

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>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 BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT EMPLOYEES	<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;">012</td> </tr> <tr> <td colspan="2">1c Effective date of plan 07/01/2000</td> </tr> </table>	1b Three-digit plan number (PN) ▶	012	1c Effective date of plan 07/01/2000	
1b Three-digit plan number (PN) ▶	012				
1c Effective date of plan 07/01/2000					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) BOSCH REXROTH PNEUMATICS CORPORATION 1953 MERCER ROAD LEXINGTON, KY 40511	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 46-1763108</td> </tr> <tr> <td>2c Plan Sponsor's telephone number 859-281-3424</td> </tr> <tr> <td>2d Business code (see instructions) 333200</td> </tr> </table>	2b Employer Identification Number (EIN) 46-1763108	2c Plan Sponsor's telephone number 859-281-3424	2d Business code (see instructions) 333200	
2b Employer Identification Number (EIN) 46-1763108					
2c Plan Sponsor's telephone number 859-281-3424					
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.	08/18/2016	JOHN HOLZAPFEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/18/2016	JOHN HOLZAPFEL
	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	5 129
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) 109
a(2) Total number of active participants at the end of the plan year	6a(2) 157
b Retired or separated participants receiving benefits	6b 0
c Other retired or separated participants entitled to future benefits.....	6c 20
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 177
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e	6f 177
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 88
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
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 3H	
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 01/01/2014 and ending 12/31/2014

A Name of plan <u>BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT EMPLOYEES</u>	B Three-digit plan number (PN) <u>012</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOSCH REXROTH PNEUMATICS CORPORATION</u>	D Employer Identification Number (EIN) <u>46-1763108</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>DODGE & COX</u>	<u>555 CALIFORNIA STREET</u> <u>40 FL</u> <u>SAN FRANCISCO, CA 94104</u>
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(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

<u>J.P. MORGAN MUTUAL FUNDS</u>	<u>522 5TH AVE.</u> <u>12TH FLOOR</u> <u>NEW YORK CITY, NY 10036</u>
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

<u>NORTHERN TRUST - COLLECTIVE</u>	<u>801 SOUTH CANAL STREET</u> <u>CHICAGO, IL 60607</u>
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

<u>STATE STREET - LAZARD CLASS C</u>	<u>30 ROCKEFELLER PLAZA</u> <u>NEW YORK, NY 10021</u>
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

a Name:	PRICEWATERHOUSECOOPERS LLP	b EIN:	13-4008324
c Position:	AUDITOR		
d Address:	448 LEWIS HARGETT CIRCLE SUITE 280 LEXINGTON, KY 40503-3506	e Telephone:	859-255-3366

Explanation: MANAGEMENT DECISION

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection.
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For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan <u>BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT EMPLOYEES</u>	B Three-digit plan number (PN) <u>012</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BOSCH REXROTH PNEUMATICS CORPORATION</u>	D Employer Identification Number (EIN) <u>46-1763108</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: <u>J.P. MORGAN STABLE VALUE FUND</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-0463057-001</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>597059</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>J.P. MORGAN SMARTRETIREMENT 2015 SR</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-1164981-001</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>138845</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>J.P. MORGAN SMARTRETIREMENT 2020 SR</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-1165037-001</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>550502</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>J.P. MORGAN SMARTRETIREMENT 2030 SR</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-1165198-001</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>207109</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>J.P. MORGAN SMARTRETIREMENT 2040 SR</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-1165392-001</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>130123</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>J.P. MORGAN SMARTRETIREMENT 2050 SR</u>		
b Name of sponsor of entity listed in (a): <u>JP MORGAN</u>		
c EIN-PN <u>26-1165477-001</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>3744</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LAZARD EMERGING MARKETS</u>		
b Name of sponsor of entity listed in (a): <u>LAZARD ASSET MANAGEMENT</u>		
c EIN-PN <u>04-3478313-001</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>47197</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: [NORTHERN TRUST COLLECTIVE BOND](#)**b** Name of sponsor of entity listed in (a): [NORTHERN TRUST](#)

c EIN-PN 45-6138589-200	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75912
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a Name of MTIA, CCT, PSA, or 103-12 IE: [NORTHERN TRUST COLLECTIVE EAFE](#)**b** Name of sponsor of entity listed in (a): [NORTHERN TRUST](#)

c EIN-PN 45-6138589-111	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 208040
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a Name of MTIA, CCT, PSA, or 103-12 IE: [NORTHERN TRUST COLLECTIVE RUSSELL](#)**b** Name of sponsor of entity listed in (a): [NORTHERN TRUST](#)

c EIN-PN 45-6138589-109	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 769254
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a Name of MTIA, CCT, PSA, or 103-12 IE: [NORTHERN TRUST S&P 500 INDEX FUND](#)**b** Name of sponsor of entity listed in (a): [NORTHERN TRUST](#)

c EIN-PN 45-6138589-002	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 268696
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a Name of MTIA, CCT, PSA, or 103-12 IE: [J.P. MORGAN SMARTRETIREMENT 2010 C](#)**b** Name of sponsor of entity listed in (a): [JP MORGAN](#)

c EIN-PN 20-3063261-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: [J.P. MORGAN SMARTRETIREMENT 2015 C](#)**b** Name of sponsor of entity listed in (a): [JP MORGAN](#)

c EIN-PN 20-3063321-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: [J.P. MORGAN SMARTRETIREMENT 2020 C](#)**b** Name of sponsor of entity listed in (a): [JP MORGAN](#)

c EIN-PN 20-3063359-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: [J.P. MORGAN SMARTRETIREMENT 2030 C](#)**b** Name of sponsor of entity listed in (a): [JP MORGAN](#)

c EIN-PN 20-3063387-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: [J.P. MORGAN SMARTRETIREMENT 2040 C](#)**b** Name of sponsor of entity listed in (a): [JP MORGAN](#)

c EIN-PN 20-3063440-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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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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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
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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
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>BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT EMPLOYEES</u>		B Three-digit plan number (PN) <u>012</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOSCH REXROTH PNEUMATICS CORPORATION</u>		D Employer Identification Number (EIN) <u>46-1763108</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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	408	515
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)	78340	91933
(9) Value of interest in common/collective trusts	1c(9)	2773242	2996482
(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)	491659	567513
(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	3343649	3656443

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	1737	1407
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1737	1407

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	3341912	3655036
---	-----------	---------	---------

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)	125413	
(B) Participants	2a(1)(B)	296687	
(C) Others (including rollovers)	2a(1)(C)	4335	
(2) Noncash contributions	2a(2)	515	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		426950
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)	3580	
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3580
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		178535
(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)		43015
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		652080

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	333767	
(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)		333767
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	5189	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		5189
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		338956

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		313124
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: BLUE & CO., LLC

(2) EIN: 35-1178661

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		15000000
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

<div>SCHEDULE R (Form 5500) <div>Department of the Treasury Internal Revenue Service</div><div>Department of Labor Employee Benefits Security Administration</div><div>Pension Benefit Guaranty Corporation</div></div>		<div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2014</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014					
A Name of plan BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT EMPLOYEES				B Three-digit plan number (PN) ▶ 012	
C Plan sponsor's name as shown on line 2a of Form 5500 BOSCH REXROTH PNEUMATICS CORPORATION				D Employer Identification Number (EIN) 46-1763108	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1 0	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 20-2020334					
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					
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.				Schedule R (Form 5500) 2014 v. 140124	

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): _____

**BOSCH REXROTH PNEUMATICS
CORPORATION 401(K) PLAN FOR BARGAINING
UNIT EMPLOYEES**

FINANCIAL STATEMENTS

AND

SUPPLEMENTAL SCHEDULE

DECEMBER 31, 2014 AND 2013

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

TABLE OF CONTENTS DECEMBER 31, 2014 AND 2013

	<u>Page</u>
Report of Independent Auditors	1
Financial Statements	
Statements of Net Assets for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Notes to the Financial Statements.....	5
Supplemental Schedule *	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	20
 * 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.	



Blue & Co., LLC / 250 West Main Street, Suite 2900 / Lexington, KY 40507
main 859.253.1100 fax 859.253.1384 email blue@blueandco.com

REPORT OF INDEPENDENT AUDITORS

To the Plan Administrator
Bosch Rexroth Pneumatics Corporation 401(k) Plan
for Bargaining Unit Employees

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Bosch Rexroth Pneumatics Corporation 401(k) Plan for Bargaining Unit Employees (the Plan), which comprise the statement of net assets available for benefits as of December 31, 2014, and the related statement of changes in net assets available for benefits for the year 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 conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the *Basis for Disclaimer of Opinion* paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Mercer Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2014 financial statements. Accordingly, we do not express an opinion on the 2014 financial statements referred to in the first paragraph.

Other Matter – Supplemental Schedule

The supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year), is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we do not express an opinion on the supplemental schedule referred to above.

Other Matter – 2013 Financial Statements

The financial statements of the Plan as of December 31, 2013, were audited by predecessor auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed the predecessor auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Mercer Trust Company, the trustee of the Plan. Their report, dated October 10, 2014, indicated that (a) because of the significance of the information that they did not audit, they were unable to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, they did not express an opinion on the financial statements and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the trustee, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Report on Form and Content in Compliance with DOL Rules and Regulations 2014

The form and content of the information included in the 2014 financial statements and the supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Blue & Co., LLC

Lexington, Kentucky
December 3, 2015

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2014 AND 2013

	2014	2013
Assets		
Investments at fair value	\$ 3,566,950	\$ 3,268,254
Notes receivable from participants	91,933	78,340
Other receivables	515	408
	<hr/>	<hr/>
Total assets	3,659,398	3,347,002
Liabilities		
Accrued expenses	1,407	1,737
	<hr/>	<hr/>
Net assets available for plan benefits, reflecting investments at fair value	3,657,991	3,345,265
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(2,955)	(3,353)
	<hr/>	<hr/>
Net assets available for benefits	<u><u>\$ 3,655,036</u></u>	<u><u>\$ 3,341,912</u></u>

See accompanying notes to the financial statements.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

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

Additions to net assets attributed to

Investment income:

Net appreciation in fair value of investments	\$ 176,408
Dividend and interest income	<u>45,142</u>
Total investment income	<u>221,550</u>

Interest income on notes receivable from participants	3,580
---	-------

Contributions:

Participant	296,687
Employer	125,413
Rollover	4,335
Other	<u>515</u>
Total contributions	<u>426,950</u>

Total additions	<u>652,080</u>
-----------------	----------------

Deductions from net assets attributed to

Benefits paid to participants	333,767
Administrative fees	<u>5,189</u>
Total deductions	<u>338,956</u>

Net change	313,124
------------	---------

Net assets available for plan benefits, beginning of year

3,341,912

Net assets available for plan benefits, end of year

\$ 3,655,036

See accompanying notes to the financial statements.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

1. DESCRIPTION OF PLAN

The following description of the Bosch Rexroth Pneumatics Corporation (the Company) 401(k) Plan for Bargaining Unit Employees (formerly known as the Bosch Rexroth Corporation Mecman Division, Lexington Facility 401(k) Plan for Bargaining Unit Employees) (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan is a defined contribution plan covering all bargaining unit employees of the Company who have attained age nineteen and completed six months of employment. The Plan's entry date for eligible employees is the first day of the first month upon meeting the eligibility requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

On June 1, 2013, the name of the Plan was changed to Bosch Rexroth Pneumatics Corporation 401(k) Plan for Bargaining Unit Employees.

Effective December 31, 2013, Bosch Rexroth Pneumatics Corporation was sold to Triton Managers IV Limited, and became known as AVENTICS Corporation.

Mercer Trust Company (Mercer) is the trustee of the Plan and, as such, has custody of all of the Plan's assets, executes transactions therein, receives contributions from the Company, and disburses funds according to the trust agreement.

Contributions:

The Plan is funded by both pre-tax salary deductions and employer contributions. Participants may elect to defer up to 17% of their compensation up to Internal Revenue Code annual limits. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined employee benefit plans. The employer makes a weekly contribution for all employees up to 50% of the first 7% of eligible compensation contributed by the participant.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

Participant Accounts:

Each participant's account is credited with the participant's elective pre-tax contributions, the Company's matching contributions, allocations of Plan earnings and fees which are directly attributable to a participant's transactions. Allocations of the Company's contributions are based upon participant earnings as defined in the Plan's provisions. Allocations of Plan earnings are based on the specific investment performance of each participant's investment account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options:

A participant may direct contributions in 1% increments in any of the investment options offered by the Plan which include mutual funds and collective trusts, as well as the Bosch Stable Value Fund, which holds a liquidity fund and several synthetic guaranteed investment contracts. Participants may change their investment options daily.

Vesting:

Participants are immediately 100% vested in their contributions plus actual earnings thereon. Vesting in the Company's matching contribution portion of their accounts plus actual earnings thereon is based on years of continuous service as outlined in the following table:

<u>Years of service</u>	<u>Percent of non-forfeitable interest</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years or more	100%

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

Notes Receivable from Participants:

Participants may borrow from their accounts up to the lesser of one-half (50%) of their vested account balance, or \$50,000 (subject to certain limitations as defined in the Plan document). The minimum loan is \$1,000. Participants may only have one outstanding loan at any time. Loan transactions are treated as a transfer to (from) the investment fund from (to) the Participant Loan Fund. Loan terms generally range from one to five years. The loans are secured by the balance in the participant's account and bear interest at 4.25%. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits:

Upon termination of service due to death, disability, retirement, or termination of employment, or attainment of age 59 ½, a participant or participant's beneficiary (in the event of a participant's death) may elect to receive the entire value of his or her account in a lump sum payment, annual or quarterly installments, or a rollover into an Individual Retirement Account (IRA) or the participant's new employer's qualified plan if it accepts rollovers. If a participant's entire account value is \$1,000 or less, it will be distributed without consent. If the account balance is greater than \$1,000 but less than \$5,000, a terminated participant's account balance will automatically be rolled into a qualified IRA.

In the event of financial hardship, the employer may allow a participant to withdraw from his or her account. The amount may not exceed the amount contributed by the participant, or the participant contribution account, if less. Employee deferral contributions to the Plan, and any other employer-sponsored matching contributions, are suspended for six months after a participant receives a hardship withdrawal.

Forfeitures:

Forfeited balances of terminated participants' nonvested accounts are used to reduce future Company contributions. At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$3,832 and \$3,786, respectively. Forfeitures of \$-0- and \$7,565 were used to reduce employer matching contributions for the years ended December 31, 2014 and 2013, respectively.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

This summary of significant accounting policies of the Plan is presented to assist in the understanding of the Plan's financial statements. The financial statements and notes are representations of the Plan's management who is responsible for their integrity and objectivity. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the accompanying financial statements.

Basis of Accounting:

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

Use of Estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's management 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. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition:

Investments are reported at fair value. Shares of mutual funds are valued at the daily closing price as reported by the fund. Units of collective trusts are valued at the net asset value of the units held by the Plan at year-end, based on information reported by the investment advisor using the financial statements of the collective trusts.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Plan invests in investment contracts within the Bosch Stable Value Fund option. The statement of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared using the contract value basis for fully benefit-responsive investment contracts.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on ex-dividend date. The Plan presents in the statements of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments which consists of the 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. No allowance for credit losses has been recorded as of December 31, 2014 and 2013. Delinquent participant loans are reclassified as distributions based on the terms of the Plan document.

Payment of Benefits:

Benefits are recorded when paid.

Administrative Expenses:

An annual recordkeeping fee of \$62.50 (\$15.63 per quarter) is charged to participants accounts by the recordkeeper. This amount is reflected in administrative expenses in the accompanying financial statements. Fees allocated to participants accounts for administrative services totaled \$5,189 for the year ended December 31, 2014. Other administrative expenses, including audit fees, are paid by the Company.

Subsequent Events:

The Plan has evaluated subsequent events through the date the financial statements were available to be issued, which is December 3, 2015.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

Other than the fair value of the guaranteed investment contract and the related adjustment from fair value to contract value for fully benefit-responsive investment contracts, certain information related to investments and notes receivable from participants disclosed in the accompanying statements of net assets available for benefits as of December 31, 2014 and 2013 and supplemental Schedule H, line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2014, and the related investment activity reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2014, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Mercer Trust Company, the trustee of the Plan, under the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The contract value of the guaranteed investment contract was certified by the trustee.

4. INVESTMENTS

The following presents investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	2014	2013
JP Morgan Intermediate Bond Fund	\$ 441,591	\$ 546,007
JP Morgan Liquidity Fund	*	215,920
Dodge & Cox Stock Fund	228,176	191,795
JP Morgan SmartRetirement 2020 Fund - Inst	550,503	*
JP Morgan SmartRetirement 2030 Fund - Inst	207,108	*
NT Collective EAFE Index Fund Non Lending	208,040	223,568
NT Collective Russell 1000 Growth Fund	769,254	642,235
JP Morgan Small Cap Equity Fund R5	311,768	299,864
JP Morgan SmartRetirement 2020 Fund C Class	*	410,323
NT S&P 500 Index Fund Non Lending	268,697	205,241

*Below 5% threshold

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

During the year ended December 31, 2014, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value as follows:

	2014
Mutual funds	\$ 6,429
Collective trusts	169,979
	<u>\$ 176,408</u>

5. 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 are described below:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

There were no transfers between hierarchy levels during 2014 and 2013. The Plan's policy is to recognize transfers, if any, between levels as of the actual date of the event or change in circumstances.

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 daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Collective Trusts: Valued at the net asset value (NAV) of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

Stable value fund: This consists of the JP Morgan Liquidity Fund and the JP Morgan Intermediate Bond Fund (Funds), which are common collective trusts sponsored by JP Morgan and are considered to be a stable value fund with the underlying investments in investment contracts that carry a “benefit responsiveness” feature. This guarantees that participant-initiated withdrawals from the fund will be covered at contract value. The Fund is valued at fair value and then adjusted by the issuers to contract value. Fair value equals the sum of the market value of all the Fund’s investments, and contract value is equal to the sum of all benefits owed to participants in that fund. This is classified as Level 2 of the valuation hierarchy as participants may ordinarily direct the withdrawal or transfer all of, or a portion of, their investment at contract value.

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

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

	2014			
	Fair Value	Level 1	Level 2	Level 3
Mutual funds				
Small cap funds	\$ 311,768	\$ 311,768	\$ -0-	\$ -0-
Bond funds	27,568	27,568	-0-	-0-
Large cap funds	228,176	228,176	-0-	-0-
Common collective trusts				
Target retirement funds	1,030,323	-0-	1,030,323	-0-
Bond funds	75,912	-0-	75,912	-0-
International funds	255,237	-0-	255,237	-0-
Large cap funds	1,037,951	-0-	1,037,951	-0-
Synthetic guaranteed investment contracts				
Collective trusts	600,015	-0-	600,015	-0-
Wrapper contracts	-0-	-0-	-0-	-0-
Total investments at fair value	<u>\$ 3,566,950</u>	<u>\$ 567,512</u>	<u>\$ 2,999,438</u>	<u>\$ -0-</u>

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

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

	2013			
	Fair Value	Level 1	Level 2	Level 3
Mutual funds				
Small cap funds	\$ 299,864	\$ 299,864	\$ -0-	\$ -0-
Large cap funds	191,795	191,795	-0-	-0-
Common collective trusts				
Target retirement funds	813,274	-0-	813,274	-0-
Bond funds	89,435	-0-	89,435	-0-
International funds	264,483	-0-	264,483	-0-
Large cap funds	847,476	-0-	847,476	-0-
Synthetic guaranteed investment contracts				
Collective trusts	761,927	-0-	761,927	-0-
Wrapper contracts	-0-	-0-	-0-	-0-
Total investments at fair value	<u>\$ 3,268,254</u>	<u>\$ 491,659</u>	<u>\$ 2,776,595</u>	<u>\$ -0-</u>

The following tables set forth a summary of changes in the fair value of the Plan's Level 3 investment assets for the year ended December 31, 2013.

	Wrapper Contracts
Balance at January 1, 2013	\$ 337
Unrealized gains/losses	(337)
Purchases	-0-
Sales	-0-
Issuances and settlements	-0-
Balance at December 31, 2013	<u>\$ -0-</u>

Gains and losses, realized and unrealized, included in the changes in net assets for the periods above are not reported in net appreciation (depreciation) in fair value of investments in the statement of changes in net assets available for benefits because those financial statements are reported at contract value as discussed in Note 2.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

The following tables represent the Plan's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments and the significant unobservable inputs and ranges of values for those inputs as of December 31, 2014 and 2013.

Quantitative Information about Significant Unobservable Inputs as of December 31, 2014				
Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Wrapper Contracts	\$0	Discounted Cash Flow	Actual Wrap Fees	0.22% - 0.25%
			Replacement Cost	0.22% - 0.25%
			Crediting Rate/Yield	2.59%
			Swap Rate	1.12%

Quantitative Information about Significant Unobservable Inputs as of December 31, 2013				
Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Range of Significant Input Values
Wrapper Contracts	\$0	Discounted Cash Flow	Actual Wrap Fees	0.22% - 0.25%
			Replacement Cost	0.22% - 0.25%
			Crediting Rate/Yield	2.10% - 2.13 %
			Swap Rate	0.81%

6. NET ASSET VALUE (NAV) PER SHARE:

The following table summarizes investments measured at fair value based on net asset value (NAVs) per share as December 31, 2014 and 2013, respectively.

December 31, 2014	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Collective trust fund -				
JP Morgan Liquidity Fund	\$ 158,424	None	Daily	None
JP Morgan Intermediate Bond Fund	441,591	None	Daily	None
Lazard Emerging Markets Fund	47,197	None	Daily	None
JP Morgan SmartRetirement 2015 Fund - Inst.	138,844	None	Daily	None
JP Morgan SmartRetirement 2020 Fund - Inst.	550,503	None	Daily	None
JP Morgan SmartRetirement 2030 Fund - Inst.	207,108	None	Daily	None
JP Morgan SmartRetirement 2040 Fund - Inst.	130,123	None	Daily	None
JP Morgan SmartRetirement 2050 Fund - Inst.	3,745	None	Daily	None
NT Collective Bond Index Fund Non Lending	75,912	None	Daily	None
NT Collective EAFE Index Fund Non Lending	208,040	None	Daily	None
NT Collective Russell 1000 Growth Fund	769,254	None	Daily	None
NT S&P 500 Index Fund Non Lending	268,697	None	Daily	None

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

December 31, 2013	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Collective trust fund -				
JP Morgan Liquidity Fund	\$ 215,920	None	Daily	None
JP Morgan Intermediate Bond Fund	546,007	None	Daily	None
Lazard Emerging Markets Fund	40,915	None	Daily	None
JP Morgan SmartRetirement 2010 Fund C Class	25,600	None	Daily	None
JP Morgan SmartRetirement 2015 Fund C Class	118,307	None	Daily	None
JP Morgan SmartRetirement 2020 Fund C Class	410,323	None	Daily	None
JP Morgan SmartRetirement 2030 Fund C Class	160,225	None	Daily	None
JP Morgan SmartRetirement 2040 Fund C Class	98,819	None	Daily	None
NT Collective Bond Index Fund Non Lending	89,435	None	Daily	None
NT Collective EAFE Index Fund Non Lending	223,568	None	Daily	None
NT Collective Russell 1000 Growth Fund	642,235	None	Daily	None
NT S&P 500 Index Fund Non Lending	205,241	None	Daily	None

7. STABLE VALUE FUND

The Plan holds synthetic guaranteed investment contracts (“GICs”) as part of the Bosch Stable Value Fund (the Fund). They synthetic GICs provide for a fixed return of principal over a specified time through fully benefit-responsive wrapper contracts issued by AIG Financial Products, Royal Bank of Canada, and State Street Bank. The assets underlying the synthetic GICs substantially consist of an intermediate bond collective trust fund.

The underlying fixed investments are owned by the Fund and held in trust for plan participants. Wrap contracts accrue interest using a formula called the “crediting rate.” The crediting rate formula smoothes the impact of interest rate changes by amortizing any difference between market value and book value over a period of years equal to the duration of the portfolio benchmark. Crediting rates are reset quarterly and the wrap contracts provide a guarantee that the crediting rate will not fall below 0%.

The resulting gains and losses in the market value of the underlying investments relative to the wrap contracts value are represented on the statements of net assets available for benefits as the “adjustment from fair value to contract value.” If the adjustment amount is positive, this indicates that the Fund contract value is greater than the market value of the underlying investments. The embedded market value losses will be amortized in the future through a lower interest crediting rate. If the adjustment amount is negative, this indicates that the Fund contract value is less than the market value of the underlying investments. The amortization of the embedded market value gains will cause the future interest crediting rate to be higher.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

The fair value of the synthetic GICs equals the total fair value of the underlying assets plus the fair value of wrapper contracts. The fair value of the Plan's interest in the Fund at December 31, 2014 and 2013 was \$600,015 and \$761,927, while the contract values were \$597,060 and \$758,574, respectively. The fair value of the Plan's interest assigned to the wrapper contracts at December 31, 2014 and 2013 was \$-0-. At December 31, 2014 and 2013, the crediting interest rate for the Fund contracts was 1.42% and 1.57%, respectively. At December 31, 2014 and 2013, the average yield of the Fund contracts based on actual earnings was 1.25% and 1.14%, respectively. The credit ratings for AIG Financial Products were A+ at both December 31, 2014 and 2013, and the credit ratings for Royal Bank of Canada and State Street Bank were AA- at both December 31, 2014 and 2013.

There are currently no reserves against contract values for credit risk of the contract issuers of any other risk.

In certain circumstances, the amount withdrawn from a wrapper contract would be payable at market value rather than at contract value. These circumstances include restructurings, early retirement plans, divestitures, bankruptcies, or any law, regulations or administrative ruling applicable to the plan that could have a material adverse effect on the portfolio's cash flow. The plan administrator believes the occurrence of any such event is remote.

The providers of the wrapper contracts can only terminate at a value different than contract value under an event of default (that was not remedied) such as failure to follow the terms of the contract.

8. TRANSACTIONS WITH PARTIES IN INTEREST

Notes receivable from participants qualify as exempt party-in-interest transactions. Mercer Trust Company is the trustee of the Plan and, therefore, transactions with Mercer Trust Company qualify as party-in-interest transactions. Certain operating expenses of the Plan are paid by the Plan sponsor. Blue & Co., LLC serves as the auditor for the Plan. Audit fees for the Plan's audit were paid by Plan sponsor.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

9. TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated September 17, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator and the Plan's ERISA counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain 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 and 2013, there are no uncertain 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 taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2011.

10. PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of termination of the Plan, participants will be entitled to 100% of the value of their accounts.

In the event of any merger or consolidation of the Plan with, or transfer of assets of the Plan to any other plan, each participant's account, immediately after such event, would equal the market value of the account prior to such event. As further discussed in Note 12, Plan assets were transferred to a new plan under the administration of AVENTICS Corporation in 2015.

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

NOTES TO THE FINANCIAL STATEMENTS DECEMBER 31, 2014 AND 2013

11. RISKS AND UNCERTAINTIES

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

12. SUBSEQUENT EVENTS

The Plan was terminated and all Plan assets were transferred from Mercer Trust Company to Ascensus Trust Company. These Plan changes were completed on January 31 and February 2, 2015, respectively. The Plan's assets were transferred to a new plan named AVENTICS 401(k) Plan for Bargaining Unit Employees. The new plan is under the administration of AVENTICS Corporation.

SUPPLEMENTAL SCHEDULE

BOSCH REXROTH PNEUMATICS CORPORATION 401(K) PLAN FOR BARGAINING UNIT EMPLOYEES

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

(a)	(b)	(c)	(d)	(e)
Identity of issuer, borrower, lessor, or similar party	Description of Investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value	
Bosch Stable Value Fund Guaranteed Investment Contracts:				
JP Morgan Liquidity Fund	Collective trust	**	\$ 158,424	
JP Morgan Intermediate Bond Fund	Collective trust	**	441,591	
AIG Financial Products	Open ended maturity wrapper contract	**	-	
Royal Bank of Canada	Open ended maturity wrapper contract	**	-	
State Street Bank	Open ended maturity wrapper contract	**	-	
Dodge & Cox Stock Fund	Mutual fund	**	228,176	
Lazard Emerging Markets Fund	Collective trust	**	47,197	
JP Morgan SmartRetirement Income Fund	Mutual fund	**	27,568	
JP Morgan SmartRetirement 2015 Fund - Inst.	Collective trust	**	138,844	
JP Morgan SmartRetirement 2020 Fund - Inst.	Collective trust	**	550,503	
JP Morgan SmartRetirement 2030 Fund - Inst.	Collective trust	**	207,108	
JP Morgan SmartRetirement 2040 Fund - Inst.	Collective trust	**	130,123	
JP Morgan SmartRetirement 2050 Fund - Inst.	Collective trust	**	3,745	
NT Collective Bond Index Fund Non Lending	Collective trust	**	75,912	
NT Collective EAFE Index Fund Non Lending	Collective trust	**	208,040	
NT Collective Russell 1000 Growth Fund	Collective trust	**	769,254	
NT S&P 500 Index Fund Non Lending	Collective trust	**	268,697	
JP Morgan Small Cap Equity Fund R5	Mutual fund	**	311,768	
* Loans to participants (1-5 years)	Interest rates are 4.25%	-0-	91,933	
			<u>\$3,658,883</u>	

*A party-in-interest as defined by ERISA.

** Cost omitted for participant directed investments

Employer Identification Number (EIN): 46-1763108

Plan number: 012

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration</small> <hr/> <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.	OMB No. 1210-0110 2014 This Form is Open to Public Inspection
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For calendar plan year 2014 or fiscal plan year beginning and ending		
A Name of plan	B Three-digit plan number (PN) ►	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(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)		
1e Buildings and other property used in plan operation.....	1e		
1f Total assets (add all amounts in lines 1a through 1e).....	1f		

Liabilities

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

Net Assets

1l Net assets (subtract line 1k from line 1f).....	1l		
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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)		
(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)		
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)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(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)		
(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)		

		(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		
d Total income. Add all income amounts in column (b) and enter total.....	2d		

Expenses

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

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		
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:

(2) EIN:

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			
4b			

		Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d			
e Was this plan covered by a fidelity bond?	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?	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?	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?	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.)	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.)	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?	4k			
l Has the plan failed to provide any benefit when due under the plan?	4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	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
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Attachment to 2014 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT 461763108
Plan Sponsor's Name BOSCH REXROTH PNEUMATICS CORPORATION **PN:** 012

(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
	Stable Value	Stable Value	0	597,059
	Lazard	Lazard Emerging Markets	0	47,197
	Nothern Trust	Nothern Trust Collective Bond	0	75,912
	Nothern Trust	Nothern Trust Collective EAFE	0	208,040
	Nothern Trust	Nothern Trust Collective Russell	0	769,254
	Nothern Trust	Nothern Trust S&P 500 Index Fund	0	268,696
	JP Morgans	JP Morgans Smart Retirement 2015 SR	0	138,845

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

Plan Name BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT 4611763108
Plan Sponsor's Name BOSCH REXROTH PNEUMATICS CORPORATION **PN:** 012

(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
	JP Morgans	JP Morgans Smart Retirement 2020 SR	0	550,502
	JP Morgans	JP Morgans Smart Retirement 2030 SR	0	207,109
	JP Morgans	JP Morgans Smart Retirement 2040 SR	0	130,123
	JP Morgans	JP Morgans Smart Retirement 2050 SR	0	3,744
	Emerging Markets	EMERG MKTS DOD STOCK	0	228,176
	JP Morgans	JPM SM CP EQ	0	311,768
	JP Morgans	JPM SMT INC	0	27,569

Plan Name	BOSCH REXROTH PNEUMATICS CORPORATION 401 K PLAN FOR BARGAINING UNIT 46N1763108
Plan Sponsor's Name	BOSCH REXROTH PNEUMATICS CORPORATION
PN:	012

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