

<div>Form 5500</div> <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>Annual Return/Report of Employee Benefit Plan</div> <div>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), and 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2009</div> <div>This Form is Open to Public Inspection</div>
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Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning 01/01/2007 and ending 12/31/2007	
A	This return/report is for: <div><div><input type="checkbox"/> a multiemployer plan;</div><div><input checked="" type="checkbox"/> a single-employer plan;</div><div><input type="checkbox"/> a multiple-employer plan; or</div><div><input type="checkbox"/> a DFE (specify) ____</div></div>
B	This return/report is: <div><div><input type="checkbox"/> the first return/report;</div><div><input checked="" type="checkbox"/> an amended return/report;</div><div><input type="checkbox"/> the final return/report;</div><div><input type="checkbox"/> a short plan year return/report (less than 12 months).</div></div>
C	If the plan is a collectively-bargained plan, check here. ▶ <input type="checkbox"/>
D	Check box if filing under: <div><div><input checked="" type="checkbox"/> Form 5558;</div><div><input type="checkbox"/> automatic extension;</div><div><input type="checkbox"/> the DFVC program;</div><div><input type="checkbox"/> special extension (enter description)</div></div>

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan INSPA RETIREMENT PLAN	1b Three-digit plan number (PN) ▶ 001
		1c Effective date of plan 01/01/2000
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) INSPA CORPORATION 4001 1ST AVE S SEATTLE, WA 98134	2b Employer Identification Number (EIN) 91-1942404 2c Sponsor's telephone number 206-624-5753 2d Business code (see instructions) 453990
	4001 1ST AVE S SEATTLE, WA 98134	

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	02/24/2010	COLLEEN STONE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") INSPA CORPORATION 4001 1ST AVE S SEATTLE, WA 98134	3b Administrator's EIN 91-1942404 3c Administrator's telephone number 206-624-5753
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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
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5 Total number of participants at the beginning of the plan year	5	342
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	192
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	153
d Subtotal. Add lines 6a , 6b , and 6c	6d	345
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	
f Total. Add lines 6d and 6e	6f	345
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	199
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	12

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	141
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 2F 2G 2J 2K 3E

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

9a Plan funding arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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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) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) <input type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input checked="" type="checkbox"/> <u>1</u> A (Insurance Information) (4) <input type="checkbox"/> C (Service Provider Information) (5) <input type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2007 and ending 12/31/2007		
A Name of plan INSPA RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 INSPA CORPORATION	D Employer Identification Number (EIN) 91-1942404	

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)	582	248
(2) Participant contributions	1b(2)	727	727
(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)	531252	743110
(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)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	532561	744085

Liabilities

g Benefit claims payable	1g	4717	
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		14173
k Total liabilities (add all amounts in lines 1g through 1j)	1k	4717	14173

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	527844	729912
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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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	20654	
(B) Participants	2a(1)(B)	157925	
(C) Others (including rollovers)	2a(1)(C)	2757	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		181336

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)		
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(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)		

		(a) Amount	(b) Total
2b (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)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		48138
(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		229474

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	12688	
(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)		12688
f Corrective distributions (see instructions)	2f		14173
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)	482	
(4) Other	2i(4)	63	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		545
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		27406

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		202068
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: PETERSON SULLIVAN, LLP

(2) EIN: 91-0605875

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 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....	X		4803
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.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		60000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

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

INSPA RETIREMENT PLAN

FINANCIAL REPORT

DECEMBER 31, 2007

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CERTIFIED PUBLIC ACCOUNTANTS

601 UNION STREET, SUITE 2300

SEATTLE, WASHINGTON 98101

INDEPENDENT AUDITORS' REPORT

To the Plan Trustees
InSpa Retirement Plan
Seattle, Washington

We have audited the accompanying statements of net assets available for benefits of the InSpa Retirement Plan ("the Plan") as of December 31, 2007 and 2006, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the InSpa Retirement Plan as of December 31, 2007 and 2006, and the changes in its net assets available for benefits for the years then ended, in conformity with accounting principles generally accepted in the United States.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The 2007 supplementary information included in Schedule H, Line 4a – Schedule of Delinquent Participant Contributions and Schedule H, Line 4i – Schedule of Assets (Held at End of Year), is presented for the purpose of additional analysis and is not a required part of the basic financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplementary schedules are the responsibility of the Plan's management. The supplementary schedules have been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

February 10, 2010

INSPA RETIREMENT PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2007 and 2006

ASSETS	2007	2006
Investments in Pooled Separate Accounts, at fair value	\$ 743,110	\$ 531,252
Contributions Receivable		
Employer's	248	582
Participants'	727	727
Total contributions receivable	975	1,309
Total assets	744,085	532,561
LIABILITIES		
Corrective Distributions Payable	14,173	4,717
NET ASSETS AVAILABLE FOR BENEFITS	\$ 729,912	\$ 527,844

See Notes to Financial Statements

INSPA RETIREMENT PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Years Ended December 31, 2007 and 2006

	<u>2007</u>	<u>2006</u>
Additions to Net Assets Attributed to:		
Investment income		
Net appreciation in fair value of pooled separate accounts	\$ 48,138	\$ 49,885
Interest on participant loans		77
Contributions		
Employer's	20,654	13,793
Participants'	157,925	96,716
Rollovers from other qualified plans	<u>2,757</u>	
Total additions	229,474	160,471
Deductions from Net Assets Attributed to:		
Benefits paid to participants	12,688	19,101
Corrective distributions	14,173	4,717
Administrative expenses	<u>545</u>	<u>546</u>
Total deductions	<u>27,406</u>	<u>24,364</u>
Net increase	202,068	136,107
Net Assets Available for Benefits:		
Beginning of year	<u>527,844</u>	<u>391,737</u>
End of year	<u><u>\$ 729,912</u></u>	<u><u>\$ 527,844</u></u>

See Notes to Financial Statements

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of Plan

The following description of the InSpa Retirement Plan ("the Plan") provides general information only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was established January 1, 2000. It is a defined contribution plan providing benefits to eligible employees of InSpa Corporation ("the Company"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

In general, participants may voluntarily elect to defer up to 100% of eligible annual compensation to the Plan, subject to the maximum applicable limits of the Internal Revenue Code ("IRC"). Participants may also contribute amounts representing distributions from other qualified plans. The Company may also make matching and other discretionary contributions subject to certain limitations. Matching contributions are based upon participants' eligible contributions and compensation, as defined by the Plan. Other discretionary contributions are based upon eligible compensation as defined by the Plan. In 2007 and 2006, the Company elected to make a matching contribution of 25% of the participant's first 6% of compensation being deferred. All contributions to the Plan are participant-directed.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contributions and (b) Plan earnings and losses, and charged with an allocation of administrative expenses. Allocations are based on participant contributions, participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested 100% in all contributions, both salary deferral and from the Company, plus actual earnings thereon. Thus, no forfeitures are expected to arise in the Plan.

Participant Loans

Under the terms of the Plan, participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the participants' accounts and bear interest at a reasonable rate determined by the Plan administrator. Loans generally must be repaid in five years and repayments are, in general, required to be made through payroll deductions. If the loan is for the purchase of a principal residence, the Plan may permit a longer repayment term. There were no loans outstanding at December 31, 2007 or 2006.

Payment of Benefits

If the participant's vested benefit in the Plan exceeds \$5,000, then on termination of service, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or, with the consent of the Plan administrator, in installments over a period of time no greater than ten years. If the participant's vested benefit in the Plan does not exceed \$5,000, then a single lump-sum distribution is required.

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 statements of net assets available for benefits.

Plan Changes

The Company reserves the right to amend or terminate the Plan at any time. However, no such amendment or termination shall deprive any participant of any vested interest in the Plan.

Note 2. Summary of Significant Accounting Policies

Basis of Accounting

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

Contributions

Contributions from participants are recorded in the period in which they are withheld from the participant's compensation. Matching contributions from the Company are recorded in the period in which the related participant contributions are recorded.

Investments

Investments are stated at fair value. Pooled separate accounts consist of a wide variety of underlying investments (primarily mutual funds). They are valued using the Net Asset Value ("NAV") provided by administrators of the pooled separate accounts. The NAV is based on the fair value of the underlying assets, less any liabilities, then divided by the number of shares outstanding. Purchases and sales of securities are recorded on a trade-date basis.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses primarily relate to Plan administration and custodianship of investments. The Company, at its option, pays the majority of expenses of the Plan.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results may differ from those estimates.

Note 3. Investments

The following investments in pooled separate accounts represent 5% or more of the Plan's net assets available for benefits at December 31:

	2007	2006
American Century International Growth Fund	\$ 193,427	\$ 151,810
Dreyfus S&P 500 Index Fund	168,759	136,760
RS Money Market Fund	131,041	52,288
Massachusetts Investors Growth Stock Fund	69,701	48,431
American Century Strategic Allocation:		
Moderate Investors Class Fund	49,454	40,400
RS Investment Quality Bond Fund	*	26,604

* Individual investment did not represent 5% or more of the Plan's net assets available for benefits in the applicable year.

Subsequent to year end, equity markets have declined significantly in the United States. Accordingly, the value of many investments included in these financial statements may have been reduced.

Note 4. Excess Contributions

Corrective distributions included in the statements of net assets available for benefits for 2007 and 2006 relate to excess contributions of \$14,173 and \$4,717, respectively, repaid subsequent to year-end to certain employees of the Company. The repayments were made to return to them excess contributions as required to satisfy the relevant nondiscrimination provisions of the Plan.

Note 5. Party-in-Interest Transactions

All Plan investments in pooled separate accounts were sponsored by Guardian Insurance and Annuity Company, Inc. ("Guardian"). Guardian is the custodian of Plan assets and, therefore, transactions with Guardian qualify as party-in-interest transactions.

Note 6. Income Tax Status

The Plan has adopted a standardized prototype sponsored by its third-party administrator. The prototype received a favorable determination letter from the Internal Revenue Service dated March 31, 2008. The prototype sponsored by the third-party administrator has been amended since this most recent determination letter. However, the third-party plan administrator believes the prototype plan is currently designed and being operated in compliance with the applicable requirements of the IRC. The Company has not received a determination letter as to the qualified status of the Plan's adoption agreement. However, the Plan administrator believes the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

Note 7. Subsequent Event

Effective January 1, 2009, the Plan was amended. The amendment primarily changed deferral limits and distribution provisions of the Plan that were effective in 2007 and 2006.

S U P P L E M E N T A R Y S C H E D U L E S

INSPA RETIREMENT PLAN

SCHEDULE H, LINE 4a – SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

December 31, 2007

EIN: 91-1942404

Plan Number: 001

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions
\$4,803	\$4,803

INSPA RETIREMENT PLAN

SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2007

EIN: 91-1942404

Plan Number: 001

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: American Century International Growth Fund	**	\$ 193,427
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Dreyfus S&P 500 Index Fund	**	168,759
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: RS Money Market Fund	**	131,041
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Massachusetts Investors Growth Stock Fund	**	69,701
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: American Century Strategic Allocation: Moderate Investors Class Fund	**	49,454
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: RS Investment Quality Bond Fund	**	35,757
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: American Century Strategic Allocation: Aggressive Investors Class Fund	**	28,740
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: SSgA Russell 2000 Index Fund	**	17,661
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: American Century Strategic Allocation: Conservative Investors Class Fund	**	16,449
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Dreyfus Premier International Value Fund	**	14,304
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: American Century Value Fund	**	6,852
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Fidelity Advisor Small Cap Fund	**	4,604
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Dreyfus Appreciation Fund	**	3,300
*	The Guardian Insurance & Annuity Company, Inc.	Pooled Separate Account: Fidelity Advisor High Income Advantage Fund	**	3,061
	** Information is not required as investments are participant directed.			