	0.00	0.00
5,110.0000	*	ZIFF DAVIS MEDIA INC VAR RT 07/15/2011 DD 05/05/10	0.00	0.0000	0.00	0.00
TOTAL CORPORATE DEBT INSTRUMENTS			50,331,409.25		49,974,049.77	357,359.48-
CORPORATE STOCK - PREFERRED						
450,000.0000		CITIGROUP INC VAR RT 12/29/2049 DD 04/30/14	450,000.00	99.6250	448,312.50	1,687.50-
300,000.0000		JPMORGAN CHASE & CO VAR RT 04/29/2049 DD 04/23/08	349,397.40	113.0000	339,000.00	10,397.40-
500,000.0000		LINCOLN NATIONAL CORP VAR RT 05/17/2066 DD 05/17/06	507,500.00	103.7700	518,850.00	11,350.00
415,000.0000		XL GROUP PLC VAR RT 12/29/2049 DD 03/15/07	412,875.00	98.5000	408,775.00	4,100.00-
TOTAL CORPORATE STOCK - PREFERRED			1,719,772.40		1,714,937.50	4,834.90-

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	
	CORPORATE STOCK - COMMON					
40.0000	ZIFF DAVIS HLDGS INC OC-COM	0.00	0.0000	0.00	0.00	
TOTAL CORPORATE STOCK - COMMON		0.00		0.00	0.00	
	COMMON/COLLECTIVE TRUST					
2,200,498.3500	EB TEMP INV FD VAR RT 12/31/49 FEE CL 15	2,200,498.35	1.0000	2,200,498.35	0.00	
TOTAL COMMON/COLLECTIVE TRUST		2,200,498.35		2,200,498.35	0.00	
	GRAND TOTAL	87,949,495.51		86,933,247.20	0.00	C
					1,016,248.31-	I
					1,016,248.31-	

Ohio Carpenters' Annuity Plan

ASSETS HELD FOR INVESTMENT — For Period May 1, 2013 to April 30, 2014

Assets	Cost Basis	Shares	Market Price Per Share	Principal Value	Investment Income	Market Value
Ohio Carpenters Annuity Fund						
American EuroPacific Growth R6	9,564,811.12	221,494.956	49.2900	10,917,486.38	0.00	10,917,486.38
Goldman Sachs Small Cap Val A	12,990,735.81	323,293.948	53.0200	17,141,045.12	0.00	17,141,045.12
MainStay S&P 500 Index Fund I	18,314,830.57	570,395.141	43.8300	25,000,419.03	0.00	25,000,419.03
PIMCO Money Market Fund Admin	2,016,576.46	2,016,576.46	1.0000	2,016,576.46		2,016,576.46
Vanguard REIT Index Fund Inst	5,617,116.38	363,179.395	16.0100	5,814,502.11	0.00	5,814,502.11
Vanguard Inf-Prot Secs (Inst)	39,416,691.26	3,758,432.734	10.7200	40,290,398.91	0.00	40,290,398.91
Vanguard FTSE All Wld exUS Ins	13,789,369.53	155,822.938	100.4600	15,653,972.35	0.00	15,653,972.35
Ohio Carpenters / BONY	68,603,944.99	5,109,850.228	17.2428	88,108,120.40	0.00	88,108,120.40
SSgA S&P Glbl Lg MC Natl Res I	15,000,000.00	1,433,491.197	11.2420	16,115,308.04	0.00	16,115,308.04
Total Ohio Carpenters Annuity Fund	*185,314,076.12*			*221,057,828.80*		*221,057,828.80*
Total Assets Held for Investment	*185,314,076.12*	*13,952,536.997*		*221,057,828.80*	*0.00*	*221,057,828.80*

FORM 5500 ITEMS SCH H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS PLAN NAME OHIO CARPENTER'S ANNUITY PLAN EIN 34-1778747 PLAN NO. 001

SCHEDULE # 2 PLAN SPONSOR BOARD OF TRUSTEES OHIO CARPENTERS' ANNUITY PLAN YEAR END 04/30/2014

Individual transactions - purchases and sales on separate lines

Identity of Party Involved*	Description of Asset (show interest rate and maturity)	Purchase Price	Selling Price	Lease rental	Expense Incurred w/Transaction	Book Value on Sale**	Current Value at Transaction Date	Net Gain (Loss)
	EB TEMP INV FD VAR RT 12/31/49	15,032,291					15,032,291	-
	EB TEMP INV FD VAR RT 12/31/49		11,997,932				11,997,932	-
	MainStay S&P Index Fund I		35,000,000				35,000,000	7,111,385

* Not applicable for purchases or sales of marketable securities.

**Book value is current value at end of prior year or at purchase date if purchased during the reporting period.

Series of securities transactions - include all purchases and sales of one security on same line and apply five percent test to total.

Description of Security	Total Number of Purchases	Total Number of Sales	Total Value of Purchases	Sales	
				Total Value	Increase (Decrease)
EB TEMP INV FD VAR RT 12/31/49	105		$ 47,541,597		
EB TEMP INV FD VAR RT 12/31/49		145		$ 46,796,678	
MainStay S&P Index Fund I		141		46,936,915	
SSgA S&P Global Natural Resources Stock Index NL Fund	2		$ 15,000,000		