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

2014

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 12/31/1973

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

5700 SKYLAB ROAD
HUNTINGTON BEACH, CA 92647

2b Employer Identification Number (EIN)
95-2802248

2c Plan Sponsor's telephone number
714-899-2449

2d Business code (see instructions)
326100

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.	10/13/2015	DENNIS WATERKOTTE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2015	DENNIS WATERKOTTE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4c**	PN

5	Total number of participants at the beginning of the plan year	**5**	300
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	274
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	264
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	44
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	308
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	308
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	287
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	5
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2F 2G 2T 3D

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)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	**(1)** [ ]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(4)** [ ]	General assets of the sponsor

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

a Pension Schedules

(1) [X] **R** (Retirement Plan Information)

(2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1) [X] **H** (Financial Information)

(2) [ ] **I** (Financial Information – Small Plan)

(3) [ ] ___ **A** (Insurance Information)

(4) [X] **C** (Service Provider Information)

(5) [ ] **D** (DFE/Participating Plan Information)

(6) [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .....…… ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ……..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

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.**	**2014** **This Form is Open to Public Inspection.**

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
AIRTECH INTERNATIONAL, INC

D Employer Identification Number (EIN)
95-2802248

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

MERRILL LYNCH,PIERCE,FENNER & SMITH

13-5674085

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

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

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

ASCENSUS

11-3665754

(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?
99 15 60 50	NONE	1560	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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

2014

This Form is Open to Public Inspection

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
AIRTECH INTERNATIONAL, INC

D Employer Identification Number (EIN)
95-2802248

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2210513	2313620
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	53489	58560
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	761413	1535558
(2) U.S. Government securities	1c(2)	2991730	2634776
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	4955322	6290243
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	82110	81360
(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)		
(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)	24441017	26283840
(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	35495594	39197957
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	35495594	39197957

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)	2313620	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2313620
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	4	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		4
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	4515	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		4515
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(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)		17262
c Other income	2c		1836797
d Total income. Add all **income** amounts in column (b) and enter total	2d		4172198
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	468275	
(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)		468275
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)		
(2) Contract administrator fees	2i(2)	1560	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1560
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		469835
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		3702363
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: SOREN MCADAM CHRISTENSEN LLP **(2)** EIN: 77-0549163

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		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
AIRTECH INTERNATIONAL, INC

D Employer Identification Number (EIN)
95-2802248

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 45-0404698

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):

Airtech International, Inc.
Profit Sharing Plan

Financial Statements

and

Supplemental Schedules

with

Independent Auditors' Report

December 31, 2014 and 2013

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Soren McAdam Christenson LLP
Certified Public Accountants and Business Advisors



Independent Auditors' Report

To the Board of Directors of the
Airtech International, Inc. Profit Sharing Plan

We were engaged to audit the accompanying financial statements of Airtech International, Inc. Profit Sharing Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Bank of America, N.A., the Trustee, Frontier Trust Company and Ascensus Trust Company, the Custodians of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan Administrator that the Trustee and Custodians hold the Plan's investment assets and execute investment transactions. The Plan Administrator has obtained certifications from the Trustee and Custodians as of December 31, 2014 and 2013 and for the year ended December 31, 2014, that the information provided to the Plan Administrator by the Trustee and Custodians is complete and accurate.

2068 Orange Tree Lane, Suite 100 P.O. Box 8010 Redlands, CA 92375-1210 (909) 798-2222 (909) 798-9772 fax smc @smc-cpas.com
Members of PKF North American Network and of PKF International, an association of legally independent firms
and American Institute of Certified Public Accountants

Disclaimer of Opinion

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

Other Matter

The supplemental schedules on pages 14 through 21 as of and for the year ended December 31, 2014 are required by the DOL Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

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

Lores McAdam Christensen LLP

Redlands, California
October 8, 2015

Airtech International, Inc. Profit Sharing Plan

Statements of Net Assets Available for Benefits

	December 31,	
	2014	2013
ASSETS		
Investments		
Mutual funds	$ 26,283,840	$ 24,441,017
Corporate debt	6,290,243	4,955,322
U.S. government securities	2,634,776	2,991,730
Money market funds	1,535,558	761,413
Preferred stock	81,360	82,110
Total investments	36,825,777	33,231,592
Receivables		
Employer contribution	2,313,620	2,210,513
Accrued income	58,560	53,489
Total receivables	2,372,180	2,264,002
Net assets available for benefits	$ 39,197,957	$ 35,495,594

See accompanying notes to financial statements.

Airtech International, Inc. Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2014

Employer contributions	$ 2,313,620
Investment income	
Interest income	327,644
Dividend income	243,920
Net appreciation in fair value of investments	1,225,192
Total investment income	1,796,756
Benefits paid to participants	(468,275)
Other	
Other income	61,822
Administrative expenses	(1,560)
Total other	60,262
Change in net assets available for benefits	3,702,363
Net assets available for benefits	
Balance, December 31, 2013	35,495,594
Balance, December 31, 2014	$ 39,197,957

See accompanying notes to financial statements.

Airtech International, Inc. Profit Sharing Plan

Notes to Financial Statements

1. Description of the Plan

The following description of the Airtech International, Inc. Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan providing benefits to all employees of Airtech International, Inc. (the Company) who have completed one year of service with 1,000 hours, are not governed by a collective bargaining agreement under which retirement benefits were the subject of good faith bargaining, are not a nonresident alien who received no earned income from the Company from U.S. sources. Employees enter the Plan starting on January 1 or July 1 following the date of meeting the eligibility requirements of the Plan. As of March 13, 2010, the Company restated its Plan to no longer allow participants a 401(k) salary deferral option, and effective February 1, 2011, the Company restated its Plan to no longer allow participants to contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Contributions

Under the provisions of the Plan, the Company may make discretionary profit-sharing contributions to the Plan. Participants must have completed at least 500 hours of service in the Plan year or must be employed on the last day of the Plan year to participate in the Company's profit-sharing contribution. Company profit-sharing contributions are allocated among eligible participants in the ratio which each eligible participant's annual compensation bears to the total compensation of all participants. For the year ended December 31, 2014, the Company elected to contribute $2,313,620 to the Plan.

Participant Account

An account is maintained for each participant. The participant's account is credited with the Company's profit-sharing contributions and participant's Plan earnings and losses.

Vesting

Vesting in the Company's profit-sharing contributions is based on years of service. A year of service is given for each Plan year in which a participant performs 1,000 or more hours of service. After one year of service, a participant becomes 20 percent vested. Each service year thereafter will increase the participant's vesting by 20 percent, with 100 percent vesting after five years.

Investment Options

Participants direct the 401(k) portion of their account in investment options offered by the Plan. These investment options are comprised of money market funds and mutual funds offered by Frontier Trust Company (Frontier). During the year ended December 31, 2014, Frontier changed its name to Ascensus Trust Company (Ascensus). The Company directs the Company's profit-sharing contributions to the participant accounts in investment options offered by the Plan. These investment options are comprised of money market funds, mutual funds, corporate debt, U.S. government securities, and preferred stock offered by Bank of America, N.A. (BofA).

Airtech International, Inc. Profit Sharing Plan

Notes to Financial Statements

1. Description of the Plan (Continued)

Payment of Benefits

Upon termination of service due to death, disability, or retirement, participants may elect to receive a lump-sum distribution of the value of the vested interest in the participant's account. Participants who terminate employment shall receive the value of the vested interest in their account as a lump-sum distribution.

Forfeited Accounts

At December 31, 2014 and 2013, forfeited non-vested accounts totaled $63,867 and $38,386, respectively. These funds are available to be reallocated to eligible participants. During the year ended December 31, 2014, no forfeited non-vested accounts were reallocated to eligible participants.

2. Summary of Accounting Policies

The preparation of these financial statements requires Plan management to make estimates and assumptions. Those estimates and assumptions affect the reported amounts of net assets available for benefits, net appreciation in fair value of investments, as well as disclosures of contingent assets and liabilities. Actual results could differ from those estimates. Plan management has considered events occurring through October 8, 2015 in its evaluation of the conditions on which estimates were based or for changes in conditions subsequent to the date of the statement of net assets available for benefits, which should be disclosed. The financial statements were available to be issued at this date.

Plan management also determines the accounting principles to be used in the preparation of financial statements. A description of the significant accounting policies employed in the preparation of these financial statements follows:

Basis of Accounting

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator determines the Plan's valuation policies utilizing information provided by the trustee and custodians. See Note 6 for fair value measurements.

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

Risks and Uncertainties

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

2. Summary of Accounting Policies (Continued)

Payment of Benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. The Company pays all other Plan expenses, including investment related expenses, except those expenses related to participant distributions.

Reclassifications

Certain amounts for 2013 have been reclassified to conform to the 2014 financial statement presentation.

3. Information Certified by the Trustee and Custodians (Unaudited)

At December 31, 2014 and 2013, the Plan's investments were held by the Trustee and Custodians. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the Trustee and Custodians as complete and accurate in accordance with Section 2520.103-5(c) of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA).

	2014	2013
Investments		
Mutual funds – BofA	$ 25,929,025	$ 24,107,716
Mutual funds – Frontier/Ascensus	354,815	333,301
Total mutual funds	26,283,840	24,441,017
Corporate debt – BofA	6,290,243	4,955,322
U.S. government securities – BofA	2,634,776	2,991,730
Money market funds – BofA	1,489,514	753,761
Money market funds – Frontier/Ascensus	46,044	7,652
Total money market funds	1,535,558	761,413
Preferred stock – BofA	81,360	82,110
Total investments	$ 36,825,777	$ 33,231,592
Accrued income – BofA	$ 58,560	$ 53,489

Airtech International, Inc. Profit Sharing Plan

Notes to Financial Statements

3. Information Certified by the Trustee and Custodians (Unaudited) (Continued)

Investment income	
Interest income – BofA	$ 327,644
Dividend income – BofA	239,401
Dividend income – Frontier/Ascensus	4,519
Total dividend income	243,920
Net appreciation in fair value of investments – BofA	1,207,930
Net appreciation in fair value of investment – Frontier/Ascensus	17,262
Total net appreciation in fair value of investments	1,225,192
Total investment income	$ 1,796,756

4. Investments (Unaudited)

The fair values of individual investments that represent five percent or more of the Plan's net assets as of December 31 are as follows:

		2014	2013
*	CMG Ultra Short Term Bond Fund	$ 10,131,462	$ 9,107,489
*	Columbia Large Cap Enhanced Core Fund Z	6,102,009	5,107,969
*	Columbia Dividend Income Fund	3,232,674	2,668,173
*	Thornburg International Value Fund	2,370,859	2,684,954
*	Scout Mid Cap Fund	2,339,000	2,598,883
*	Prudential Global Real Estate Fund Z	–	1,982,632

* Nonparticipant-directed investment

4. Investments (Unaudited) (Continued)

During the year ended December 31, 2014, the Plan's investments (including gains and losses on investments bought and sold, as well as investments held during the year) appreciated (depreciated) in value by $1,225,192 as follows:

Mutual funds	$ 1,217,593
Corporate debt	(10,411)
U.S. government securities	18,760
Preferred stock	(750)
	$ 1,225,192

5. Nonparticipant-Directed Investments (Unaudited)

Net assets available for benefits at December 31, 2014 and 2013 and the significant components of the changes in net assets available for benefits for the year ended December 31, 2014 related to nonparticipant-directed investments are as follows:

	December 31, 2014	December 31, 2013
Net assets available for benefits		
Mutual funds	$ 25,929,025	$ 24,107,716
Corporate debt	6,290,243	4,955,322
U.S. government securities	2,634,776	2,991,730
Money market funds	1,527,639	753,761
Preferred stock	81,360	82,110
Accrued interest receivable	58,560	53,489
Employer contribution receivable	2,313,620	2,210,513
	$ 38,835,223	$ 35,154,641

Changes in net assets available for benefits	
Employer contribution	$ 2,313,620
Interest income	327,644
Dividend income	239,401
Net appreciation in fair value of investments	1,207,930
Other income	61,822
Benefits paid to participants	(468,275)
Expenses	(1,560)
	$ 3,680,582

6. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under the Accounting Standards Codification Topic 820 are described below:

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

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs, other than quoted prices, that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

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

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

Following is a description of the valuation methodologies used for investments measured at fair value. There have been no changes in the valuation methodologies used at December 31, 2014 and 2013.

Money market funds: Valued based on historical cost, which represents fair value.

Mutual funds: Valued at the daily closing price as reported by the fund, which represents the net asset value (NAV) of shares held by the plan at year end.

Preferred stock: Valued at the closing price reported in the active market on which the individual securities are traded.

Corporate debt and U.S. government securities: Valued using quoted market prices that are traded in less active markets or quoted market prices for similar instruments.

6. Fair Value Measurements (Continued)

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

The following table sets forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2014:

	Level 1	Level 2	Level 3	Total
Money market funds	$ 1,535,558	$ –	$ –	$ 1,535,558
Preferred stock	81,360	–	–	81,360
Mutual funds				
Domestic equity funds	13,660,049	–	–	13,660,049
Fixed income	10,131,462	–	–	10,131,462
Foreign equity funds	2,418,002	–	–	2,418,002
Domestic bonds	74,327	–	–	74,327
Total mutual funds	26,283,840	–	–	26,283,840
Corporate debt:				
Financial services	–	1,563,037	–	1,563,037
Energy	–	1,016,918	–	1,016,918
Industrial	–	838,993	–	838,993
Technology	–	659,040	–	659,040
Communications	–	501,617	–	501,617
Healthcare	–	424,611	–	424,611
Consumer goods	–	424,153	–	424,153
Basic materials	–	400,522	–	400,522
Real estate	–	461,352	–	461,352
Total corporate debt	–	6,290,243	–	6,290,243
U.S. government securities	–	2,634,776	–	2,634,776
Total investments at fair value	$ 27,900,758	$ 8,925,019	$ –	$ 36,825,777

6. Fair Value Measurements (Continued)

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

	Level 1	Level 2	Level 3	Total
Money market funds	$ 761,413	$ –	$ –	$ 761,413
Preferred stock	82,110	–	–	82,110
Mutual funds				
Domestic equity funds	12,502,094	–	–	12,502,094
Fixed income	9,107,489	–	–	9,107,489
Foreign equity funds	2,733,384	–	–	2,733,384
Domestic bonds	98,050	–	–	98,050
Total mutual funds	24,441,017	–	–	24,441,017
Corporate debt:				
Financial services	–	1,349,975	–	1,349,975
Energy	–	863,935	–	863,935
Technology	–	577,298	–	577,298
Industrial	–	508,102	–	508,102
Healthcare	–	468,606	–	468,606
Consumer goods	–	357,698	–	357,698
Communications	–	352,193	–	352,193
Basic materials	–	328,202	–	328,202
Real estate	–	149,313	–	149,313
Total corporate debt	–	4,955,322	–	4,955,322
U.S. government securities	–	2,991,730	–	2,991,730
Total investments at fair value	$ 25,284,540	$ 7,947,052	$ –	$ 33,231,592

7. Related-Party and Party-in-Interest Transactions

The Plan invests in a money market fund managed by BofA, as well as a money market fund managed by Frontier/Ascensus. BofA acts as Trustee and Frontier/Ascensus acts as Custodian for only those investments as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions which are exempt from the prohibited transaction rules. Fees incurred by the Plan for the investment management services are paid directly by the Company. The Plan Sponsor directly pays any other fees related to the Plan's operations.

Airtech International, Inc. Profit Sharing Plan

Notes to Financial Statements

8. Tax Status

The Plan obtained a determination letter dated March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan Trustee, Plan Custodians and Plan Administrator believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax period in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2011.

9. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their Company contributions.

Supplemental Schedules

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Money market funds				
*	Bank of America, N.A.	BofA Government Reserves Trust Class	$ 1,489,514	$ 1,489,514
*	Ascensus Trust Company	Retirement Reserves		46,044
	Total money market funds			1,535,558
Mutual funds				
	Columbia Management	CMG Ultra Short Term Bond Fund	10,153,095	10,131,462
	Columbia Management	Columbia Large Cap Enhanced Core Fund Z	4,888,977	6,102,009
	Columbia Management	Columbia Dividend Income Fund	2,490,188	3,232,674
	Thornburg Equity Funds	Thornburg International Value Fund	2,549,224	2,370,859
	Scout	Scout Mid Cap Fund	2,607,029	2,339,000
	Prudential Investments	Prudential Global Real Estate Fund Z	1,635,459	1,801,865
	Dreyfus Funds	Dreyfus Bond Market Index Fund Investor Class		74,327
	American Funds	The Growth Fund of America, Inc. Class R-4		47,174
	American Funds	Europacific Growth Fund Class R-4		47,143
	Goldman Sachs	Small Cap Value Fund Institutional		39,556
	T. Rowe Price	T. Rowe Price Retirement 2030 Fund – Advisor Class		38,288
	T. Rowe Price	T. Rowe Price Retirement 2040 Fund – Advisor Class		25,871
	T. Rowe Price	T. Rowe Price Retirement 2020 Fund – Advisor Class		20,865
	Columbia Management	Columbia Acorn Fund Z		8,287
	Victory Capital Management Inc.	Victory Sycamore Established Value Fund A		4,460
	Total mutual funds			26,283,840

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Preferred stock				
	US Bancorp	Preferred series G, 6.00%	81,737	81,360
	Total preferred stock			81,360
Corporate debt				
	Morgan Stanley	$175,000 par value commercial mortgage passthru class A4, 5.162% due 10/12/2052	184,591	179,433
	Comcast Corp.	$125,000 par value new note, 6.30%, due 11/15/2017	147,634	141,570
	BP Capital Markets PLC	$125,000 par value senior note United Kingdom, 4.75% due 3/10/2019	140,201	136,739
	American Express Co.	$125,000 par value senior note, 5.50% due 9/12/2016	139,914	133,945
	Union Pacific Corp	$125,000 par value unsecured senior note call 12/15/2023, 3.75% due 3/15/2024	131,690	133,683
	Simon Property Group LP	$125,000 par value note call 9/2/2016, 5.25% due 12/1/2016	139,854	132,559
	Cisco Systems Inc.	$125,000 par value senior unsecured note, 3.15% due 3/14/2017	133,705	130,662
	MidAmerican Energy Co.	$125,000 par value secured 1st mortgage, 3.50% due 10/15/2024	128,413	129,357
	Aegon N V	$125,000 par value senior unsecured note Netherlands, 4.625% due 12/1/2015	133,956	129,334
	JPMorgan Chase & Co.	$125,000 par value note, 3.15% due 7/5/2016	131,253	128,493
	Metlife Inc.	$125,000 par value senior unsecured note, 3.60% due 4/10/2024	127,835	128,280
	Bank Nova Scotia B C	$125,000 par value senior unsecured note Canada, 2.55% due 1/12/2017	130,093	128,192
	Toronto Dominion Bank	$125,000 par value senior unsecured medium term bank note Canada, 2.375% due 10/19/2016	130,370	127,895
	International Business Machs Corp.	$125,000 par value senior unsecured note, 3.375% due 8/1/2023	122,699	127,720

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Corporate debt (continued)				
	Westpac Banking Corp.	$125,000 par value senior unsecured note Australia, 3.00% due 12/9/2015	130,834	127,659
	United Technologies Corp.	$125,000 par value note, 3.10% due 6/1/2022	122,376	127,541
	BHP Billiton Financial USA LTD	$125,000 par value company guaranteed senior note Australia, 1.875% due 11/21/2016	128,204	126,974
	America Movil S A B De C V	$125,000 par value company guaranteed senior note Mexico, 2.375% due 9/8/2016	128,548	126,715
	Coca Cola Co.	$125,000 par value senior unsecured note, 2.45% due 11/1/2020	123,513	126,621
	General Electric Capital Corp.	$125,000 par value senior unsecured medium term note, 3.10% due 1/9/2023	121,104	126,561
	Goldman Sachs Group Inc.	$125,000 par value senior note, 3.30% due 5/3/2015	129,290	126,015
	Paccar Financial Corp.	$125,000 par value senior unsecured medium term note, 1.15% due 8/16/2016	125,475	125,634
	Shell International Financial B V	$125,000 par value senior unsecured note Netherlands, 1.90% due 8/10/2018	126,468	125,431
	Unitedhealth Group Inc.	$125,000 par value unsecured senior note, .85% due 10/15/2015	125,690	125,361
	John Deere Capital Corporation	$125,000 par value unsecured medium term note, 0.875% due 4/17/2015	125,590	125,156
	Rio Tinto Financial USA PLC	$125,000 par value senior unsecured guaranteed note United Kingdom, 1.125% due 3/20/2015	125,833	125,133
	Toyota Motor Credit Corp.	$125,000 par value senior unsecured medium term note, 1.25% due 10/5/2017	124,036	124,628
	Oracle Corp.	$125,000 par value senior unsecured note, 1.20% due 10/15/2017	124,355	124,555
	EMC Corp.	$125,000 par value senior unsecured note, 2.65% due 6/1/2020	123,595	124,399

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Corporate debt (continued)				
	Sanofi S A	$125,000 par value senior unsecured note France, 1.25% due 4/10/2018	123,211	123,808
	Disney Walt Co.	$125,000 par value senior unsecured medium term note, 2.35% due 12/1/2022	114,836	122,570
	Raytheon Co.	$125,000 par value senior unsecured note, 2.50% due 12/15/2022	114,711	121,789
	American International Group Inc.	$99,000 par value senior note, 5.05% due 10/1/2015	106,822	102,004
	Abbvie Inc.	$100,000 par value unsecured senior note, 1.75% due 11/6/2017	100,551	100,217
	Baltimore Gas & Electric Co.	$100,000 par value senior unsecured note, call 5/15/2022, 2.80% due 8/15/2022	94,135	99,666
	Morgan Stanley	$96,880 par value commercial mortgage passthru A4A, 4.89% due 6/12/2047	100,483	97,700
	LB UBS Commercial Mortgage Trust	$86,928 par value series 2006 class A4, 5.156% due 2/15/2031	92,140	89,029
	Verizon Communications Inc.	$75,000 par value unsecured senior note, 5.15% due 9/15/2023	81,907	82,817
	CSX Corp	$75,000 par value senior unsecured note, call 8/1/2023, 3.7% due 11/1/2023	78,212	78,629
	WFRBS Commercial Mortgage Trust	$78,813 par value commercial mortgage passthru CTF A-1, 1.337% due 5/15/2047	78,812	78,589
	Capital One Financial Corp.	$75,000 par value senior note, 3.15% due 7/15/2016	78,202	77,134
	Boston Properties LP	$75,000 par value unsecured note, call 11/01/2023, 3.8% due 2/1/2024	76,586	77,075
	Morgan Stanley	$75,000 par value senior unsecured note, series F, 3.875% due 4/29/2024	75,944	76,953
	Energy Transfer Partners L P	$75,000 par value senior unsecured note, call 8/1/2020, 4.15% due 10/1/2020	76,785	76,889
	Hewlett Packard Co	$75,000 par value unsecured senior note, 2.6% due 9/15/2017	77,398	76,408

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Corporate debt (continued)				
	Enterprise Production Operations LLC GTD	$75,000 par value unsecured senior note, call 11/15/2023, 3.9% due 2/15/2024	75,437	76,387
	Ensco PLC	$75,000 par value unsecured senior nt United Kingdom, 3.25% due 3/15/16	78,247	76,372
	DirectTV Holdings LLC	$75,000 par value company guaranteed senior note, 3.55% due 3/15/2015	76,629	75,445
	Xerox Corp.	$75,000 par value senior unsecured note, 4.25% due 2/15/2015	78,050	75,296
	Covidien International Financial S A	$75,000 par value company guaranteed note Luxembourg, 1.35% due 5/29/2015	75,650	75,225
	Phillips 66	$75,000 par value unsecured senior note, 1.95% due 3/5/2015	75,716	75,190
	Telefonica Emisiones S A U	$75,000 par value company guaranteed note Spain, 4.949% due 1/15/2015	78,263	75,070
	Vornado Realty LP	$75,000 par value unsecured senior note REIT, 4.25% due 4/1/2015	76,389	75,000
	Dow Chemical Company	$75,000 par value unsecured senior note call 07/01/2024, 3.5% due 10/01/2024	74,222	74,240
	Enterprise Production Operations LLC	$75,000 par value unsecured senior note, call 12/15/2022, 3.35% due 3/15/2023	74,276	74,182
	Freeport-McMoRan Copper & Gold	$75,000 par value inc unsecured senior note, 2.375% due 3/15/2018	74,900	74,175
	Sempra Energy	$75,000 par value senior unsecured note, call 71/2022, 2.875% due 10/1/2022	69,657	73,724
	Rowan Cos Inc.	$75,000 par value company guaranteed senior note call 3/1/2022, 4.875% due 6/1/2022	77,423	72,981
	Ford Motor Credit Company	$50,000 par value unsecured senior note, 2.75% due 5/15/15	50,948	50,334

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

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

December 31, 2014

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Corporate debt (continued)				
	WF-RBS Commercial Mortgage Trust	$9,147 par value series 2013-UBS class A1, 1.122% due 3/15/2046	9,147	9,100
	Total corporate debt			6,290,243
U.S. Government securities				
	United States Treasury Note	$400,000 note, 2.5% due 5/15/2024	410,783	412,064
	Federal National Mortgage Association	$372,740.70 principal balance, pool MA0585, 4.50% due 11/1/2040	398,483	405,087
	Federal National Mortgage Association	$351,734.18 principal balance, pool #AB3000, 4.5% due 5/1/2031	378,884	383,992
	Federal National Mortgage Association	$311,107.21 principal balance, pool MA0115, 4.50% due 7/1/2029	335,461	340,703
	Federal National Mortgage Association	$281,288.40 principal balance, pool #AL1948, 4.00% due 1/1/2042	297,067	302,272
	Federal Home Loan Mortgage Corp.	$238,391.94 principal balance, pool #G05888, 5.50% due 10/1/2039	260,443	268,229
	Federal National Mortgage Association	$235,871.62 principal balance, pool #254634, 5.50% due 2/1/2023	258,279	263,570
	Federal National Mortgage Association	$236,081.53 principal balance, pool #AC9547, 4.50% due 2/1/2040	253,419	258,859
	Total U.S. Government securities			2,634,776
Total investments				$ 36,825,777

* Indicates party-in-interest.

** Cost omitted for participant-directed investments.

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

Schedule H, Line 4i – Schedule of Assets (Acquired and Disposed of Within Year)

Year Ended December 31, 2014

	(a) Identity of Issue, Borrower, Lessor or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(c) Cost of Acquisitions	(d) Proceeds of Dispositions
*	Bank of America, N.A.	BofA Government Reserves	$ 4,061,434	$ 4,061,434
*	Bank of America, N.A.	Bank of America Temporary Overnight Deposit	1,263,250	1,263,250
	Unites States Treasury	United States Treasury note $406,008 par value, @ 99.66 due 4/15/19	408,420	404,612
	Unites States Treasury	United States Treasury note $149,000 par value, @ 99.36 due 5/31/19	147,504	148,045
	Unites States Treasury	United States Treasury note $149,000 par value, @ 99.93 due 5/28/15	148,860	148,860

* A party-in-interest as defined by ERISA

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2014

	(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
Series I – Single transactions in excess of 5% of Plan assets							
*	Bank of America, N.A.	BofA Government Reserves Trust Class	$ 2,210,513	$ –	$ 2,210,513	$ 2,210,513	$ –
Series III – Series of transactions in excess of 5% of Plan assets							
*	Bank of America, N.A.	BofA Government Reserves Trust Class	5,550,947	–	5,550,947	5,550,947	–
*	Bank of America, N.A.	BofA Government Reserves Trust Class	–	4,815,195	4,815,195	4,815,195	–
*	Bank of America, N.A.	Bank of America Temporary Overnight Deposit	1,094,093	–	1,094,093	1,094,093	–
*	Bank of America, N.A.	Bank of America Temporary Overnight Deposit	–	1,094,093	1,094,093	1,094,093	–

* A party-in-interest as defined by ERISA

There are no category (ii) or (iv) reportable transactions.

Columns for "Lease Rental" and "Expenses Incurred with Transactions" are not applicable.

Airtech International, Inc. Profit Sharing Plan

EIN # 95-2802248 Plan 002

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2014

	(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
Series I – Single transactions in excess of 5% of Plan assets							
*	Bank of America, N.A.	BofA Government Reserves Trust Class	$ 2,210,513	$ –	$ 2,210,513	$ 2,210,513	$ –
Series III – Series of transactions in excess of 5% of Plan assets							
*	Bank of America, N.A.	BofA Government Reserves Trust Class	5,550,947	–	5,550,947	5,550,947	–
*	Bank of America, N.A.	BofA Government Reserves Trust Class	–	4,815,195	4,815,195	4,815,195	–
*	Bank of America, N.A.	Bank of America Temporary Overnight Deposit	1,094,093	–	1,094,093	1,094,093	–
*	Bank of America, N.A.	Bank of America Temporary Overnight Deposit	–	1,094,093	1,094,093	1,094,093	–

* A party-in-interest as defined by ERISA

There are no category (ii) or (iv) reportable transactions.

Columns for "Lease Rental" and "Expenses Incurred with Transactions" are not applicable.

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN **EIN:** 95-2802248
Plan Sponsor's Name AIRTECH INTERNATIONAL, INC **PN:** 002

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Merrill Lynch	Retirement Reserves	0	46,044
	Dreyfus	Dreyfus Bond Market Index Inv	0	74,327
	Columbia	Columbia Large Cap Enhanced Core Z	0	48,844
	American Funds	American Funds Growth Fund of Amer R4	0	47,175
	Victory	Victory Sycamore Established Value A	0	4,460
	Columbia	Columbia Acorn Z	0	8,287
	Goldman Sachs	Goldman Sachs Small Cap Value Instl	0	39,556

Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name AIRTECH INTERNATIONAL, INC PROFIT SHARING PLAN **EIN:** 95-2802248
Plan Sponsor's Name AIRTECH INTERNATIONAL, INC **PN:** 002

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	T. Rowe Price	T. Rowe Price Ret 2020 Adv	0	20,865
	T. Rowe Price	T. Rowe Price Ret 2030 Adv	0	38,288
	T. Rowe Price	T. Rowe Price Ret 2040 Adv	0	25,870
	American Funds	American Funds EuroPacific Gr R4	0	47,143
	POOLED	POOLED	0	36,483,218