Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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). ▶ **Complete all entries in accordance with the instructions to the Form 5500.**	**2009** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
CUYAHOGA VENDING & DINING, 401(K) RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1994

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
CUYAHOGA VENDING AND DINING

14250 SOUTH INDUSTRIAL AVENUE
MAPLE HEIGHTS, OH 44137

2b Employer Identification Number (EIN) 34-1725372

2c Sponsor's telephone number 216-663-1457

2d Business code (see instructions) 722300

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.	07/22/2010	DAWN R KNOCH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/22/2010	DAWN R KNOCH
	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

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

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") CUYAHOGA VENDING AND DINING 14250 SOUTH INDUSTRIAL AVENUE MAPLE HEIGHTS, OH 44137	**3b** Administrator's EIN 34-1725372 **3c** Administrator's telephone number 216-663-1457

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:		**4b** EIN
a Sponsor's name		**4c** PN

5 Total number of participants at the beginning of the plan year	**5**	125
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**	141
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	0
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	141
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	141
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	135
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	15
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 Characteristic Codes in the instructions:
2E 2F 2G 2J 3D

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

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

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

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

SCHEDULE H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
CUYAHOGA VENDING & DINING, 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CUYAHOGA VENDING AND DINING

D Employer Identification Number (EIN)
34-1725372

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	16796	36022
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1525171	1874675
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1541967	1910697
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1541967	1910697

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)	28045	
(B) Participants	2a(1)(B)	149502	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		177547
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	967	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		967
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(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)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	329682	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		329682
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		38084
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		546280

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	177550	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		177550
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		177550

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		368730
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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) [X] 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 [X] No

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

(1) Name: DSG, LLC. **(2)** EIN: 34-1914107

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.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		350000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN

AUDITED FINANCIAL STATEMENTS

DECEMBER 31, 2009

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN

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DiPietro, Schiciano & Gottesman, LLC

Patrick A. DiPietro, CPA
S. Edward Schiciano, CPA
Michael J. Gottesman, CPA

Phone (330) 963-4700
Fax (330) 963-4750

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
the Cuyahoga Vending & Dining
401(k) Retirement Plan

We have audited the accompanying statements of net assets available for benefits of the Cuyahoga Vending & Dining, 401(k) Retirement Plan as of December 31, 2009 and December 31, 2008 and the related statements of changes in net assets available for benefits and the schedule of assets held for investments 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 audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit 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 audit provides 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 Cuyahoga Vending & Dining, 401(k) Retirement Plan as of December 31, 2009 and December 31, 2008, and the changes in its net assets available for benefits and the schedule of assets held for investments for the years then ended in conformity with accounting principles generally accepted in the United States of America.

As indicated in Note 3, the schedule of assets held for investment purposes that accompanies the Plan's financial statements does not disclose the historical cost of the Plan's investments. Disclosure of this information is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Cleveland, Ohio
June 1, 2010

Certified Public Accountants and Business Consulting Firm

2300 Edison Boulevard, Twinsburg, Ohio 44087

CUYAHOGA VENDING & DINING
401(K) RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2009	2008
ASSETS:		
Cash	$ 155,532	$ 101,628
Receivables		
Loan	36,022	16,796
Total Receivables	36,022	16,796
Investments		
2015 Target Fun	4,918	1,381
2020 Target Fund	24,919	1,175
2030 Target Fund	3,002	1,894
2035 Target Fund	956	342
2040 Target Fund	5,681	2,142
2045 Target Fun	2,065	462
2050 Target Fund	-	291
American Balanced Fund	396,350	398,018
Bond Fund of America	119,817	48,343
Capital Income Builder	258,532	260,433
Capital World Growth & Income	47,349	30,116
Europacific Growth	22,603	12,809
Federated Kaufmann	11,165	3,570
Fundamental Investors	113,496	97,992
Growth Fund of America	261,360	186,337
Income Fund of America	46,641	34,031
Investment Company of America	229,026	221,711
New Economy	69,754	48,748
New Perspective	58,427	42,268
Oppenheimer Strategic Income	43,082	31,480
Total Investments	1,719,143	1,423,543
TOTAL ASSETS	$1,910,697	$1,541,967
LIABILITIES:		
Benefits payable	$ -	$ -
TOTAL NET ASSETS AVAILABLE FOR BENEFITS	$1,910,697	$1,541,967

See notes to financial statements.

CUYAHOGA VENDING & DINING
401(K) RETIREMENT PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Years Ended December 31,	
	2009	2008
ADDITIONS:		
Contributions		
Employee	$ 149,502	$ 167,839
Employer	28,045	30,988
Total	177,547	198,827
Investment Income:		
Interest and dividends	38,084	57,840
Loan interest	967	879
Unrealized appreciation in value of investments	329,682	-
Total	368,733	58,719
Total additions	546,280	257,546
DEDUCTIONS:		
Benefits paid to participants	177,550	189,771
Unrealized depreciation in value of securities	-	744,110
Total deductions	177,550	933,881
INCREASE (DECREASE) IN NET ASSETS AVAILABLE FOR BENEFITS	368,730	(676,335)
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	1,541,967	2,218,302
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$1,910,697	$1,541,967

See notes to financial statements.

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

1. PLAN DESCRIPTION

The following summary description of Cuyahoga Vending & Dining is provided for general information only. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General - The Plan, which became effective January 1, 1994, is a defined contribution plan covering the employees of Cuyahoga Vending & Dining with one year or more of service.

The plan allows for semi-annual entry dates.

The participants may elect to defer from their salary. The Company may elect to match the elective deferrals. The annual contributions made by the participants are limited to a maximum amount pursuant to the applicable code section of the Internal Revenue Code.

The employer allows participants to apply for loans.

Participants' Accounts - Each participant's account is credited with the participant's contribution and an allocation of the Company's contribution, plan earnings and forfeitures.

Vesting - Participants are immediately vested in their 401(k) salary deferral contributions and earnings thereon. The participant's portion of the Company profit sharing and matching contribution adheres to a six-year graded vesting schedule.

Payment of Benefits - Upon normal or disability retirement, each participant receives the value of their individual account in a lump-sum distribution. In the event of death of a participant, the value of the participant's account is payable to the participant's beneficiary in a lump sum.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS (CONTINUED)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation - The accompanying financial statements have been prepared based on the accrual method of accounting, with investments carried at fair value.

Investments - Investments are stated at fair value as determined by the Trustee based on the current market value of the underlying assets of the fund.

3. INVESTMENTS

Capital Bank & Trust holds the Plan's investments. Financial information regarding the assets and related income, contributions and distributions of assets held by the investment company are included in the financial statements.

The fair values of individual investments that represent 5% or more of the Plan's net assets are separately identified.

	December 31, 2009
2015 Target Fund	$ 4,918
2020 Target Fund	24,919
2030 Target Fund	3,002
2035 Target Fund	956
2040 Target Fund	5,681
2045 Target Fund	2,065
American Balanced	396,350
Bond Fund of America	119,817
Capital Income Builder	258,532
Capital World Growth & Income	47,349
Europacific Growth	22,603
Federated Kaufmann	11,165
Fundamental Investors	113,496
Growth Fund of America	261,360
Income Fund of America	46,641
Investment Company of America	229,026
New Economy	69,754
New Perspective	58,427
Oppenheimer Strategic Income	43,082
	$1,719,143

4. PLAN TERMINATION

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

5. STATUS

The trust established under the Plan that holds the Plan's assets is qualified pursuant to the appropriate section of the Internal Revenue Code, and, accordingly, the trust's net investment income is exempt from income taxes. The Plan has adopted an Internal Revenue Service approved plan. The Plan has received a favorable opinion letter from the IRS and the Plan qualifies under IRS code section 401(a), provided all terms of the plan are followed.

6. RELATED PARTIES

The Company pays all administrative expenses of the Plan. Fees paid during the year to participant recordkeepers were based upon customary and reasonable fees for such services.

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN
FORM 5500, SCHEDULE H, PART IV (4i)
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
YEAR ENDED DECEMBER 31, 2009

Identity of issuer, Borrower, Lessor or Similar Party Description of Investment	Current Value
2015 Target Fund	$ 4,918
2020 Target Fund	24,919
2030 Target Fund	3,002
2035 Target Fund	956
2040 Target Fund	5,681
2045 Target Fund	2,065
American Balanced	396,350
Bond Fund of America	119,817
Capital Income Builder	258,532
Capital World Growth & Income	47,349
Europacific Growth	22,603
Federated Kaufmann	11,165
Fundamental Investors	113,496
Growth Fund of America	261,360
Income Fund of America	46,641
Investment Company of America	229,026
New Economy	69,754
New Perspective	58,427
Oppenheimer Strategic Income	43,082
	$1,719,143

CUYAHOGA VENDING & DINING
401(k) RETIREMENT PLAN
FORM 5500, SCHEDULE H, PART IV (4j)
SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2009

Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)

There were no reportable transactions for the year ending December 31, 2009.