

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 24pt; 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>07/01/2014</u> and ending <u>06/30/2015</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 INDIANA/KENTUCKY/OHIO REGIONAL COUNCIL OF CARPENTERS DEFINED CONTRIBUTION PENSION TRUST FUND	<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;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 07/01/1991</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 07/01/1991			
1b Three-digit plan number (PN) ▶	001						
1c Effective date of plan 07/01/1991							
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) INDIANA REGIONAL COUNCIL OF CARPENTERS & MILLWRIGHTS MULTI-EMP ANNUITY TRUST FUND 5420 WEST SOUTHERN AVENUE, STE 407 INDIANAPOLIS, IN 46241	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">2b Employer Identification Number (EIN) 35-1833932</td> <td style="width: 20%;"></td> </tr> <tr> <td>2c Plan Sponsor's telephone number 317-248-3273</td> <td></td> </tr> <tr> <td>2d Business code (see instructions) 333200</td> <td></td> </tr> </table>	2b Employer Identification Number (EIN) 35-1833932		2c Plan Sponsor's telephone number 317-248-3273		2d Business code (see instructions) 333200	
2b Employer Identification Number (EIN) 35-1833932							
2c Plan Sponsor's telephone number 317-248-3273							
2d Business code (see instructions) 333200							

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	02/11/2016	MARK MCGRUFF
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	02/11/2016	MARK MCGRUFF
	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) MICHELLE L. ZIMMERMAN L. M. HENDERSON & COMPANY, LLP 450 E 96TH ST STE 200 INDIANAPOLIS, IN 46240			Preparer's telephone number (optional) 317-566-1000

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 20523
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) 18970
a(2) Total number of active participants at the end of the plan year	6a(2) 19628
b Retired or separated participants receiving benefits	6b 35
c Other retired or separated participants entitled to future benefits.....	6c 1964
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 21627
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 28
f Total. Add lines 6d and 6e	6f 21655
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 21655
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7 792
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2C 2E 2F 2G	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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 07/01/2014 and ending 06/30/2015

A Name of plan INDIANA/KENTUCKY/OHIO REGIONAL COUNCIL OF CARPENTERS DEFINED CONTRIBUTION PENSION TRUST FUND	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 INDIANA REGIONAL COUNCIL OF CARPENTERS & MILLWRIGHTS MULTI-EMP	D Employer Identification Number (EIN) 35-1833932	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

BMO HARRIS BANK NA

36-2085229

(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?
51 28	NONE	552586	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

ZENITH AMERICAN SOLUTIONS, INC.

52-1590516

(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?
50 13	NONE	254401	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARQUETTE ASSOCIATES

36-3485298

(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?
51 27	NONE	95000	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)

L.M. HENDERSON & COMPANY, LLP

20-5520612

(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?
50 10	NONE	28565	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PAUL BERKOWITZ & ASSOCIATES

36-3780998

(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?
50 29	NONE	22643	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FILLENWARTH DENNERLINE GROTH & TOWE

35-1091323

(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?
50 29	NONE	14317	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)

S.C. MILLER & CO., INC.

35-1820020

(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?
50 10	NONE	9677	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2014 This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning 07/01/2014 and ending 06/30/2015

A Name of plan <u>INDIANA/KENTUCKY/OHIO REGIONAL COUNCIL OF CARPENTERS DEFINED CONTRIBUTION PENSION TRUST FUND</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>INDIANA REGIONAL COUNCIL OF CARPENTERS & MILLWRIGHTS MULTI-EMP</u>	D Employer Identification Number (EIN) <u>35-1833932</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO STABLE VALUE FUND CLASS

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

c EIN-PN <u>52-2250946-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>45080975</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500) <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
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For calendar plan year 2014 or fiscal plan year beginning <u>07/01/2014</u> and ending <u>06/30/2015</u>		
A Name of plan <u>INDIANA/KENTUCKY/OHIO REGIONAL COUNCIL OF CARPENTERS DEFINED CONTRIBUTION PENSION TRUST FUND</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INDIANA REGIONAL COUNCIL OF CARPENTERS & MILLWRIGHTS MULTI-EMP</u>	D Employer Identification Number (EIN) <u>35-1833932</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a	1902383	6356891
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions.....	1b(1)	6903568	7695699
	(2) Participant contributions.....	1b(2)		
	(3) Other.....	1b(3)	255506	24583
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	19629945	18740500
	(2) U.S. Government securities	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common.....	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property).....	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans.....	1c(8)		
	(9) Value of interest in common/collective trusts	1c(9)	46889564	44451669
	(10) Value of interest in pooled separate accounts	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(12) Value of interest in 103-12 investment entities.....	1c(12)		
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	394434928	418517054
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other.....	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	470015894	495786396

Liabilities

g Benefit claims payable	1g	181095	532356
h Operating payables	1h	59754	81807
i Acquisition indebtedness	1i		
j Other liabilities	1j		3722743
k Total liabilities (add all amounts in lines 1g through 1j)	1k	240849	4336906

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	469775045	491449490
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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)	39850308	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		39850308
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(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)	1804704	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1804704
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	149065670	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	149612191	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-546521
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	13106560	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		13106560

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		331
d Total income. Add all income amounts in column (b) and enter total	2d		54215382

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	31505459	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		31505459
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	75221	
(2) Contract administrator fees	2i(2)	258901	
(3) Investment advisory and management fees	2i(3)	647586	
(4) Other	2i(4)	53770	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1035478
j Total expenses. Add all expense amounts in column (b) and enter total	2j		32540937

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		21674445
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: L.M. HENDERSON & COMPANY, LLP

(2) EIN: 20-5520612

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

	Yes	No	Amount
4a		X	
4b		X	

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

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

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

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

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

Part V Trust Information (optional)

6a Name of trust

6b Trust's EIN

Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund

FINANCIAL STATEMENTS

Years Ended June 30, 2015 and June 30, 2014



L. M. HENDERSON & COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS / ADVISORS

Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund

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June 30, 2015 and June 30, 2014

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SUPPLEMENTARY INFORMATION	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) at June 30, 2015	16
Schedule H, Line 4j – Schedule of Reportable Transactions during the Year Ended June 30, 2015	17
NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.	



"Serving Our Clients Since 1948"

L. M. HENDERSON & COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS / ADVISORS

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Independent Auditor's Report

Board of Trustees
Indiana/Kentucky/Ohio Regional Council of Carpenters
Defined Contribution Pension Trust Fund

Report on the Financial Statements

We have audited the accompanying financial statements of Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund (an Indiana multiemployer benefit plan), which comprise the statements of net assets available for benefits as of June 30, 2015 and June 30, 2014, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on 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 of material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund as of June 30, 2015 and June 30, 2014, and the changes in its net assets available for benefits for the years then ended 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 supplementary schedules as listed in the accompanying index, referred to as "supplementary information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental 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 audit 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.



Certified Public Accountants
Indianapolis, Indiana

December 22, 2015

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Statements of Net Assets Available for Benefits

at June 30, 2015 and June 30, 2014

	June 30, 2015	June 30, 2014
<u>ASSETS:</u>		
Investments at fair value - Note 3:		
Cash equivalents	\$ 18,740,500	\$ 19,629,945
Mutual funds	418,517,054	394,434,928
Common collective trust fund	45,080,975	46,972,355
Total investments	<u>482,338,529</u>	<u>461,037,228</u>
Receivables:		
Contributions receivable - Note 1	7,695,699	6,903,568
Interest receivable	155	58,478
Cash receivable - pending trades and overpayments	-	164,055
Total receivables	<u>7,695,854</u>	<u>7,126,101</u>
Other assets:		
Cash accounts	6,356,891	1,902,383
Prepaid expenses	24,428	32,973
Total other assets	<u>6,381,319</u>	<u>1,935,356</u>
Total assets	<u>\$ 496,415,702</u>	<u>\$ 470,098,685</u>

See Notes to Financial Statements.

	June 30, 2015	June 30, 2014
<u>LIABILITIES:</u>		
Accounts payable	\$ 81,807	\$ 59,754
Other payables:		
Reciprocities payable	140,301	90,278
Benefits payable	392,055	90,817
Pending trade purchases	3,722,743	-
Total other payables	4,255,099	181,095
Total liabilities	4,336,906	240,849
 <u>NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE</u>	 492,078,796	 469,857,836
Adjustment from fair value to contract value for interest in common collective trust fund relating to fully benefit-responsive investment contracts - Note 6	(629,306)	(82,791)
<u>NET ASSETS AVAILABLE FOR BENEFITS</u>	<u>\$ 491,449,490</u>	<u>\$ 469,775,045</u>

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Statements of Changes in Net Assets Available for Benefits

Years Ended June 30, 2015 and June 30, 2014

	Year Ended	
	June 30, 2015	June 30, 2014
<u>ADDITIONS:</u>		
Investment income:		
Net unrealized depreciation in fair value of investments - Note 3	\$ (1,059,977)	\$ (15,268,992)
Realized gain on sale of investments and capital gain distributions - Note 3	13,620,016	67,902,014
	12,560,039	52,633,022
Interest and dividends	1,804,704	5,364,189
	14,364,743	57,997,211
Less: Investment expense	647,586	585,153
Net investment income	13,717,157	57,412,058
Employer contributions - Note 2	39,850,308	38,296,025
Litigation settlement	331	2,287
Total additions	53,567,796	95,710,370
<u>DEDUCTIONS:</u>		
Benefits paid to participants	31,505,459	21,565,943
Administrative expenses:		
Administrative fees	258,901	249,782
Financial audit, tax preparation, and payroll audit fees	38,242	108,002
Insurance	34,009	34,605
IRS filing fees	2,875	-
Legal fees	36,979	51,468
Miscellaneous	4,849	1,785
Printing, postage, telephone, shredding, and storage	9,797	7,344
Trustee expenses	2,240	2,295
Total administrative expenses	387,892	455,281
Total deductions	31,893,351	22,021,224
<u>NET INCREASE</u>	21,674,445	73,689,146
<u>NET ASSETS AVAILABLE FOR BENEFITS:</u>		
Balance, beginning of year	469,775,045	396,085,899
Balance, end of year	\$ 491,449,490	\$ 469,775,045

See Notes to Financial Statements.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Significant accounting policies followed by Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund (Fund) are listed below:

(a) **Basis of Accounting**

The financial statements are presented using the accrual basis of accounting.

(b) **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 5 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.

In accordance with the policy of stating investments at fair value, net unrealized appreciation for the year is reflected in the Statements of Changes in Net Assets Available for Benefits.

Fully benefit-responsive investment contracts included in the underlying investments of the common collective trust funds are to be presented at fair value. The difference between fair value of these investments and their contract values are presented in a separate adjustment in the Statements of Net Assets Available for Benefits because contract value remains the relevant measurement attribute for that portion of net assets available for benefits attributable to fully benefit-responsive investment contracts. See note 6 for more information on the common collective trust funds.

(c) **Contributions Receivable**

Contributions from employers are accrued based upon either hours worked or hours paid during the year by covered employees, depending on the applicable collective bargaining agreement. Contributions receivable represents the total of employer contributions received by the depository after June 30, 2015 and June 30, 2014, which were applicable to the plan period. This amount does not reflect amounts due from employers who are contractually liable to the Fund but have failed to make contributions, or from employers who have filed inaccurate reports, if any. At June 30, 2015, \$3,841,466 and \$3,854,233 was due from employer contributions and the third party administrator, respectively. At June 30, 2014, \$3,678,027 and \$3,225,541 was due from employer contributions and the third party administrator, respectively.

(d) **Use of Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Trustees to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

(e) **Administrative Expenses**

Substantially all of the administrative expenses of the Fund are paid by the Fund.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

(f) **Reclassification**

Certain reclassifications were made to the 2014 financial statements in order to conform to the 2015 financial statement presentation.

(g) **Subsequent Events**

Management has evaluated subsequent events through December 22, 2015 the date that the financial statements were available to be issued.

Note 2: DESCRIPTION OF THE PLAN

(a) **General**

The Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund is a multiemployer plan established pursuant to certain collective bargaining agreements between the Indiana/Kentucky/Ohio Regional Council of Carpenters and its affiliated Local Unions and the Indiana Construction Association and the employers signatory to the agreements with the Union. The joint-management operated Pension Trust Plan was created for the purpose of receiving and using employer contributions to pay retirement and termination benefits to participants. Its affairs are administered by a Board of Trustees comprised of representatives from both the Union and the employers (generally commercial construction contractors).

(b) **Profit Sharing**

Effective October 1, 2009, the Plan became a profit sharing plan under the Internal Revenue Code Section 401(a).

(c) **Funding Policy**

The Fund is funded through contributions required by the collective bargaining agreement. The participating employers contribute monthly to the Fund. Contributions are calculated based on hours worked and/or hours paid by participant and rates established by the various collective bargaining agreements.

(d) **Vesting**

Participants are fully vested in employer contributions and the earnings upon receipt of contributions received on their behalf. Participants are entitled to receive those contributions and earnings in the event of termination of employment, if there have been no Employer Contributions made for the participant for two plan years, there is less than \$5,000 in the participant's account, and the participant applies to receive the contributions and earnings. There are no mandatory cash out requirements. There is no account balance limitation on lump sum distributions for married participants who have spousal consent. Upon a participant's death, 100% of the participant's account balance will be paid to beneficiaries. Contributions left in the Fund will continue to be invested at the participant's direction and will be used to provide retirement, disability or death benefits.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 2: DESCRIPTION OF THE PLAN (continued)

(e) **Participant Accounts**

Individual accounts are maintained for each of the Fund's participants. The participant account includes two sub-accounts for record-keeping purposes: one account holds the assets which may have been accrued when the plan was a money purchase or annuity plan and one account holds all assets accrued after the plan became a profit-sharing plan. Both accounts continue to accrue earnings until the benefit is paid. Contributions, withdrawals, and net investment gains or losses and administrative expenses are accounted for separately. Participant accounts are intermingled with other accounts for investment purposes.

The proceeds of participants' profit sharing account may be available for distribution in the event of demonstrated hardship. The Fund has adopted a safe harbor definition of hardship under the Internal Revenue Code (the Code), which allows for a distribution only if the hardship qualifies under the safe harbor provisions.

(f) **Investment Options**

Upon enrollment in the Plan, a participant may direct employer contributions in accordance with procedures established by the Fund administrator. Participants may then invest any portion of their account in specific assets or funds as permitted by the investment procedures.

(g) **Plan Termination**

The participating groups anticipate and believe that the Plan will continue without interruption but reserve the right to discontinue the Plan. Should the Plan terminate at some future time, its net assets would be available to pay participants the balance in their accounts.

Note 3: INVESTMENTS

All investments are held in a single Trust account. All investments are available for current as well as future obligations. The following represents the fair value of investments at June 30, 2015 and June 30, 2014.

	June 30, 2015	June 30, 2014
	<u>Fair Value</u>	<u>Fair Value</u>
Cash equivalents	\$ 18,740,500	\$ 19,629,945
Mutual funds:		
Equity	384,800,570	359,589,797
Fixed income	<u>33,716,484</u>	<u>34,845,131</u>
	<u>418,517,054</u>	<u>394,434,928</u>
Common collective trust fund:		
Fixed income	<u>45,080,975</u>	<u>46,972,355</u>
Totals	<u>\$ 482,338,529</u>	<u>\$ 461,037,228</u>

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 3: INVESTMENTS (continued)

The Fund's investments, including investments bought, sold, and held during the years 2015 and 2014, appreciated (depreciated) in fair value as follows:

	June 30, 2015	June 30, 2014
<u>Investments at fair value as determined by quoted market prices:</u>		
Mutual funds:		
Equity	\$ 13,620,167	\$ 51,196,450
Fixed income	<u>(830,920)</u>	<u>909,942</u>
	12,789,247	52,106,392
<u>Investments at estimated fair value:</u>		
Common collective trust fund:		
Fixed income	<u>(229,208)</u>	<u>526,630</u>
Totals	<u>\$ 12,560,039</u>	<u>\$ 52,633,022</u>

Unrealized and realized gains and losses are computed differently for Employee Retirement Income Security Act of 1974 (ERISA) purposes than in the financial statements. Gains and losses for ERISA purposes are to be determined on the "revalued cost" which is the market value of assets at the beginning of the year or historical cost of assets purchased during the year. This differs from generally accepted accounting principles in that gains and losses are computed by comparing historical cost to market value. During the year ended June 30, 2015, unrealized losses and realized gains for book purposes were \$(1,059,977) and \$13,620,016, respectively. For ERISA purposes, unrealized gains and realized losses were \$13,106,560 and \$(546,521), respectively. During the year ended June 30, 2014, unrealized losses and realized gains for book purposes were \$(15,268,992) and \$67,902,014, respectively. For ERISA purposes, unrealized and realized gains were \$52,346,100 and \$286,922, respectively.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 3: INVESTMENTS (continued)

The fair value of individual investments that represent 5% or more of the Fund's net assets are as follows:

	June 30, 2015	June 30, 2014
Vanguard Target Retirement 2015 Fund	\$ 76,039,577	\$ 72,138,881
Vanguard Target Retirement 2025 Fund	24,860,783	24,102,920
Vanguard Target Retirement 2030 Fund	25,500,639	25,332,936
Vanguard Target Retirement 2035 Fund	32,281,496	29,779,256
Vanguard Target Retirement 2040 Fund	32,121,674	28,985,768
Vanguard Target Retirement 2045 Fund	27,761,488	25,043,127
Vanguard Target Retirement 2050 Fund**	24,840,832	-
Baird Aggregate Bond Fund**	33,716,484	-
Wells Fargo Stable Value Fund Class C**	45,080,975	-
Pimco Funds Total Return***	-	34,845,131
Fischer, Frances, Tree and Watts Income Plus Fund Class D (at contract value)***	-	46,889,563

* Denotes party-in-interest.

**5% or more at June 30, 2015, but not June 30, 2014.

***5% or more at June 30, 2014, but not June 30, 2015.

Note 4: CONCENTRATION OF CREDIT RISK

At certain times during the year, the Fund maintained cash deposits in excess of the Federal Deposit Insurance Corporation insured limits of \$250,000. In addition, the bank maintains accounts with stock brokerage firms which contain cash and securities. Balances are protected up to \$500,000 (with a limit of \$250,000 for cash) by the Securities Investor Protection Corporation (SIPC). The SIPC limits apply to each participant of the Fund. This coverage does not protect against losses from the rise or fall in market value of investments.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 5: FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board Accounting Standards Codification (FASB ASC) 820-10 *Fair Value Measurements* establishes a framework for measuring fair value. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 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 Fund has the ability to access at the measurement date.

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 assets or liabilities;
- Inputs that are derived principally from or corroborated by observable market data by correlation of other means.

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

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

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

Following is a description of the valuation methodology used for assets measured at fair value. Transfers between levels of the fair value hierarchy are deemed to have occurred at the beginning of the reporting period. There have been no changes in the fair value methodology used at June 30, 2015 and June 30, 2014.

Mutual funds and cash equivalents: Valued at the closing price reported in the active market in which the individual security is traded, or valued at the net asset value of the shares held by the Fund at year-end.

Common collective trust fund: Valued at Accumulated Net Asset Value (NAV) of underlying investments of participant units held by the Fund as of the last trading day of the period, as reported by the managers of the Fund.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 5: FAIR VALUE MEASUREMENTS (continued)

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

The following table sets forth by level, within the fair value hierarchy, the Fund's assets at fair value as of June 30, 2015 and June 30, 2014:

<u>Assets at Fair Value as of June 30, 2015</u>				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total Fair Value</u>
Cash equivalents	\$ 18,740,500	\$ -	\$ -	\$ 18,740,500
Mutual funds:				
Equity small cap	22,567,829	-	-	22,567,829
Equity mid cap	16,877,252	-	-	16,877,252
Equity large cap	55,152,776	-	-	55,152,776
Equity retirement fund	290,202,713	-	-	290,202,713
Fixed income	-	33,716,484	-	33,716,484
Common collective trust fund				
Fixed income	-	45,080,975	-	45,080,975
	<u>\$ 403,541,070</u>	<u>\$ 78,797,459</u>	<u>\$ -</u>	<u>\$ 482,338,529</u>

<u>Assets at Fair Value as of June 30, 2014</u>				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total Fair Value</u>
Money market	\$ 19,629,945	\$ -	\$ -	\$ 19,629,945
Mutual funds:				
Equity small cap	24,607,305	-	-	24,607,305
Equity mid cap	16,785,080	-	-	16,785,080
Equity large cap	49,738,547	-	-	49,738,547
Equity retirement fund	268,458,865	-	-	268,458,865
Fixed income	34,845,131	-	-	34,845,131
Common collective trust fund				
Fixed income	-	46,972,355	-	46,972,355
	<u>\$ 414,064,873</u>	<u>\$ 46,972,355</u>	<u>\$ -</u>	<u>\$ 461,037,228</u>

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 5: FAIR VALUE MEASUREMENTS (continued)

Fair Value of Investments that Calculate Net Asset Value

The following table summarizes investments measured at fair value based on NAVs per share as of June 30, 2015 and June 30, 2014:

<u>June 30, 2015</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common collective trust fund	\$ 45,080,975	\$ -	See (a)	See (a)

<u>June 30, 2014</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common collective trust fund	\$ 46,972,355	\$ -	See (b)	See (b)

(a) *Common collective trust fund:* The net asset value of the Wells Fargo Stable Value Fund C share classes is calculated on a daily basis. Net investment income and realized and unrealized gains on investments are not distributed but rather reinvested and reflected in the net asset value of the Fund. Units can be issued and redeemed at the current net asset value. Redemptions occur at net asset value following the 12-month notice period.

(b) *Common collective trust fund:* The net asset value of the Income Plus Fund's share classes is determined on a daily basis. Units can be issued and redeemed on any business day at that day's unit value. All earnings, expenses, and gains and losses of the Income Plus Fund are reflected in the calculation of the daily unit value. Although it is intended to permit daily withdrawals, some of the assets of the Income Plus Fund, especially investment contracts, may require an adjustment in the value of the investment if a withdrawal is made. In any event, the withdrawal may be deferred over such period of time, not to exceed one year, as may be deemed necessary for fair and orderly management of the Income Plus Fund.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 6: COMMON COLLECTIVE TRUST FUND

During the year ended June 30, 2015, the Fund was invested in the Wells Fargo Stable Value Fund C (common collective trust fund), which has invested all of its assets in Wells Fargo Stable Return Fund G (Stable Return Fund). The Stable Return Fund seeks to provide investors with a moderate level of stable income without principal volatility. The Stable Return Fund primarily invests in investment contracts, including traditional guaranteed investment contracts (GICs) and security-backed contracts issued by insurance companies and other financial institutions. The Stable Return Fund also invests in Wells Fargo Short Term Investment Fund S, which invests in highly liquid assets, and uses the Short Term Investment Fund S investment for daily liquidity needs.

GICs are backed by the general account of the contract issuer. The Stable Return Fund deposits a lump sum with the issuer and receives a guaranteed interest rate for a specified period. Interest is accrued on either a simple or fully compounded basis, and is paid either periodically or at the end of the contract term. The issuer guarantees that all qualified participant withdrawals will be at contract value (principal plus accrued interest).

A security-backed contract is an investment contract (also known as a synthetic GIC or a separate account GIC) issued by an insurance company or other financial institutions, backed by a portfolio of bonds. The bond portfolio is either owned directly by the Stable Return Fund or owned by the contract issuer and segregated in a separate account for the benefit of the Stable Return Fund. The portfolio underlying the contract is maintained separately from the contract issuer's general assets, usually by a third party custodian. The interest crediting rate of a security-backed contract is based on the contract value, and the fair value, duration, and yield to maturity of the underlying portfolio. These contracts typically allow for realized and unrealized gains and losses on the underlying assets to be amortized, usually over the duration of the underlying investments, through adjustments to the future interest crediting rate, rather than reflected immediately in the net assets of the Fund. The issuer guarantees that all qualified participant withdrawals will be at contract value. In the case of a full liquidation event, the issuer is responsible for covering any amount by which the contract value exceeds fair value of the underlying portfolio.

The market value yield to investment and crediting interest rates were approximately 1.40% and 1.64% for the year ended June 30, 2015. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are adjusted on a quarterly basis.

GICs and security-backed contracts also generally provide for withdrawals associated with certain events which are not in the ordinary course of Fund operations. These withdrawals are paid with a market value adjustment applied to the withdrawal as defined in the investment contract. Each contract issuer specifies the events which may trigger a market value adjustment. At June 30, 2015, the Fund administrator does not believe that the occurrence of any such market value event, which would limit the Fund's ability to transact at contract value with participants, is probable.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 6: COMMON COLLECTIVE TRUST FUND (continued)

During the year ended June 30, 2014, the Fund was invested in the Fischer, Frances, Tree and Watts Income Plus Fund (Income Plus Fund) formerly the ABN AMRO Income Plus Fund, a sub-fund of The BNP Paribas Investment Partners Pooled Trust Fund, (common collective trust fund) formerly the ABN AMRO Pooled Trust Fund for Employee Benefit Plans. The Income Plus Fund sought to obtain competitive fixed income returns in different interest rate environments. The Income Plus Fund was developed to preserve principal, maximize income and provide a high degree of liquidity without sacrificing credit quality. The Income Plus Fund was invested and reinvested primarily in GICs, money market funds, money market instruments, repurchase agreements, private placements, bank investment contracts, and synthetic GICs. In a traditional GIC, the Income Plus Fund enters into a contract with an issuer (typically a bank or life insurance company), which provides for a stated rate of interest and a fixed maturity. In a synthetic GIC structure, the Income Plus Fund owns fixed-income investments and enters into a wrap contract from high-quality insurance companies, banks, or other financial service companies that serve to substantially offset the price fluctuations in the underlying investments caused by movements in interest rates. Each wrap contract obligates the wrap provider to maintain the "contract value" of the underlying investments. The contract value is generally equal to the principal amounts invested in the underlying investments, plus interest accrued at a crediting rate established under the contract, less any adjustments for withdrawals (as specified in the wrap agreement).

In general, if the contract value of the wrap agreement exceeds the market value of the underlying investments (including accrued interest), the wrap provider becomes obligated to pay that difference to the Income Plus Fund in the event that shareholder redemptions result in partial or total contract liquidation. In the event that there are partial shareholder redemptions that would otherwise cause the contract's crediting rate to fall below zero percent, the wrap provider is obligated to contribute to the Income Plus Fund, an amount necessary to maintain the contract's crediting rate to at least zero percent. The circumstances under which payments are made and the timing of payments between the Fund and the wrap provider may vary based on the terms of the wrap contract.

The market value yield to investment and crediting interest rates were approximately 0.96% and 0.97% for the year ended June 30, 2014. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are adjusted on a daily basis.

In certain circumstances, the amount withdrawn from the wrap contract would be payable at fair value rather than at contract value. These events include premature termination of the contract by the Fund, termination of the Fund, or a material adverse change to the provisions of the Plan. At June 30, 2014, the Fund administrator believed the occurrence of such events that would limit the Fund's ability to transact at contract value with the plan participants was not probable. During the year ended June 30, 2015, the Plan sold the Common Collective Fund.

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 7: PARTY-IN-INTEREST TRANSACTIONS

There were no loans or fixed income obligations in default or uncollectible, nor were there leases in default or classified as uncollectible. There were no non-exempt prohibited transactions with parties-in-interest for the years ended June 30, 2015 and June 30, 2014, respectively.

The following transactions with fiduciaries and service providers qualify as exempt party-in-interest transactions:

<u>Party-in-Interest</u>	<u>Amount Incurred</u>		<u>Purpose</u>
	<u>June 30, 2015</u>	<u>June 30, 2014</u>	
BMO Harris Bank	\$ 552,586	\$ 490,153	Custodian fees
Fillenwarth Dennerline Groth & Towe	14,317	5,940	Legal fees
GRM Information Services	1,073	1,138	Storage fees
L.M. Henderson & Company, LLP	28,565	96,250	Financial audit, tax preparation, and payroll audit fees
Marquette Associates	95,000	95,000	Investment advisory fees
Paul Berkowitz and Associates, LTD	22,643	45,408	Legal fees
S.C. Miller & Co., Inc.	9,677	11,752	Payroll audit fees
Sales, Tillman, Wallbaum, Catlett & Satterley	19	120	Legal fees
Zenith American Solutions, Inc.	254,401	249,782	Administrative fees
BeneSys	4,500	-	Administrative fees
Jewett Printing	1,684	1,560	Printing
Cintas Document Management	2,082	-	Shredding

Amounts due to party-in-interest are as follows:

<u>Party-in-Interest</u>	<u>June 30, 2015</u>	<u>June 30, 2014</u>
BMO Harris Bank	\$ 23,835	\$ 22,090
Fillenwarth Dennerline Groth & Towe	5,621	2,135
GRM Information Systems	527	539
L.M. Henderson & Company, LLP	2,400	6,000
Paul Berkowitz and Associates, LTD	957	2,988
S.C. Miller & Co., Inc.	2,506	1,275
Zenith American Solutions, Inc.	44,461	24,727
BeneSys	1,500	-

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

Notes to Financial Statements

June 30, 2015 and June 30, 2014

Note 8: TAX STATUS

The Internal Revenue Service has determined that the Fund constitutes a qualified trust under Sections 401(a)(4) and 410(b) of the Code and is, therefore, exempt from Federal income taxes under provisions of Section 501(c)(9). The Plan obtained its latest determination letter on September 10, 2015 in which the Internal Revenue Service stated that the Plan was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the determination letter. However, the Fund administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code.

Accounting principles generally accepted in the United States of America require Fund management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Fund administrator has analyzed the tax positions taken by the Fund, and has concluded that as of June 30, 2015 and June 30, 2014, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Fund is subject to routine audits by taxing jurisdictions. The Fund administrator believes it is no longer subject to tax examinations for fiscal years prior to June 30, 2012.

Note 9: RISKS AND UNCERTAINTIES

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

Note 10: SUBSEQUENT EVENT

Effective December 1, 2015, the Millwright Local Union #1090 Annuity Trust Fund (Kentucky Fund) was merged into the Fund. As of the effective date, all of the assets of the Kentucky Fund were transferred to the Fund.

Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund

SUPPLEMENTARY INFORMATION

Year Ended June 30, 2015

Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

EIN 35-1833932 PN 001

Schedule H line 4i - Schedule of Assets Held for Investment Purposes at June 30, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including interest rate, maturity date, par or quantity	Cost	Current Value
Cash Equivalents:				
	BMO Prime Money Market*		**	\$ 18,740,500
Mutual Funds:				
	FMI Large Cap Fund		**	21,996,967
	Goldman Sachs Strategic Growth Fund		**	22,440,198
	AMG Times Square Mid Cap Growth		**	16,877,252
	Baird Aggregate Bond Fund		**	33,716,484
	BMO Small Cap Growth Fund*		**	10,194,218
	Northern Small Cap Value Fund		**	12,373,611
	Vanguard Inst'l Index Fd Plus		**	10,715,611
	Vanguard Target Retirement 2010 Trust II		**	5,594,781
	Vanguard Target Retirement 2015 Trust II		**	76,039,577
	Vanguard Target Retirement 2020 Trust II		**	19,711,384
	Vanguard Target Retirement 2025 Trust II		**	24,860,783
	Vanguard Target Retirement 2030 Trust II		**	25,500,639
	Vanguard Target Retirement 2035 Trust II		**	32,281,496
	Vanguard Target Retirement 2040 Trust II		**	32,121,674
	Vanguard Target Retirement 2045 Trust II		**	27,761,488
	Vanguard Target Retirement 2050 Trust II		**	24,840,832
	Vanguard Target Retirement Income Trust II		**	21,490,059
	Total Mutual Funds			418,517,054
Common Collective Trust Fund				
	Wells Fargo Stable Value Fund		**	45,080,975
	Total assets held for investment purposes			\$ 482,338,529

* Denotes party-in-interest.

**Cost information is not required for participant directed investments.

Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund

EIN 35-1833932 PN 001

Schedule H line 4j - Schedule of Reportable Transactions During Year Ended June 30, 2015**

Identity of Party Involved	Description	Number of Transactions	Purchase Price	Selling Price	Cost of Asset	Current Value on Transaction Date	Net Gain (Loss)
Single Transactions							
Wells Fargo Stable Value Fund Class C		1 purchase*	\$ 45,854,759	\$ -	\$ 45,854,759	\$ 45,854,759	\$ -
Baird Aggregate Bond Fund Inst #72		1 purchase*	34,756,244	-	34,756,244	34,756,244	-
FFTW Income Plus Fund Class D		1 sale*		45,854,759	44,104,072	45,854,759	1,750,687
PIMCO Funds Total Return		1 sale*		34,768,953	35,449,825	34,768,953	(680,872)
Series of Transactions							
Wells Fargo Stable Value Fund Class C		11 purchases	46,608,967	-	46,608,967	46,608,967	-
		51 sales	-	1,742,238	1,739,337	1,742,238	2,901
Baird Aggregate Bond Fund Inst #72		11 purchases	35,341,845	-	35,341,845	35,341,845	-
		58 sales	-	1,089,176	1,091,547	1,089,176	(2,371)
FFTW Income Plus Fund Class D		20 purchases	1,203,161	-	1,203,161	1,203,161	-
		94 sales	-	48,278,579	46,437,214	48,278,579	1,841,365
PIMCO Funds Total Return		40 purchases	2,403,243	-	2,403,243	2,403,243	-
		99 sales	-	36,953,639	37,389,836	36,953,639	(436,197)

* Single transaction also included in series of transactions for securities of the same issue.

** A reportable transaction is any transaction during the plan year, with respect to any plan asset, involving an amount in excess of five percent (5%) of the current value of plan assets at the beginning of the plan year. This schedule includes securities transactions involving a single transaction within the plan year in excess of five percent (5%) of the current value of plan assets at the beginning of the plan year, and also includes securities transactions involving securities of the same issue during the plan year where the aggregate amount involved in the transactions exceeds five percent (5%) of the current value of plan assets at the beginning of the year.

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), 6047(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210 - 0110 1210 - 0089 <div style="text-align: center; font-size: 24pt; 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 07/01/2014 and ending 06/30/2015			
A This return/report is for:	☒ a multiemployer plan; ☐ a single-employer plan:	☐ a multiple-employer plan; or ☐ a DFE (specify) _____	
B This return/report is:	☐ the first return/report; ☐ an amended return/report;	☐ the final 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; special extension (enter description)	☐ automatic extension;	☐ the DFVC program;

Part II Basic Plan Information —enter all requested information			
1a Name of plan INDIANA/KENTUCKY/OHIO REGIONAL COUNCIL OF CARPENTERS DEFINED CONTRIBUTION PENSION TRUST FUND	1b Three-digit plan number (PN) ▶	001	
2a Plan sponsor's name and address; including room or suite number (employer, if for a single-employer plan) INDIANA REGIONAL COUNCIL OF CARPENTERS & MILLWRIGHTS MULTI-EMP ANNUITY TRUST FUND 5420 WEST SOUTHERN AVENUE, STE 407 INDIANAPOLIS IN 46241			
1c Effective date of plan 07/01/1991			
2b Employer Identification Number (EIN) 35-1833932			
2c Sponsor's telephone number 317-248-3273			
2d Business code (see instructions) 333200			

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		Date	Enter name of individual signing as plan administrator
SIGN HERE	Signature of plan administrator	2/10/16	MARK MCGRIFF
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) MICHELLE L. ZIMMERMAN L. M. HENDERSON & COMPANY, LLP 450 E 96TH ST STE 200 INDIANAPOLIS IN 46240			Preparer's telephone number (optional) 317-566-1000

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2014)

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: 20px; 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 20523
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) 18970
a(2) Total number of active participants at the end of the plan year	6a(2) 19628
b Retired or separated participants receiving benefits	6b 35
c Other retired or separated participants entitled to future benefits	6c 1964
d Subtotal. Add lines 6a(2), 6b, and 6c	6d 21627
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 28
f Total. Add lines 6d and 6e	6f 21655
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 21655
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7 792
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: <div style="display: flex; justify-content: space-between; width: 100%;"> 2C 2E 2F 2G </div>	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:	

9a Plan funding arrangement (check all that apply)	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	(1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor

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

a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information - Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)
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Indiana/Kentucky/Ohio Regional Council of Carpenters

Defined Contribution Pension Trust Fund

EIN 35-1833932 PN 001

Schedule H line 4i - Schedule of Assets Held for Investment Purposes at June 30, 2015

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including interest rate, maturity date, par or quantity	Cost	Current Value
Cash Equivalents:				
	BMO Prime Money Market*		**	\$ 18,740,500
Mutual Funds:				
	FMI Large Cap Fund		**	21,996,967
	Goldman Sachs Strategic Growth Fund		**	22,440,198
	AMG Times Square Mid Cap Growth		**	16,877,252
	Baird Aggregate Bond Fund		**	33,716,484
	BMO Small Cap Growth Fund*		**	10,194,218
	Northern Small Cap Value Fund		**	12,373,611
	Vanguard Inst'l Index Fd Plus		**	10,715,611
	Vanguard Target Retirement 2010 Trust II		**	5,594,781
	Vanguard Target Retirement 2015 Trust II		**	76,039,577
	Vanguard Target Retirement 2020 Trust II		**	19,711,384
	Vanguard Target Retirement 2025 Trust II		**	24,860,783
	Vanguard Target Retirement 2030 Trust II		**	25,500,639
	Vanguard Target Retirement 2035 Trust II		**	32,281,496
	Vanguard Target Retirement 2040 Trust II		**	32,121,674
	Vanguard Target Retirement 2045 Trust II		**	27,761,488
	Vanguard Target Retirement 2050 Trust II		**	24,840,832
	Vanguard Target Retirement Income Trust II		**	21,490,059
	Total Mutual Funds			418,517,054
Common Collective Trust Fund				
	Wells Fargo Stable Value Fund		**	45,080,975
	Total assets held for investment purposes			\$ 482,338,529

* Denotes party-in-interest.

**Cost information is not required for participant directed investments.

Indiana/Kentucky/Ohio Regional Council of Carpenters Defined Contribution Pension Trust Fund

EIN 35-1833932 PN 001

Schedule H line 4j - Schedule of Reportable Transactions During Year Ended June 30, 2015**

Identity of Party Involved	Description	Number of Transactions	Purchase Price	Selling Price	Cost of Asset	Current Value on Transaction Date	Net Gain (Loss)
Single Transactions							
Wells Fargo Stable Value Fund Class C		1 purchase*	\$ 45,854,759	\$ -	\$ 45,854,759	\$ 45,854,759	\$ -
Baird Aggregate Bond Fund Inst #72		1 purchase*	34,756,244	-	34,756,244	34,756,244	-
FFTW Income Plus Fund Class D		1 sale*		45,854,759	44,104,072	45,854,759	1,750,687
PIMCO Funds Total Return		1 sale*		34,768,953	35,449,825	34,768,953	(680,872)
Series of Transactions							
Wells Fargo Stable Value Fund Class C		11 purchases	46,608,967	-	46,608,967	46,608,967	-
		51 sales	-	1,742,238	1,739,337	1,742,238	2,901
Baird Aggregate Bond Fund Inst #72		11 purchases	35,341,845	-	35,341,845	35,341,845	-
		58 sales	-	1,089,176	1,091,547	1,089,176	(2,371)
FFTW Income Plus Fund Class D		20 purchases	1,203,161	-	1,203,161	1,203,161	-
		94 sales	-	48,278,579	46,437,214	48,278,579	1,841,365
PIMCO Funds Total Return		40 purchases	2,403,243	-	2,403,243	2,403,243	-
		99 sales	-	36,953,639	37,389,836	36,953,639	(436,197)

* Single transaction also included in series of transactions for securities of the same issue.

** A reportable transaction is any transaction during the plan year, with respect to any plan asset, involving an amount in excess of five percent (5%) of the current value of plan assets at the beginning of the plan year. This schedule includes securities transactions involving a single transaction within the plan year in excess of five percent (5%) of the current value of plan assets at the beginning of the plan year, and also includes securities transactions involving securities of the same issue during the plan year where the aggregate amount involved in the transactions exceeds five percent (5%) of the current value of plan assets at the beginning of the year.