

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), 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 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 single-employer plan; ☐ a multiple-employer plan; or ☐ 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 STEERE ENTERPRISES, INC. 401K RETIREMENT SAVINGS PLAN	1b Three-digit plan number (PN) ▶ 003
		1c Effective date of plan 01/01/1985
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) STEERE ENTERPRISES, INC. 285 COMMERCE STREET TALLMADGE, OH 44278	2b Employer Identification Number (EIN) 34-0751401 2c Sponsor's telephone number 330-633-4926 2d Business code (see instructions) 326100

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.	09/01/2010	RAYMOND KIEFER
	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") STEERE ENTERPRISES, INC. 285 COMMERCE STREET TALLMADGE, OH 44278	3b Administrator's EIN 34-0751401 3c Administrator's telephone number 330-633-4926
---	---

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	203
---	----------	-----

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	134
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	37
d Subtotal. Add lines 6a , 6b , and 6c	6d	171
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	1
f Total. Add lines 6d and 6e	6f	172
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	163
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	18

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 2K 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) (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) ☒ 2 **A** (Insurance Information)
 (4) ☐ **C** (Service Provider Information)
 (5) ☒ **D** (DFE/Participating Plan Information)
 (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 STEERE ENTERPRISES, INC. 401K RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500. STEERE ENTERPRISES, INC.		
D Employer Identification Number (EIN) 34-0751401		

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier
ING LIFE INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	ZH9315	172	01/01/2009	12/31/2009

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
14236	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
LINCOLN FINANCIAL ADVISORS CORP 1300 S CLINTON ST SUITE 150 FORT WAYNE, IN 46802

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14236			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	2216135
5 Current value of plan's interest under this contract in separate accounts at year end	5	4028277

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP FUNDING AGREEMENT**

b Balance at the end of the previous year	7b	218708
--	-----------	--------

c Additions: (1) Contributions deposited during the year	7c(1)	89991	
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)	24544	
(4) Transferred from separate account	7c(4)		
(5) Other (specify below)..... ▶ LOAN REPAYMENTS TRANSFERRED ASSETS	7c(5)	2410759	

(6) Total additions	7c(6)	2525294
---------------------------	--------------	---------

d Total of balance and additions (add b and c(6)).	7d	2744002
---	-----------	---------

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	229745	
(2) Administration charge made by carrier	7e(2)	1176	
(3) Transferred to separate account	7e(3)	241195	
(4) Other (specify below)..... ▶ NEW LOANS ISSUED CORRECTIVE DISTRIBUTIONS	7e(4)	55977	

(5) Total deductions	7e(5)	528093
----------------------------	--------------	--------

f Balance at the end of the current year (subtract e(5) from d)	7f	2215909
---	-----------	---------

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in c(2).).....		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.	10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 STEERE ENTERPRISES, INC. 401K RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500. STEERE ENTERPRISES, INC.		
D Employer Identification Number (EIN) 34-0751401		

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	4-41462	0	01/01/2009	12/31/2009

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
2918	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
LINCOLN FINANCIAL ADVISORS CORP 1300 S CLINTON SUITE 1H50 FORT WAYNE, IN 46801-2239

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2918			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end **4****5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ CUSTODIAL GUA FUND GR ANN CONTRACT**b** Balance at the end of the previous year **7b** 2315042**c** Additions: (1) Contributions deposited during the year **7c(1)**
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 53676
(4) Transferred from separate account **7c(4)**
(5) Other (specify below) **7c(5)**
▶(6) Total additions **7c(6)** 53676**d** Total of balance and additions (add **b** and **c(6)**). **7d** 2368718**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)**
(2) Administration charge made by carrier **7e(2)** 1689
(3) Transferred to separate account **7e(3)**
(4) Other (specify below) **7e(4)** 2367029
▶ CONTRACT LIQUIDATION MISCELLANEOUS(5) Total deductions **7e(5)** 2368718**f** Balance at the end of the current year (subtract **e(5)** from **d**) **7f** 0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in c(2).).....		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.	10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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

For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>		
A Name of plan <u>STEERE ENTERPRISES, INC. 401K RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>STEERE ENTERPRISES, INC.</u>	D Employer Identification Number (EIN) <u>34-0751401</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)		
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)	<u>176102</u>	<u>180794</u>
(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)	<u>2909694</u>	<u>2215909</u>
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	<u>2533750</u>	<u>4028227</u>
(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	5619546	6424930

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	5619546	6424930
---	-----------	---------	---------

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)	3522	
(B) Participants	2a(1)(B)	297596	
(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)		301118

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)	11954	
(F) Other	2b(1)(F)	78220	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		90174

(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

		(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)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		935450
(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		1381
d Total income. Add all income amounts in column (b) and enter total.....	2d		1328123

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	517323	
(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)		517323
f Corrective distributions (see instructions)	2f		3191
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)	2225	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		2225
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		522739

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		805384
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: BOBER, MARKEY, FEDOROVICH & CO.

(2) EIN: 34-1523030

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	
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		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 <u>STEERE ENTERPRISES, INC. 401K RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>STEERE ENTERPRISES, INC.</u>	D Employer Identification Number (EIN) <u>34-0751401</u>

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>71-0294708</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year	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 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(es). 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) 2009
v.092308.1

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 items 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 items 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 items 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 items 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 items 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 items 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 item 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 items (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 item 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION

December 31, 2009 and 2008

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
ANNUAL REPORT INDEX
December 31, 2009 and 2008

The following financial statements and other information of the Steere Enterprises, Inc. 401(K) Retirement Savings Plan is included herewith:

- Statements of Net Assets Available for Benefits as of December 31, 2009 and 2008
- Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2009 and 2008
- Notes to Financial Statements

The following supplemental schedule of the Steere Enterprises, Inc. 401(K) Retirement Savings Plan is included in the Annual Report of the Plan on Form 5500 filed with the Department of Labor for the year ended December 31, 2009:

- Schedule H – line 4i – Schedule of Assets (Held at End of Year)

All other supplemental schedules and notes for which provision is made in the applicable rules and regulations of the Department of Labor Regulations are not required under the related instructions or are inapplicable and, therefore, have been omitted.

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN

TABLE OF CONTENTS

	Page No.
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	2
Statements of Changes in Net Assets Available for Benefits	3
Notes to Financial Statements	4-12
SUPPLEMENTAL SCHEDULES	
Schedule H – line 4i – Schedule of Assets (Held at End of Year)	13

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator
Steere Enterprises, Inc. 401(K)
Retirement Savings Plan
Tallmadge, Ohio

We were engaged to audit the accompanying financial statements and supplemental schedule of the Steere Enterprises, Inc. 401(K) Retirement Savings Plan (the "Plan") as of December 31, 2009 and 2008 and for the years then ended, as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management.

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 investment information summarized in Note 3, which was certified by ING National Trust Company for the year ended December 31, 2009 and for the period of November 1, 2008 through December 31, 2008 and Delaware Charter Guarantee and Trust Company, doing business as Principal Trust Company for the year ended December 31, 2008, except for comparing such information with the related information included in the financial statements and supplemental schedule. 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 certifications from each of the respective Trustees as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan Administrator by the Trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedule, other than that derived from the investment 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.



BOBER, MARKEY, FEDOROVICH & COMPANY

August 19, 2010

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2009 and 2008

ASSETS	<u>2009</u>	<u>2008</u>
Investments held:		
Principal Fixed Income Option 401(a)/401(k) Fund	\$ -	\$ 2,315,042
ING Fixed Account	2,221,291	231,525
ING Money Market Fund Class A	17,623	3,682
American Funds Growth Fund of America	758,673	536,312
Eaton Vance Large Cap Value Fund Class R	345,573	376,429
EuroPacific Growth Fund Class R3	280,303	210,682
Franklin Small Cap Value Securities Fund Class 2	135,433	82,856
ING Clarion Real Estate Portfolio Service Class	166	7,589
ING FMR Diversified Mid Cap Portfolio Service Class	217,427	133,325
ING Global Real Estate Fund Class A	106,240	58,857
ING Index Plus MidCap Portfolio Class I	89,691	85,293
ING International Value Portfolio Class I	17,526	457
ING JPMorgan Emerging Markets Equity Portfolio	197,229	72,440
ING Janus Contrarian Portfolio Service Class	456,981	298,208
ING MFS Utilities Portfolio	1,536	-
ING PIMCO Total Return Portfolio Initial Class	119,780	1,476
ING Small Company Portfolio Class I	93,085	101,078
ING SmallCap Opportunities Portfolio Class I	171,570	122,180
ING Stock Index Portfolio	24,511	-
ING Solution 2015 Portfolio Advisor Class	51,999	40,991
ING Solution 2025 Portfolio Advisor Class	215,583	205,025
ING Solution 2035 Portfolio Advisor Class	281,029	242,015
ING Solution 2045 Portfolio Advisor Class	236,758	189,982
ING Solution Income Portfolio Advisor Class	29,243	13,312
Pioneer Mid Cap Value Fund Class Y	180,269	127,506
Total investments	<u>6,249,519</u>	<u>5,456,262</u>
Participant loans	180,791	176,099
TOTAL ASSETS	<u>6,430,310</u>	<u>5,632,361</u>
LIABILITIES		
Corrective distributions payable	2,362	3,266
TOTAL LIABILITIES	<u>2,362</u>	<u>3,266</u>
NET ASSETS AVAILABLE FOR BENEFITS, AT FAIR VALUE	6,427,948	5,629,095
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(5,382)</u>	<u>(12,818)</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 6,422,566</u>	<u>\$ 5,616,277</u>

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

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Years Ended December 31, 2009 and 2008

	2009	2008
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Dividend and interest income	\$ 84,118	\$ 68,367
Interest received on participant loans	11,954	16,902
Other income	1,381	-
	97,453	85,269
CONTRIBUTIONS		
Employer	3,522	145,329
Participants	297,596	438,109
Rollovers	-	1,416
	301,118	584,854
TOTAL ADDITIONS	398,571	670,123
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefit payments to participants	485,340	1,104,991
Deemed distributions of participant loans	34,270	56,225
Administrative expenses	2,225	10,258
TOTAL DEDUCTIONS	521,835	1,171,474
NET APPRECIATION (DEPRECIATION) IN FAIR VALUE OF INVESTMENTS	929,553	(2,306,188)
NET INCREASE (DECREASE)	806,289	(2,807,539)
NET ASSETS AVAILABLE FOR BENEFITS BEGINNING OF YEAR	5,616,277	8,423,816
END OF YEAR	\$ 6,422,566	\$ 5,616,277

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

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the Steere Enterprises, Inc. (the "Company", "Plan Sponsor" or "Employer") 401(K) Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan, which was originally established on February 1, 1985 and was amended and restated as of January 1, 2006 and covers all eligible employees. For purposes of participating in the plan via the employee deferral and company match contribution, an employee who has attained age 21 is eligible to participate upon completion of three months of service prior to any entry date. The entry dates are the first day of each calendar quarter. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

Participants may elect to contribute up to 50% of their compensation under the Plan. The Company makes matching contributions equal to 50% of employee deferrals that are 6% or less of the individual participant's compensation. Effective January 1, 2009 the matching contribution was suspended. The matching contribution was reinstated effective January 1, 2010.

The Plan also has a profit sharing component that was added to the Plan in the form of a discretionary contribution, to be made at the election of the Company. Participants must be employed by the Company on the last day of the Plan year in order to receive an allocation of any discretionary contributions.

Effective January 1, 2008, the Plan increased the automatic enrollment election for pre-tax elective deferrals from three percent of the participant's compensation to four percent, unless the participant elects a lesser percentage.

Vesting

Plan participants acquire vested nonforfeitable interest in the Plan Sponsor's matching contributions according to the following schedule:

<u>Years of Service</u>	<u>Vested Percentage</u>
2	20%
3	40%
4	60%
5	80%
6	100%

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

However, if an active participant dies or becomes permanently disabled prior to attaining his normal retirement age his vesting percentage shall be 100%. Participants are always 100% vested in their contributions to the Plan.

Allocation of Forfeitures

Forfeitures attributable to Employer matching contributions are used to reduce the Employer's contribution for the plan year in which such forfeitures occur. Forfeitures may also be used to pay administrative expenses.

Participant Accounts

Separate accounts are maintained by the Trustee in the name of each participant. Participants direct their contributions and matching Plan Sponsor contributions to be invested into various investment options offered by the Plan.

Participant Loans

The Plan allows for loans to participants from their individual account balances which are limited to the lesser of \$50,000 reduced by the excess (if any) of the highest outstanding loan balance of loans from the Plan to the Participant during the one year period ending on the day before the date on which such loan was made, or one-half of the present value of the non-forfeitable accrued benefit of the Participant. The loans have specific repayment schedules and interest rates ranging from 6.0% to 11.5%.

Benefits

Benefits are payable in either a lump-sum amount or in periodic payments. Lump-sum payments are made for distributions less than \$1,000. For those distributions between \$1,000 and \$5,000, and for which receipt is not specified by the participant, an automatic rollover to an Individual Retirement Account is made. Most periodic payments are made in the form of qualified joint and survivor annuities.

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting

The accounting records of the Plan are maintained on the accrual basis.

Valuation of Investments

The fair value of the investments at ING National Trust Company ("ING") at December 31, 2009 and 2008 and Delaware Charter Guarantee and Trust Company, doing business as Principal Trust Company ("Principal"), at December 31, 2008, represent the aggregate value of the accumulated units held based on market prices of the trust fund's assets at year-end.

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

The change in the difference between fair value and the cost of the investments, along with gains (losses) from sales of investments, is reflected in the statements of changes in net assets available for plan benefits as net appreciation (depreciation) in fair value of investments. Dividend income is accrued on the ex-dividend date. Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses from security transactions are reported on the average cost method.

Investment contracts held by a defined-contribution plan are generally 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 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 contract from fair value to contract value. The statement of changes in net assets available for benefits is prepared on contract value basis.

Fair Value Measurements

Fair value estimates are made at a specific point in time based on relevant market information about the financial instrument. These estimates are subjective in nature and involve uncertainties and matters of significant judgment and, therefore, cannot be determined with precision. Changes in assumptions could significantly affect the estimates.

As required by the Fair Value Measurements and Disclosures Topic of the Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC"), the Plan adopted the new standard related to financial assets and liabilities effective January 1, 2008. The adoption of this standard had no significant impact on the financial statements.

Administrative Fees

The Plan pays all administrative fees, unless paid by the Company.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results may differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

Subsequent Events

Effective for fiscal years and interim periods ending after June 15, 2009, the Plan is required to prospectively adopt the Subsequent Events Topic of the FASB ASC. This standard sets forth the period after the date of the financial statements during which management of a plan should evaluate events or transactions that may occur for potential recognition or disclosure in the financial statements, the circumstances under which a plan should recognize events or transactions occurring after the date of its financial statements, and the disclosures that a plan should make about events or transactions that occurred after the date of the financial statements.

The Plan adopted this standard during the year ended December 31, 2009. In accordance with this standard, the Plan has evaluated subsequent events through August 19, 2010, the date the financial statements were available to be issued.

Reclassification

Certain amounts from prior year have been reclassified in order to conform to the current year presentation.

NOTE 3 - SUMMARY OF FINANCIAL DATA CERTIFIED BY TRUSTEE (UNAUDITED)

In November 2008, a new Trustee, ING, was appointed by the Plan Sponsor. Plan assets were transferred into funds comparable to those offered by the former Trustee.

Principal served as Trustee of the Plan until October 31, 2008, however as of December 31, 2008, one fund, Principal Fixed Income Option, was still held with Principal as a result of a twelve month delay of payment provision within the service agreement. This fund was transferred to ING during September 2009.

The Plan Administrator has obtained certifications from the Trustees as of and for the years ended December 31, 2009 and 2008, that such information is complete and accurate.

	2009	2008
Investments, at fair value	\$ 6,249,519	\$ 5,456,262
Dividend and interest income	\$ 84,118	\$ 68,367
Net appreciation (depreciation) in fair value of investments	\$ 929,553	\$ (2,306,188)

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

NOTE 4 - INVESTMENTS

The Plan had an interest in a fully benefit-responsive group annuity contract as part of the Principal Fixed Income Option issued by Principal and has a separate interest in a fully benefit-responsive group annuity contract as part of the ING Fixed Account issued by ING. As described in Note 2, group annuity contracts are to be reported at contract value and disclosure of adjustment from fair value is required, as stated on the statements of net assets available for benefits.

The Principal Fixed Income Option was calculated with the methodology that the interest crediting rate is determined by solving for the rate, that when used to accrue as of the first day of the deposit period to the end of the deposit period, including expected net cash flows, will result in a value equal to the sum of the following, rounded to the nearest 5 basis points. The aggregate of the values of each contract for which the deposit periods have closed, plus the expected value of each contract for which the deposit periods have closed, plus the expected value of each contract for the deposit period the credit rating is being determined. Under the terms of the existing contract, the crediting rate was reset on a semiannual basis. Certain events limit the ability of the Plan to transact with the issuer at contract value. These events include Plan termination, termination of Plan interest in contract assets, or similar events.

The Principal Fixed Income Option is a single group annuity contract with a fixed rate of interest. It is not a portfolio of contracts whose yields are based on changes in fair value of underlying assets as would be found in a Stable Value fund. As a result, the average yield earned by the plan is the yield earned (i.e. interest credited) on the group annuity contract.

The interest rate history for the Principal Fixed Income Option is as follows:

<u>Time Period</u>	<u>Rate</u>
January 1, 2008 – June 30, 2008	3.15%
July 1, 2008 – December 31, 2008	3.50%
January 1, 2009 – June 30, 2009	3.50%
July 1, 2009 – December 31, 2009	3.15%

Effective September 2009, this fund is no longer held by the Plan.

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

The ING Fixed Income Option is calculated with the methodology that the interest crediting rate is determined daily. The rate is net of all ING expenses and will apply to all new contributions and existing account balances for the specified period. The crediting rate is announced in advance of the upcoming crediting rate periods, which are quarterly, semi-annually and annually. Under the terms of the existing contract, the crediting rate is currently reset on a quarterly basis. Certain events limit the ability of the Plan to transact with the issuer at contract value. These events include Plan termination, termination of Plan interest in contract assets, or similar events. The Plan Administrator does not believe the occurrence of any such event that would limit the Plan's ability to transact at contract value is probable.

The ING Fixed Income Option guarantees a minimum rate of interest and may credit a higher interest rate from period to period. The credited interest rate is subject to change, up or down, but will never fall below the guaranteed minimum.

The interest rate history for the ING Fixed Income Option is as follows:

<u>Time Period</u>	<u>Rate</u>
January 1, 2008 – December 31, 2008	3.46%
January 1, 2009 – December 31, 2009	3.00%

Investments that individually represent five percent or more of the Plan's net assets are as follows as of December 31:

	<u>2009</u>	<u>2008</u>
Principal Fixed Income Option 401(a)/401(k) Fund	\$ -	\$ 2,315,042
ING Fixed Account	\$ 2,221,291	\$ 231,525
American Funds Growth Fund of America	\$ 758,673	\$ 536,312
Eaton Vance Large Cap Value Fund Class R	\$ 345,573	\$ 376,429
ING Janus Contrarian Portfolio Service Class	\$ 456,981	\$ 298,208

Fair value is a market-based measurement that is determined based on assumptions that market participants would use in pricing an asset or liability. As a basis for considering such assumptions, the Agency uses a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value as follows:

- Level 1 – Observable inputs such as quoted prices in active markets;
- Level 2 – Inputs, other than the quoted prices in active markets, that are observable either directly or indirectly; and
- Level 3 – Unobservable inputs in which there is little or no market data, which require the reporting entity to develop its own assumptions

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

Plan's assets measured at fair value on a recurring basis as of December 31, 2009 and 2008 are as follows:

	2009			
	Level 1	Level 2	Level 3	Total
Money market fund	\$ -	\$ 17,623	\$ -	\$ 17,623
Pooled separate accounts				
Large cap growth	-	758,673	-	758,673
Large cap value	-	827,065	-	827,065
Global/International	-	495,058	-	495,058
Small/Mid cap	-	995,417	-	995,417
Bond	-	119,780	-	119,780
Asset allocation	-	814,612	-	814,612
Total pooled separate accounts	-	4,010,605	-	4,010,605
Fixed income fund	-	-	2,221,291	2,221,291
Participant loans	-	-	180,791	180,791
Total assets at fair value	<u>\$ -</u>	<u>\$ 4,028,228</u>	<u>\$ 2,402,082</u>	<u>\$ 6,430,310</u>

	2008			
	Level 1	Level 2	Level 3	Total
Money market fund	\$ -	\$ 3,682	\$ -	\$ 3,682
Pooled separate accounts				
Large cap growth	-	536,312	-	536,312
Large cap value	-	674,637	-	674,637
Global/International	-	283,579	-	283,579
Small/Mid cap	-	718,684	-	718,684
Bond	-	1,476	-	1,476
Asset allocation	-	691,325	-	691,325
Total pooled separate accounts	-	2,906,013	-	2,906,013
Fixed income funds	-	-	2,546,567	2,546,567
Participant loans	-	-	176,099	176,099
Total assets at fair value	<u>\$ -</u>	<u>\$ 2,909,695</u>	<u>\$ 2,722,666</u>	<u>\$ 5,632,361</u>

The following table sets forth a summary of the changes in fair value of the Plan's level 3 fixed income funds for the years ended December 31:

	2009	2008
Balance, beginning of year	\$ 2,546,567	\$ 1,454,810
Purchases, sales, issuances and settlements, net	(325,276)	1,091,757
Balance, end of year	<u>\$ 2,221,291</u>	<u>\$ 2,546,567</u>

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

The following table sets forth a summary of the changes in fair value of the Plan's level 3 participant loans for the years ended December 31:

	2009	2008
Balance, beginning of year	\$ 176,099	\$ 207,920
Purchases, sales, issuances and settlements, net	4,692	(31,821)
Balance, end of year	<u>\$ 180,791</u>	<u>\$ 176,099</u>

The classification of fair value measurements within the hierarchy is based upon the lowest level of input that is significant to the measurement. Valuation methodologies used for assets and liabilities measured at fair value are as follows:

- Money market fund: Valued at the net asset value of shares held by the plan at year end.
- Pooled separate accounts: Valued at the net asset value of shares held by the Plan at year end.
- Fixed income fund: Valued at fair value by discounting the related cash flows based on current yields of similar investments with the comparable durations.
- Participant loans: Valued at amortized cost, which approximates fair value.

NOTE 5 - 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 terminate the Plan subject to the provisions of ERISA. In the event of termination of the Plan, all participants shall be fully vested and shall receive a full distribution of the balances in their respective accounts.

NOTE 6 - TAX STATUS

The Internal Revenue Service has determined and informed the Company by letter dated June 7, 2010 that the Plan is a qualified plan under Section 401(a) of the Internal Revenue Code and is exempt from tax under present income tax laws. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan Administrator is not aware of any course of action or series of events that have occurred that might adversely affect the Plan's qualified status.

STEERE ENTERPRISES, INC.
401(K) RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2009 and 2008

NOTE 7 - RELATED PARTY TRANSACTIONS

The Trustees serve as the fund manager of all available investment options. Fees paid by the Plan to the Trustees related to these funds amounted to \$2,225 and \$10,258 for the years ended December 31, 2009 and 2008, respectively.

NOTE 8 - RECONCILIATION TO FORM 5500

The following is a reconciliation of total assets per the financial statements to the Form 5500 for the year ended December 31:

	2009	2008
Total assets per financial statements	\$ 6,430,310	\$ 5,632,361
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(5,382)	(12,818)
Total assets per the Form 5500	<u>\$ 6,424,928</u>	<u>\$ 5,619,543</u>

The following is a reconciliation of corrective distributions payable per the financial statements to the Form 5500 for the year ended December 31:

	2009	2008
Corrective distribution payable per the financial statements	\$ 2,362	\$ 3,266
Adjustment from accrual basis to cash basis	(2,362)	(3,266)
Corrective distribution payable per the Form 5500	<u>\$ -</u>	<u>\$ -</u>

The following is a reconciliation of total distributions per the financial statements to the Form 5500 for the year ended December 31:

	2009	2008
Total distributions per the financial statements	\$ 519,610	\$ 1,161,216
Adjustment from accrual basis to cash basis	904	-
Total distributions per the Form 5500	<u>\$ 520,514</u>	<u>\$ 1,161,216</u>

NOTE 9 - PARTY-IN-INTEREST

Certain Plan investments are shares of a money market fund, pooled separate accounts, and fixed income funds managed by the Trustee as defined by the Plan and, therefore, these transactions are party-in-interest transactions.

STEERE ENTERPRISES, INC. 401(K) RETIREMENT SAVINGS PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EMPLOYER NO. 34-0751401
PLAN NO. 003
December 31, 2009

(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
	MONEY MARKET FUND			
*	ING Money Market Fund Class A	Money Market	NA	\$ 17,623
	POOLED SEPARATE ACCOUNTS			
	American Funds Growth Fund of America	Pooled Separate Account	NA	\$ 758,673
	Eaton Vance Large Cap Value Fund Class R	Pooled Separate Account	NA	345,573
	EuroPacific Growth Fund Class R3	Pooled Separate Account	NA	280,303
	Franklin Small Cap Value Securities Fund Class 2	Pooled Separate Account	NA	135,433
*	ING Clarion Real Estate Portfolio Service Class	Pooled Separate Account	NA	166
*	ING FMR Diversified Mid Cap Portfolio Service Class	Pooled Separate Account	NA	217,427
*	ING Global Real Estate Fund Class A	Pooled Separate Account	NA	106,240
*	ING Index Plus MidCap Portfolio Class I	Pooled Separate Account	NA	89,691
*	ING International Value Portfolio Class I	Pooled Separate Account	NA	17,526
*	ING JPMorgan Emerging Markets Equity Portfolio	Pooled Separate Account	NA	197,229
*	ING Janus Contrarian Portfolio Service Class	Pooled Separate Account	NA	456,981
*	ING MFS Utilities Portfolio	Pooled Separate Account	NA	1,536
*	ING PIMCO Total Return Portfolio Initial Class	Pooled Separate Account	NA	119,780
*	ING Small Company Portfolio Class I	Pooled Separate Account	NA	93,085
*	ING SmallCap Opportunities Portfolio Class I	Pooled Separate Account	NA	171,570
*	ING Stock Index Portfolio	Pooled Separate Account	NA	24,511
*	ING Solution 2015 Portfolio Advisor Class	Pooled Separate Account	NA	51,999
*	ING Solution 2025 Portfolio Advisor Class	Pooled Separate Account	NA	215,583
*	ING Solution 2035 Portfolio Advisor Class	Pooled Separate Account	NA	281,029
*	ING Solution 2045 Portfolio Advisor Class	Pooled Separate Account	NA	236,758
*	ING Solution Income Portfolio Advisor Class	Pooled Separate Account	NA	29,243
	Pioneer Mid Cap Value Fund Class Y	Pooled Separate Account	NA	180,269
				\$ 4,010,605
	COLLECTIVE INVESTMENT TRUSTS			
*	ING Fixed Account	Guaranteed Investment Contracts	NA	\$ 2,221,291
*	PARTICIPANT LOANS			
		Interest rates range from 6.00% to 11.50%	\$ -	\$ 180,791
	TOTAL ASSETS HELD FOR INVESTMENT			<u>\$ 6,430,310</u>

* - Represents a party-in-interest, as defined by ERISA.

NA - Information is not required for participant-directed investments pursuant to Form 5500 instructions.



Attachment to 2009 Form 5500
Schedule H, line 4i - Schedule of Assets
(Held at End of Year)
Steere Enterprises, Inc. 401(k) Retirement Savings
Plan
EIN #34-0751401
Plan #003
As of December 31, 2009

(a) (b) Identity of issue, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value
AMERICAN FUNDS	American Funds EuroPacific R3		\$280,303
AMERICAN FUNDS	American Funds Growth Fnd R3		\$758,673
EATON VANCE FUNDS	EATON VANCE LG CAP VALUE R		\$345,573
FRANKLIN/TEMPLETON FUNDS	FRANKLIN SMALL CAP VAL SECDF-C		\$135,433
* ING Life Insurance And Annuity Company	ING Alt MonMkt Fd HldAcc CI A		\$17,623
* ING Life Insurance And Annuity Company	ING Clarion Real Est PrtSvc		\$166
* ING Life Insurance And Annuity Company	ING FMR DIV MID CAP PORT-SVC		\$217,427
* ING Life Insurance And Annuity Company	ING GLOBAL REAL ESTATE FD-A		\$106,240
* ING Life Insurance And Annuity Company	ING Idx Pls MidCap PrtCI I		\$89,691
* ING Life Insurance And Annuity Company	ING Intl Val PrtCI I		\$17,526
* ING Life Insurance And Annuity Company	ING JANUS CONTRARIAN PORT-SVC		\$456,981
* ING Life Insurance And Annuity Company	ING JPMGN EMRG MKT EQ PORT-SVC		\$197,229
* ING Life Insurance And Annuity Company	ING MFS Utilities Port - S		\$1,536
* ING Life Insurance And Annuity Company	ING PIMCO TOTAL RTN PORT		\$119,780
* ING Life Insurance And Annuity Company	ING Sml Cmpny Prtflo CI I		\$93,085
* ING Life Insurance And Annuity Company	ING SmlCap Opptis PrtCI I		\$171,570
* ING Life Insurance And Annuity Company	ING SOLUTION 2015 PORT-ADV		\$51,999
* ING Life Insurance And Annuity Company	ING SOLUTION 2025 PORT-ADV		\$215,583
* ING Life Insurance And Annuity Company	ING SOLUTION 2035 PORT-ADV		\$281,029
* ING Life Insurance And Annuity Company	ING SOLUTION 2045 PORT-ADV		\$236,758
* ING Life Insurance And Annuity Company	ING SOLUTION INCOME PORT-ADV		\$29,243
* ING Life Insurance And Annuity Company	ING Stock Index Port		\$24,511
* ING Life Insurance And Annuity Company	STABLE VALUE OPTION		\$2,215,909
PIONEER FUNDS	PIONEER MIDCAPVALUE FND-CLASSY		\$180,269
	Participant Loans - Rates 6.61% to 8.65%		\$180,794
	TOTAL		\$6,424,930

* denotes party-in-interest

Column (d) is not required as the Plan's investments are totally participant directed.