

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2014</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
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 ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☒ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☐ Form 5558; ☐ automatic extension; ☒ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>GAUMER CO INC 401(K) PROFIT SHARING PLAN & TRUST</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/2002</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/2002</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/2002</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>GAUMER PROCESS</u> <u>13616 HEMPSTEAD RD</u> <u>HOUSTON, TX 77040-5816</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>74-1778481</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>713-460-5200</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>332610</u></td> </tr> <tr> <td style="height: 40px;"></td> </tr> </table>	2b Employer Identification Number (EIN) <u>74-1778481</u>	2c Plan Sponsor's telephone number <u>713-460-5200</u>	2d Business code (see instructions) <u>332610</u>	
2b Employer Identification Number (EIN) <u>74-1778481</u>					
2c Plan Sponsor's telephone number <u>713-460-5200</u>					
2d Business code (see instructions) <u>332610</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	11/24/2015	GAURAV DHINGRA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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	5 135
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) 130
a(2) Total number of active participants at the end of the plan year	6a(2) 139
b Retired or separated participants receiving benefits	6b 0
c Other retired or separated participants entitled to future benefits.....	6c 13
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 152
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e	6f 152
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 122
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 3
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 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) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		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 <u>GAUMER CO INC 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN) <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GAUMER PROCESS</u>	D Employer Identification Number (EIN) <u>74-1778481</u>

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
<u>MERRILL LYNCH, PIERCE, FENNER</u> <u>13-5674085</u> <u>WORLD FINANCIAL CENTER</u> <u>250 VESEY STREET</u> <u>NEW YORK, NY 10281</u>

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
<u>PAYCHEX SECURITIES CORPORATION</u> <u>16-1486352</u>

(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)

MERRILL LYNCH, PIERCE, FENNER

4 WORLD FINANCIAL CENTER
250 VESEY STREET
NEW YORK, NY 10281

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	BROKERAGE		Yes ☒ No ☐	Yes ☐ No ☒	25794	Yes ☐ No ☒

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

PAYCHEX, INC.

16-1124166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKEEPER	195	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
MERRILL LYNCH, PIERCE, FENNER	52 59 60 63	25794

(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.
MERRILL LYNCH, PIERCE, FENNER 4 WORLD FINANCIAL CENTER 250 VESEY STREET NEW YORK, NY 10281 13-5674085	

(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

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2014 This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>GAUMER CO INC 401(K) PROFIT SHARING PLAN & TRUST</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GAUMER PROCESS</u>		D Employer Identification Number (EIN) <u>74-1778481</u>

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	485743	588667
(2) U.S. Government securities	1c(2)	0	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	
(B) All other	1c(3)(B)	0	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	
(B) Common.....	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)	0	
(6) Real estate (other than employer real property).....	1c(6)	0	
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans.....	1c(8)	188431	211643
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities.....	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	4382236	4698171
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	
(2) Employer real property	1d(2)	0	
e Buildings and other property used in plan operation	1e	0	
f Total assets (add all amounts in lines 1a through 1e)	1f	5056410	5498481

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	5056410	5498481
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	174690	
(B) Participants	2a(1)(B)	356659	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		531349
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	9409	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		9409
(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)	276086	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		276086
(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)		0
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-56700
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		760144

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	314087	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)	102	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		314189
f Corrective distributions (see instructions).....	2f		3689
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)	195	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		195
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		318073

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		442071
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) ☐ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☐ Yes ☒ No

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

(1) Name: CALVETTI FERGUSON

(2) EIN: 13-4255527

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

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

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....

	Yes	No	Amount
4a		X	
4b		X	

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

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 <u>GAUMER CO INC 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GAUMER PROCESS</u>	D Employer Identification Number (EIN) <u>74-1778481</u>

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): <u>16-1470238</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a		
b Enter the amount contributed by the employer to the plan for this plan year.....	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?.....	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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): _____



**GAUMER CO INC 401(k) PROFIT SHARING PLAN AND TRUST
FINANCIAL STATEMENTS, SUPPLEMENTAL SCHEDULE
AND
INDEPENDENT AUDITORS' REPORT**

December 31, 2014

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To the Plan Administrator and Participants of the
Gaumer Co Inc 401(k) Profit Sharing Plan and Trust
Houston, Texas

1201 Louisiana, Ste 800
Houston, TX 77002
Office: 713.957.2300
Fax: 713.895.9393
www.calvettiferguson.com

INDEPENDENT AUDITORS' REPORT

Report on the Financial Statements

We have audited the accompanying financial statements of the Gaumer Co Inc 401(k) Profit Sharing Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits of 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

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 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 audit 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 entity'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 entity'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.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2014 and 2013, and the changes in net assets available for benefits for the year ended December 31, 2014, in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2014, is presented for the purpose of additional analysis and is 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 Disclosure 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.

A handwritten signature in black ink that reads "Calvetti Ferguson". The signature is written in a cursive, flowing style.

Houston, Texas
October 30, 2015

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2014 and 2013**

	2014	2013
ASSETS		
Investments, at fair value:		
Mutual Funds	\$ 4,698,171	\$ 4,382,236
Money Market	588,667	485,743
Total investments	5,286,838	4,867,979
Notes receivable from participants	211,643	188,431
TOTAL ASSETS	5,498,481	5,056,410
LIABILITIES		
Excess contributions payable	-	3,689
TOTAL LIABILITIES	-	3,689
NET ASSETS AVAILABLE FOR BENEFITS	\$ 5,498,481	\$ 5,052,721

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2014

Additions:

Investment income:

Net depreciation in fair value of investments	\$ (56,700)
Dividends	<u>276,086</u>
Total investment income	<u>219,386</u>

Interest income on notes receivable from participants 9,409

Contributions:

Employer	174,690
Participants	<u>356,659</u>
Total contributions	<u>531,349</u>
Total additions	<u>760,144</u>

Deductions:

Benefits paid to participants	314,189
Administrative expenses	<u>195</u>
Total deductions	<u>314,384</u>

Net increase 445,760

Net assets available for benefits:

Beginning of year	<u>5,052,721</u>
End of year	<u>\$ 5,498,481</u>

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 1 – PLAN DESCRIPTION

The Plan provides retirement savings benefits to eligible employees of Gaumer Company Inc. (“Company” or “Employer”). The following description of the Plan provides only general information. Participants should refer to the Plan Agreement or Summary Plan Description for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution 401(k) plan that provides retirement savings benefits to eligible employees of the Company through pre-tax voluntary contributions by employees and discretionary contributions by the Company. The Plan, which commenced effective January 1, 2002, is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (“IRC”). Merrill Lynch, Pierce, Fenner & Smith Incorporated (“Custodian”) serves as Plan custodian and Paychex Retirement Services (“Record-keeper”) serves as the record-keeper.

Eligibility – The Plan covers all employees except union employees, non-resident aliens and employees who become employees as a result of a Code Section 410(b)(6)(c) transaction. Covered employees who have attained the age of 21 and completed three months of service are eligible to participate in the Plan. Eligible employees may enter the Plan on the date the eligibility requirements are met.

Contributions – Participants may elect to contribute up to 96% of their annual eligible compensation, as defined by the Plan Document. Participants may contribute on a pre-tax and/or after-tax Roth basis up to the maximum dollar amount allowed by law, which was \$17,500 for 2014. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions of \$5,500 in accordance with IRC guidelines. The pre-tax amount deferred is not subject to federal taxation to the participants until distributions are made from the Plan. Participants may also contribute amounts representing rollover contributions from other qualified defined benefit or contribution plans.

The Company makes matching contributions of fifty percent of the participant’s contributions not to exceed 10% of the participant’s annual eligible compensation.

The Company may also make discretionary profit sharing contributions for employees who are employed as of the last day of the Plan year. No discretionary profit sharing contributions were made during the year ended December 31, 2014.

Participants’ Accounts – Each participant’s account is credited with the participant’s contributions and any Company contributions, as well as allocations of administrative expenses and Plan earnings. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Investment Options – Participants direct the investment of their contributions as well as the Company’s contribution into various investment options offered by the Plan. These investment options include mutual funds and a money market fund. Participants may transfer account balances among investment options.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 1 – PLAN DESCRIPTION

Vesting – Participant contributions and all earnings on those contributions vest immediately. Employer matching and discretionary profit sharing contributions to the Plan, plus any income or loss thereon, are vested as follows:

<u>Years Of Vesting</u>	<u>Percentage of Vested Interest</u>
Less than 1	0
1 but less than 2	20
2 but less than 3	40
3 but less than 4	60
4 but less than 5	80
5 or more	100

Notes Receivable from Participants – Participants may borrow up to a maximum equal to the lesser of \$50,000 less the highest outstanding balance of all loans in the previous 12 months or 50% of the present value of the participant's vested accrued benefit. The minimum loan amount is \$1,000. Loan terms range from 1 to 4 ½ years, except for loans used for the purchase of a principal residence, which may be repaid over 10 years. The maximum number of loans that a participant may have outstanding at any one time is one. The interest charged on loans is based on the prime rate plus 1%. Principal and interest are paid ratably through payroll deductions. Loans are secured by the balance in the participant's account and bear interest at 4.25%.

Payment of Benefits – On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, a partial withdrawal or installment payments. Vested account balances of less than \$5,000 are immediately distributable in a lump sum under the terms of the Plan without the participant's consent. Additionally, in-service withdrawals are permitted upon attainment of age 59 ½.

Forfeited Accounts – At December 31, 2014 and 2013, forfeited non-vested accounts totaled \$3,641 and \$13,287 respectively. These accounts will be used to reduce future employer contributions or be reallocated to participants. Forfeitures of \$13,287 were allocated among active participants based upon compensation.

Plan Termination – Although it has not expressed an intention 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% vested in their employer contributions.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting – The Plan's financial statements are prepared on the accrual basis of accounting in conformity with the accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates – The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of Plan additions and deductions during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of 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 includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document. No allowance for credit losses has been recorded as of December 31, 2014 or 2013.

Excess Contributions Payable – Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to contributions. The Plan distributed the 2013 excess contributions to the applicable participants prior to March 15, 2014.

Payment of Benefits – Benefit payments to participants are recorded when paid.

Risks and Uncertainties – The Plan invests in various investment securities. Such investments are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments, 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.

Administrative Expenses – The Company may pay, at its discretion, all reasonable costs, charges, and expenses incurred in the administration of the Plan. Additionally, the Company provides various other operational and administrative services to the Plan for which the costs are incurred directly by the Company. These expenses are not included in the Plan's financial statements.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES – continued

Any administrative expenses not paid by the Company are paid directly by the Plan and the participants. Certain expenses specifically incurred by, or attributable to, a participant will be paid from that participant's account. Plan expenses could include, but are not limited to, costs to process loans and plan distributions. Investment related expenses are included in net appreciation of fair value of investments.

Recent Accounting Pronouncements – Recent accounting pronouncements issued by the Financial Accounting Standards Board ("FASB") or other authoritative standards groups with future effective dates are either not applicable or are not expected to be significant to the Plan's financial statements.

Subsequent Events – The Plan has evaluated all events and transactions that occurred through October 30, 2015, the date these financial statements were available to be issued. Effective January 1, 2015, the Plan was amended and restated to comply with the latest rules and regulations.

NOTE 3 – INVESTMENTS

The following presents the fair value of investments that represent 5% or more of the Plan's net assets at December 31, 2014 and 2013:

	2014	2013
BlackRock Ready Assets Prime Money	\$ 588,667	\$ 485,743
Nationwide Inv Dest Aggressive A	541,881	651,444
Nationwide Inv Dest Mod A	1,111,284	1,069,340
BlackRock Global Allocation Inv A	403,136	283,721
Nationwide Inv Dest Mod Aggressive A	1,180,881	1,146,818
BlackRock S&P 500 Index Institutional	280,739	*

*Represents less than 5% of the Plan's net assets as of December 31.

NOTE 4 – 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB Accounting Standards Codification ("ASC") 820 are described as follows:

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS – continued

- **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; or 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 in the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Mutual Funds – Valued at the quoted market price which represents the net asset value (“NAV”) of shares held by the Plan at year end. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish the daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The NAV is a quoted price in an active market and classified in level 1 of the valuation hierarchy.

Money Market Fund – This investment is recorded at cost, which approximates fair value and is classified within level 1 of the valuation hierarchy.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014 and 2013:

December 31, 2014	Level 1	Level 2	Level 3	Total Fair Value
Mutual Funds:				
Bond	\$ 199,616	\$ -	\$ -	\$ 199,616
Small Cap	56,153			56,153
Mid Cap	170,669			170,669
Large Cap	4,271,733			4,271,733
Money Market	588,667			588,667
Total	<u>\$ 5,286,838</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 5,286,838</u>

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS – continued

December 31, 2013	Level 1	Level 2	Level 3	Total Fair Value
Mutual Funds:				
Bond	\$ 167,928	\$ -	\$ -	\$ 167,928
Small Cap	54,563	-	-	54,563
Mid Cap	145,839	-	-	145,839
Large Cap	4,013,906	-	-	4,013,906
Money Market	485,743	-	-	485,743
Total	<u>\$ 4,867,979</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 4,867,979</u>

NOTE 5 – RELATED-PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

Plan investments are managed by the Custodian, and, therefore, these transactions qualify as party-in-interest transactions as defined by ERISA. Any transaction involving these investments are on the open market at fair value as outlined in Note 4. Consequently, such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in-interest transactions under ERISA. During the year ended December 31, 2014, plan administrative expenses of \$195 were paid to the Record-keeper.

The Plan has notes receivable from participants at December 31, 2014 and 2013. As a result, these receivables and all transactions relating to these receivables qualify as party-in-interest transactions. These transactions are exempt from being prohibited transactions by ERISA.

NOTE 6 – TAX STATUS

The Plan operates under a non-standardized adoption agreement in connection with a prototype retirement plan and trust/custodial document sponsored by Paychex Inc. The Internal Revenue Service ("IRS") has determined and informed Paychex Inc. by letter dated April 10, 2014, that the prototype plan is designed in accordance with applicable sections of the IRC. The Plan has not filed individually with the IRS for a letter regarding the Plan's qualified tax status. However, the Plan Administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC; therefore, no provision for income taxes has been made in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain tax position that more-likely-than-not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by the tax jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations prior to 2011.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 6 – TAX STATUS – continued

In November 2015, the Plan Administrator filed with the DOL, a submission under the Delinquent Filer Voluntary Compliance Program to correct delinquent filer failures discovered with the annual Form 5500 reporting requirements for plan years 2013 through 2011. The Plan Administrator expects that the delinquent filings will not adversely affect the qualified status of the Plan.

NOTE 7 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2014 and 2013, to Form 5500:

	<u>2014</u>	<u>2013</u>
Net assets available for benefits per the financial statements	\$ 5,498,481	\$ 5,052,721
Excess contributions payable	<u>-</u>	<u>3,689</u>
Net assets available for benefits per the Form 5500	<u>\$ 5,498,481</u>	<u>\$ 5,056,410</u>

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements at December 31, 2014 to the Form 5500:

Net increase in net assets available for benefits per the financial statements	\$ 445,760
Less: Excess contributions payable, beginning of the year	<u>(3,689)</u>
Net income per the Form 5500	<u>\$ 442,071</u>

* * * * *

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2014

EIN: 74-1778481

Plan # 001

(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
BlackRock, Inc.	BlackRock Ready Assets Prime Money	(i)	\$ 588,667
MFS	MFS Total Return Bond R2	(i)	406
Nationwide	Nationwide Inv Dest Cnsv R	(i)	143,511
MFS	MFS International New Discovery R2	(i)	1,681
Dreyfus	Dreyfus Natural Resources A	(i)	2,757
BlackRock, Inc.	BlackRock Total Return Inv A	(i)	78,327
Nationwide	Nationwide Inv Dest Agrsv A	(i)	541,881
OppenheimerFunds	Oppenheimer Gold & Special Minerals A	(i)	53,847
BlackRock, Inc.	BlackRock Balanced Capital Inv A	(i)	62,191
Federated Investor, Inc.	Federated Kaufmann A	(i)	2,095
BlackRock, Inc.	BlackRck LifePath Active Retire Inv A	(i)	126
American Funds	American Funds Capital World Gr&Inc R3	(i)	38,093
OppenheimerFunds	Oppenheimer Limited-Term Government A	(i)	7,180
Invesco	Invesco Real Estate A	(i)	24,026
BlackRock, Inc.	BlackRock Equity Dividend Inv A	(i)	36,872
BlackRock, Inc.	BlackRock Small Cap Growth II Inv A	(i)	8,923
BlackRock, Inc.	BlackRock LifePath Active 2045 Inv A	(i)	240
BlackRock, Inc.	BlackRock LifePath Active 2035 Inv A	(i)	2,313
BlackRock, Inc.	BlackRock LifePath Active 2020 Inv A	(i)	127
BlackRock, Inc.	BlackRock 80/20 Target Allocation A	(i)	2,037
BlackRock, Inc.	BlackRock High Yield Bond Inv A	(i)	93,508
BlackRock, Inc.	BlackRock Global Small Cap Inv A	(i)	36
OppenheimerFunds	Oppenheimer Global Strategic Inc A	(i)	4,390
Nationwide	Nationwide Inv Dest Mod A	(i)	1,111,284
American Century Investments	American Century Income & Growth A	(i)	192
BlackRock, Inc.	BlackRock EuroFund Inv A	(i)	2,826
BlackRock, Inc.	BlackRock Large Cap Value Inv A	(i)	275
BlackRock, Inc.	BlackRock Global Allocation Inv A	(i)	403,136
Nationwide	Nationwide Inv Dest Cnsv A	(i)	10,259
OppenheimerFunds	Oppenheimer Capital Income A	(i)	126
Janus Capital Group	Janus Forty A	(i)	26,628
BlackRock, Inc.	BlackRock LifePath Active 2040 Inv A	(i)	368
BlackRock, Inc.	BlackRock LifePath Active 2030 Inv A	(i)	127
BlackRock, Inc.	BlackRock LifePath Active 2025 Inv A	(i)	46,051
BlackRock, Inc.	BlackRock LifePath Active 2050 Inv A	(i)	1,611
Nationwide	Nationwide Inv Dest Mod Cnsv A	(i)	45,305
PIMCO	PIMCO Real Reutrn A	(i)	7,499
PIMCO	PIMCO Foreign Bond	(i)	418
Delaware Investments	Delaware Small Cap Value A	(i)	47,194
Delaware Investments	Delaware Corporate Bond A	(i)	7,885
Janus Capital Group	Perkins Mid Cap Value A	(i)	51,808
BlackRock, Inc.	BlackRock Mid-Cap Growth Equity Inv A	(i)	11,948
Nationwide	Nationwide Inv Dest Mod Agrsv A	(i)	1,180,881
American Funds	American Funds American Balanced R3	(i)	44,993
BlackRock, Inc.	BlackRock Mid Cap Value Opps Inv A	(i)	25,266
BlackRock, Inc.	BlackRock Large Cap Growth Inv A	(i)	132,901
BlackRock, Inc.	BlackRock International Inv A	(i)	121,598

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2014

EIN: 74-1778481
Plan # 001

(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
	BlackRock, Inc.	BlackRock Health Sciences Opps Inv A	(i)	32,286
	BlackRock, Inc.	BlackRock S&P 500 Index Institutional	(i)	280,739
	* Participant Loans	Due biweekly, bearing interest at 4.25% and secured by the participant's vested account balance	-0-	211,643
				<u>\$ 5,498,481</u>

* A party in interest as defined by ERISA.

(i) Cost basis for participant-directed investments is not required.



**GAUMER CO INC 401(k) PROFIT SHARING PLAN AND TRUST
FINANCIAL STATEMENTS, SUPPLEMENTAL SCHEDULE
AND
INDEPENDENT AUDITORS' REPORT**

December 31, 2014

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To the Plan Administrator and Participants of the
Gaumer Co Inc 401(k) Profit Sharing Plan and Trust
Houston, Texas

1201 Louisiana, Ste 800
Houston, TX 77002
Office: 713.957.2300
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INDEPENDENT AUDITORS' REPORT

Report on the Financial Statements

We have audited the accompanying financial statements of the Gaumer Co Inc 401(k) Profit Sharing Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits of 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

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 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 audit 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 entity'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 entity'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.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2014 and 2013, and the changes in net assets available for benefits for the year ended December 31, 2014, in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2014, is presented for the purpose of additional analysis and is 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 Disclosure 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.

A handwritten signature in black ink that reads "Calvetti Ferguson". The signature is written in a cursive, flowing style.

Houston, Texas
October 30, 2015

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2014 and 2013**

	2014	2013
ASSETS		
Investments, at fair value:		
Mutual Funds	\$ 4,698,171	\$ 4,382,236
Money Market	588,667	485,743
Total investments	5,286,838	4,867,979
Notes receivable from participants	211,643	188,431
TOTAL ASSETS	5,498,481	5,056,410
LIABILITIES		
Excess contributions payable	-	3,689
TOTAL LIABILITIES	-	3,689
NET ASSETS AVAILABLE FOR BENEFITS	\$ 5,498,481	\$ 5,052,721

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2014

Additions:

Investment income:

Net depreciation in fair value of investments	\$ (56,700)
Dividends	276,086
Total investment income	219,386

Interest income on notes receivable from participants	9,409
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Contributions:

Employer	174,690
Participants	356,659
Total contributions	531,349
Total additions	760,144

Deductions:

Benefits paid to participants	314,189
Administrative expenses	195
Total deductions	314,384

Net increase	445,760
--------------	---------

Net assets available for benefits:

Beginning of year	5,052,721
End of year	<u><u>\$ 5,498,481</u></u>

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 1 – PLAN DESCRIPTION

The Plan provides retirement savings benefits to eligible employees of Gaumer Company Inc. (“Company” or “Employer”). The following description of the Plan provides only general information. Participants should refer to the Plan Agreement or Summary Plan Description for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution 401(k) plan that provides retirement savings benefits to eligible employees of the Company through pre-tax voluntary contributions by employees and discretionary contributions by the Company. The Plan, which commenced effective January 1, 2002, is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (“IRC”). Merrill Lynch, Pierce, Fenner & Smith Incorporated (“Custodian”) serves as Plan custodian and Paychex Retirement Services (“Record-keeper”) serves as the record-keeper.

Eligibility – The Plan covers all employees except union employees, non-resident aliens and employees who become employees as a result of a Code Section 410(b)(6)(c) transaction. Covered employees who have attained the age of 21 and completed three months of service are eligible to participate in the Plan. Eligible employees may enter the Plan on the date the eligibility requirements are met.

Contributions – Participants may elect to contribute up to 96% of their annual eligible compensation, as defined by the Plan Document. Participants may contribute on a pre-tax and/or after-tax Roth basis up to the maximum dollar amount allowed by law, which was \$17,500 for 2014. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions of \$5,500 in accordance with IRC guidelines. The pre-tax amount deferred is not subject to federal taxation to the participants until distributions are made from the Plan. Participants may also contribute amounts representing rollover contributions from other qualified defined benefit or contribution plans.

The Company makes matching contributions of fifty percent of the participant’s contributions not to exceed 10% of the participant’s annual eligible compensation.

The Company may also make discretionary profit sharing contributions for employees who are employed as of the last day of the Plan year. No discretionary profit sharing contributions were made during the year ended December 31, 2014.

Participants’ Accounts – Each participant’s account is credited with the participant’s contributions and any Company contributions, as well as allocations of administrative expenses and Plan earnings. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Investment Options – Participants direct the investment of their contributions as well as the Company’s contribution into various investment options offered by the Plan. These investment options include mutual funds and a money market fund. Participants may transfer account balances among investment options.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 1 – PLAN DESCRIPTION

Vesting – Participant contributions and all earnings on those contributions vest immediately. Employer matching and discretionary profit sharing contributions to the Plan, plus any income or loss thereon, are vested as follows:

<u>Years Of Vesting</u>	<u>Percentage of Vested Interest</u>
Less than 1	0
1 but less than 2	20
2 but less than 3	40
3 but less than 4	60
4 but less than 5	80
5 or more	100

Notes Receivable from Participants – Participants may borrow up to a maximum equal to the lesser of \$50,000 less the highest outstanding balance of all loans in the previous 12 months or 50% of the present value of the participant's vested accrued benefit. The minimum loan amount is \$1,000. Loan terms range from 1 to 4 ½ years, except for loans used for the purchase of a principal residence, which may be repaid over 10 years. The maximum number of loans that a participant may have outstanding at any one time is one. The interest charged on loans is based on the prime rate plus 1%. Principal and interest are paid ratably through payroll deductions. Loans are secured by the balance in the participant's account and bear interest at 4.25%.

Payment of Benefits – On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, a partial withdrawal or installment payments. Vested account balances of less than \$5,000 are immediately distributable in a lump sum under the terms of the Plan without the participant's consent. Additionally, in-service withdrawals are permitted upon attainment of age 59 ½.

Forfeited Accounts – At December 31, 2014 and 2013, forfeited non-vested accounts totaled \$3,641 and \$13,287 respectively. These accounts will be used to reduce future employer contributions or be reallocated to participants. Forfeitures of \$13,287 were allocated among active participants based upon compensation.

Plan Termination – Although it has not expressed an intention 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% vested in their employer contributions.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting – The Plan's financial statements are prepared on the accrual basis of accounting in conformity with the accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates – The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of Plan additions and deductions during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of 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 includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document. No allowance for credit losses has been recorded as of December 31, 2014 or 2013.

Excess Contributions Payable – Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as a liability with a corresponding reduction to contributions. The Plan distributed the 2013 excess contributions to the applicable participants prior to March 15, 2014.

Payment of Benefits – Benefit payments to participants are recorded when paid.

Risks and Uncertainties – The Plan invests in various investment securities. Such investments are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments, 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.

Administrative Expenses – The Company may pay, at its discretion, all reasonable costs, charges, and expenses incurred in the administration of the Plan. Additionally, the Company provides various other operational and administrative services to the Plan for which the costs are incurred directly by the Company. These expenses are not included in the Plan's financial statements.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES – continued

Any administrative expenses not paid by the Company are paid directly by the Plan and the participants. Certain expenses specifically incurred by, or attributable to, a participant will be paid from that participant's account. Plan expenses could include, but are not limited to, costs to process loans and plan distributions. Investment related expenses are included in net appreciation of fair value of investments.

Recent Accounting Pronouncements – Recent accounting pronouncements issued by the Financial Accounting Standards Board ("FASB") or other authoritative standards groups with future effective dates are either not applicable or are not expected to be significant to the Plan's financial statements.

Subsequent Events – The Plan has evaluated all events and transactions that occurred through October 30, 2015, the date these financial statements were available to be issued. Effective January 1, 2015, the Plan was amended and restated to comply with the latest rules and regulations.

NOTE 3 – INVESTMENTS

The following presents the fair value of investments that represent 5% or more of the Plan's net assets at December 31, 2014 and 2013:

	2014	2013
BlackRock Ready Assets Prime Money	\$ 588,667	\$ 485,743
Nationwide Inv Dest Aggressive A	541,881	651,444
Nationwide Inv Dest Mod A	1,111,284	1,069,340
BlackRock Global Allocation Inv A	403,136	283,721
Nationwide Inv Dest Mod Aggressive A	1,180,881	1,146,818
BlackRock S&P 500 Index Institutional	280,739	*

*Represents less than 5% of the Plan's net assets as of December 31.

NOTE 4 – 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) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB Accounting Standards Codification ("ASC") 820 are described as follows:

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

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS – continued

- **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; or 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 in the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Mutual Funds – Valued at the quoted market price which represents the net asset value (“NAV”) of shares held by the Plan at year end. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish the daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The NAV is a quoted price in an active market and classified in level 1 of the valuation hierarchy.

Money Market Fund – This investment is recorded at cost, which approximates fair value and is classified within level 1 of the valuation hierarchy.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2014 and 2013:

December 31, 2014	Level 1	Level 2	Level 3	Total Fair Value
Mutual Funds:				
Bond	\$ 199,616	\$ -	\$ -	\$ 199,616
Small Cap	56,153			56,153
Mid Cap	170,669			170,669
Large Cap	4,271,733			4,271,733
Money Market	588,667			588,667
Total	<u>\$ 5,286,838</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 5,286,838</u>

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 4 – FAIR VALUE MEASUREMENTS – continued

December 31, 2013	Level 1	Level 2	Level 3	Total Fair Value
Mutual Funds:				
Bond	\$ 167,928	\$ -	\$ -	\$ 167,928
Small Cap	54,563	-	-	54,563
Mid Cap	145,839	-	-	145,839
Large Cap	4,013,906	-	-	4,013,906
Money Market	485,743	-	-	485,743
Total	<u>\$ 4,867,979</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 4,867,979</u>

NOTE 5 – RELATED-PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

Plan investments are managed by the Custodian, and, therefore, these transactions qualify as party-in-interest transactions as defined by ERISA. Any transaction involving these investments are on the open market at fair value as outlined in Note 4. Consequently, such transactions are permitted under the provisions of the Plan and are exempt from the prohibition of party-in-interest transactions under ERISA. During the year ended December 31, 2014, plan administrative expenses of \$195 were paid to the Record-keeper.

The Plan has notes receivable from participants at December 31, 2014 and 2013. As a result, these receivables and all transactions relating to these receivables qualify as party-in-interest transactions. These transactions are exempt from being prohibited transactions by ERISA.

NOTE 6 – TAX STATUS

The Plan operates under a non-standardized adoption agreement in connection with a prototype retirement plan and trust/custodial document sponsored by Paychex Inc. The Internal Revenue Service ("IRS") has determined and informed Paychex Inc. by letter dated April 10, 2014, that the prototype plan is designed in accordance with applicable sections of the IRC. The Plan has not filed individually with the IRS for a letter regarding the Plan's qualified tax status. However, the Plan Administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC; therefore, no provision for income taxes has been made in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain tax position that more-likely-than-not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by the tax jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations prior to 2011.

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

NOTES TO THE FINANCIAL STATEMENTS

NOTE 6 – TAX STATUS – continued

In November 2015, the Plan Administrator filed with the DOL, a submission under the Delinquent Filer Voluntary Compliance Program to correct delinquent filer failures discovered with the annual Form 5500 reporting requirements for plan years 2013 through 2011. The Plan Administrator expects that the delinquent filings will not adversely affect the qualified status of the Plan.

NOTE 7 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2014 and 2013, to Form 5500:

	<u>2014</u>	<u>2013</u>
Net assets available for benefits per the financial statements	\$ 5,498,481	\$ 5,052,721
Excess contributions payable	<u>-</u>	<u>3,689</u>
Net assets available for benefits per the Form 5500	<u>\$ 5,498,481</u>	<u>\$ 5,056,410</u>

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements at December 31, 2014 to the Form 5500:

Net increase in net assets available for benefits per the financial statements	\$ 445,760
Less: Excess contributions payable, beginning of the year	<u>(3,689)</u>
Net income per the Form 5500	<u>\$ 442,071</u>

* * * * *

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2014

EIN: 74-1778481

Plan # 001

(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
	BlackRock, Inc.	BlackRock Ready Assets Prime Money	(i)	\$ 588,667
	MFS	MFS Total Return Bond R2	(i)	406
	Nationwide	Nationwide Inv Dest Cnsv R	(i)	143,511
	MFS	MFS International New Discovery R2	(i)	1,681
	Dreyfus	Dreyfus Natural Resources A	(i)	2,757
	BlackRock, Inc.	BlackRock Total Return Inv A	(i)	78,327
	Nationwide	Nationwide Inv Dest Agrsv A	(i)	541,881
	OppenheimerFunds	Oppenheimer Gold & Special Minerals A	(i)	53,847
	BlackRock, Inc.	BlackRock Balanced Capital Inv A	(i)	62,191
	Federated Investor, Inc.	Federated Kaufmann A	(i)	2,095
	BlackRock, Inc.	BlackRck LifePath Active Retire Inv A	(i)	126
	American Funds	American Funds Capital World Gr&Inc R3	(i)	38,093
	OppenheimerFunds	Oppenheimer Limited-Term Government A	(i)	7,180
	Invesco	Invesco Real Estate A	(i)	24,026
	BlackRock, Inc.	BlackRock Equity Dividend Inv A	(i)	36,872
	BlackRock, Inc.	BlackRock Small Cap Growth II Inv A	(i)	8,923
	BlackRock, Inc.	BlackRock LifePath Active 2045 Inv A	(i)	240
	BlackRock, Inc.	BlackRock LifePath Active 2035 Inv A	(i)	2,313
	BlackRock, Inc.	BlackRock LifePath Active 2020 Inv A	(i)	127
	BlackRock, Inc.	BlackRock 80/20 Target Allocation A	(i)	2,037
	BlackRock, Inc.	BlackRock High Yield Bond Inv A	(i)	93,508
	BlackRock, Inc.	BlackRock Global Small Cap Inv A	(i)	36
	OppenheimerFunds	Oppenheimer Global Strategic Inc A	(i)	4,390
	Nationwide	Nationwide Inv Dest Mod A	(i)	1,111,284
	American Century Investments	American Century Income & Growth A	(i)	192
	BlackRock, Inc.	BlackRock EuroFund Inv A	(i)	2,826
	BlackRock, Inc.	BlackRock Large Cap Value Inv A	(i)	275
	BlackRock, Inc.	BlackRock Global Allocation Inv A	(i)	403,136
	Nationwide	Nationwide Inv Dest Cnsv A	(i)	10,259
	OppenheimerFunds	Oppenheimer Capital Income A	(i)	126
	Janus Capital Group	Janus Forty A	(i)	26,628
	BlackRock, Inc.	BlackRock LifePath Active 2040 Inv A	(i)	368
	BlackRock, Inc.	BlackRock LifePath Active 2030 Inv A	(i)	127
	BlackRock, Inc.	BlackRock LifePath Active 2025 Inv A	(i)	46,051
	BlackRock, Inc.	BlackRock LifePath Active 2050 Inv A	(i)	1,611
	Nationwide	Nationwide Inv Dest Mod Cnsv A	(i)	45,305
	PIMCO	PIMCO Real Reutrn A	(i)	7,499
	PIMCO	PIMCO Foreign Bond	(i)	418
	Delaware Investments	Delaware Small Cap Value A	(i)	47,194
	Delaware Investments	Delaware Corporate Bond A	(i)	7,885
	Janus Capital Group	Perkins Mid Cap Value A	(i)	51,808
	BlackRock, Inc.	BlackRock Mid-Cap Growth Equity Inv A	(i)	11,948
	Nationwide	Nationwide Inv Dest Mod Agrsv A	(i)	1,180,881
	American Funds	American Funds American Balanced R3	(i)	44,993
	BlackRock, Inc.	BlackRock Mid Cap Value Opps Inv A	(i)	25,266
	BlackRock, Inc.	BlackRock Large Cap Growth Inv A	(i)	132,901
	BlackRock, Inc.	BlackRock International Inv A	(i)	121,598

GAUMER CO INC 401(K) PROFIT SHARING PLAN AND TRUST

FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2014

EIN: 74-1778481
Plan # 001

(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
	BlackRock, Inc.	BlackRock Health Sciences Opps Inv A	(i)	32,286
	BlackRock, Inc.	BlackRock S&P 500 Index Institutional	(i)	280,739
	* Participant Loans	Due biweekly, bearing interest at 4.25% and secured by the participant's vested account balance	-0-	211,643
				<u>\$ 5,498,481</u>

* A party in interest as defined by ERISA.

(i) Cost basis for participant-directed investments is not required.