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 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:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
STORAGE DELUXE MANAGEMENT COMPANY LLC RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2005

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
STORAGE DELUXE MANAGEMENT COMP. LLC

26 WEST 17TH STREET SUITE 801
NEW YORK, NY 10011

2b Employer Identification Number (EIN)
52-2268553

2c Sponsor's telephone number
212-904-0403

2d Business code (see instructions)
339900

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.	10/05/2010	EVAN NOVENSTEIN
	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")
STORAGE DELUXE MANAGEMENT COMP. LLC

26 WEST 17TH STREET SUITE 801
NEW YORK, NY 10011

3b Administrator's EIN
52-2268553

3c Administrator's telephone number
212-904-0403

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**	135
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**	150
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	10
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	160
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	160
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	27
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2A 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)

(1)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	X	Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	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)	X	**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)	X		**H** (Financial Information)
(2)			**I** (Financial Information – Small Plan)
(3)	X	1	**A** (Insurance Information)
(4)			**C** (Service Provider Information)
(5)	X		**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
STORAGE DELUXE MANAGEMENT COMPANY LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
STORAGE DELUXE MANAGEMENT COMP. LLC

D Employer Identification Number (EIN)
52-2268553

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 & 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	PHS498	31	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
1132	175

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
CONSULTING ACTUARIES INC.
10 KINGSBRIDGE ROAD
FAIRFIELD, NJ 07004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
1132			5

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
CONSULTING ACTUARIES INC.
10 KINGSBRIDGE ROAD
FAIRFIELD, NJ 07004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
	175	FEES	5

(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	28760
5	Current value of plan's interest under this contract in separate accounts at year end	5	435453

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 ▶ GROUP PENSION FUNDING

b	Balance at the end of the previous year			7b	3298
c	Additions: (1) Contributions deposited during the year	7c(1)	94220		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	632		
	(4) Transferred from separate account	7c(4)	67153		
	(5) Other (specify below)	7c(5)			
	▶				
	(6) Total additions			7c(6)	162005
d	Total of balance and additions (add **b** and **c(6)**)			7d	165303
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	42190		
	(2) Administration charge made by carrier	7e(2)	420		
	(3) Transferred to separate account	7e(3)	93933		
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	136543
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	28760

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 D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

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
STORAGE DELUXE MANAGEMENT COMPANY LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
STORAGE DELUXE MANAGEMENT COMP. LLC

D Employer Identification Number (EIN)
52-2268553

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: MAP CONTRACT SEPARATE ACCOUNT D

b Name of sponsor of entity listed in (a): ING LIFE INS. & ANNUITY CO.

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)
71-0294708-000	P	463934

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)

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

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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 01/01/2009 and ending 12/31/2009

A Name of plan
STORAGE DELUXE MANAGEMENT COMPANY LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
STORAGE DELUXE MANAGEMENT COMP. LLC

D Employer Identification Number (EIN)
52-2268553

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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	315027	435453
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	3298	28760
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(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	318325	464213
	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 through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	318325	464213

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
	(B) Participants	2a(1)(B)	94220	
	(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)		94220
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
	(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)		94278
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		188498
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	25922	
(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)		25922
f Corrective distributions (see instructions)	2f		16268
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)	420	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		420
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		42610
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		145888
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) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

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

(1) Name: GROSSBERG COMPANY LLP (2) EIN: 52-0807134

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		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?	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 ... [X] **Yes** [ ] **No** **Amount:** 0

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
STORAGE DELUXE MANAGEMENT COMPANY LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
STORAGE DELUXE MANAGEMENT COMP. LLC

D Employer Identification Number (EIN)
52-2268553

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): 71-0294708

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 of 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**

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):

---

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):

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

Financial Statements
and Supplementary Information
with
Report of Independent Auditors
For the Year Ended
December 31, 2009

CONTENTS

	Page
Report of independent auditors	2
Financial statements:	
Statements of net assets in liquidation available for benefits	3
Statement of changes in net assets available for benefits	4
Statement of changes in net assets in liquidation available for benefits	5
Notes to financial statements	6-11
Supplementary information:	
Schedule of assets (held at end of year)	12

Grossberg COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS

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(301) 571-1900 • FAX (301) 571-1932 • www.grossberg.com

REPORT OF INDEPENDENT AUDITORS

To The Trustees and Participants
Storage Deluxe Management Company, LLC Retirement Plan

We were engaged to audit the accompanying statement of net assets in liquidation available for benefits of Storage Deluxe Management Company, LLC Retirement Plan at December 31, 2009, the related statements of changes in net assets available for benefits for the period from January 1, 2009 to October 15, 2009 and of changes in net assets in liquidation for the period October 16, 2009 to December 31, 2009 and the supplementary schedule of assets (held at end of year) at December 31, 2009. We were also engaged to audit the statement of net assets available for benefits at December 31, 2008. These financial statements and 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 information summarized in Notes 3 and 4, which was certified by ING Life Insurance and Annuity Company, the Trustee of the Plan, except for comparing the information with the related information included in the financial statements and the supplementary 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 a certification from the Trustee at 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.

On October 15, 2009 the Board of Directors of Storage Deluxe Management Company, LLC, the Plan's sponsor, voted to terminate the Plan. In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting to the liquidation basis for periods after October 15, 2009 (see Note 8).

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

Grossberg Company LLP

September 29, 2010
Bethesda, Maryland

ASSOCIATED WORLD-WIDE WITH JHI

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2009 AND 2008

	2009 (In liquidation)	2008
Assets:		
Investments, at fair value: (Notes 3 and 4)		
Pooled separate accounts	$ 435,453	$ 315,027
Contract with insurance company	28,760	3,298
Total assets	464,213	318,325
Liabilities:		
Excess contributions payable	22,914	24,486
Net assets available for benefits	$ 441,299	$ 293,839

See accompanying notes.

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE PERIOD JANUARY 1, 2009 - OCTOBER 15, 2009

Additions to net assets attributed to:	
Participants' contributions	$ 94,220
Net appreciation in fair value of investments	69,485
Total additions to net assets	163,705
Deductions from net assets attributed to:	
Benefits paid to participants	3,921
Corrective distributions	22,914
Administrative expenses (Note 7)	420
Total deductions from net assets	27,255
Net increase in net assets available for benefits	136,450
Net assets available for benefits, beginning of period	293,839
Net assets available for benefits, end of period	$ 430,289

See accompanying notes.

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENT OF CHANGES IN NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS

FOR THE PERIOD OCTOBER 16, 2009 - DECEMBER 31, 2009

Additions to net assets in liquidation attributed to:	
Net appreciation in fair value of investments	$ 33,011
Deductions from net assets in liquidation attributed to:	
Benefits paid to participants	22,001
Net increase in changes in net assets in liquidation available for benefits	11,010
Net assets in liquidation available for benefits, beginning of period	430,289
Net assets in liquidation available for benefits, end of period	$ 441,299

See accompanying notes.

1. *Description of plan*

The following description of Storage Deluxe Management Company, LLC Retirement Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions which were in effect prior to termination of the Plan on October 15, 2009 (see Note 8).

General - The Plan is a defined contribution retirement plan covering all employees of Storage Deluxe Management Company, LLC (the "Company") age 21 or older who have completed either (a) one year of service, or, if earlier, (b) three consecutive months of full-time employment. Eligible employees may commence participation in the Plan on the first day of each calendar quarter that coincides with or next follows the date on which the employee satisfies the eligibility requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions - Each year, participants may contribute up to the lesser of 100% of pretax annual compensation, as defined, or the amount limited under the Internal Revenue Code ($16,500 for 2009). In addition, participants, aged 50 or older, may make a "catch-up" contribution of up to $5,500 for 2009. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of all contributions into various investment options offered by the Plan. Prior to termination the Plan offered 16 pooled separate accounts and a contract with an insurance company as investment options for participants. The Company may, at its sole discretion, make a matching contribution or non-elective contribution in any amount it deems appropriate. Non-elective contributions are allocable to participants based on compensation.

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

Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Because of the termination of the Plan in 2009, all participants became fully vested in the Company's contributions.

Participant loans - Participants may borrow from their accounts a minimum of $1,000 up to a maximum amount equal to the lesser of: (a) $50,000 or (b) 50% or their vested account balance. The loans are to be repaid over a period not to exceed five years, except for loan proceeds used to acquire a home, in which event the term is to be determined by the Plan Administrator considering the maturity dates quoted by representative commercial banks in the local area for a similar loan. The notes are secured by the balance in the participant's account and incur interest at 1% above the prime rate in effect at the inception of the loan. Principal and interest are paid ratably through bi-weekly payroll deductions. No loans were outstanding at December 31, 2009 or 2008.

Payment of benefits - Participants are entitled to 100% of their vested account balance upon termination of employment or upon attaining the normal retirement age of 65, disability or death. Benefit payments may be made in the form of a single, lump-sum payment.

2. *Accounting policies*

Basis of accounting - The accompanying financial statements are presented on the accrual basis of accounting for the period through the date of the Plan's termination (October 15, 2009); thereafter the Plan's financial statements are presented on the liquation basis of accounting.

Use of estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results may differ from those estimates.

Valuation of investments - The Plan's investments in pooled separate accounts are stated at fair value as determined by the Plan's Trustee. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4).

Investment income - Purchases and sales of securities are recorded on the trade-date. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis of accounting. The net decline in the fair value of investments includes the Plan's gains and losses on investments bought and sold as well as investments held during the year.

Payment of benefits - Benefits are recognized when paid.

Administrative fees - For 2009, the Company funded the costs associated with administering the Plan.

3. *Investments (unaudited)*

At December 31, 2009 and 2008, the Plan's investments were held by the Trustee. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the Trustee as complete and accurate in accordance with Section 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 fair value of investments at December 31, 2009 and 2008, as reported by the Trustee, is summarized as follows:

	2009	*2008*
Pooled separate accounts	$ 435,453	$ 315,027
Contract with insurance company	28,760	3,298
	$ 464,213	$ 318,325

3. *Investments (unaudited) (continued)*

The Plan's contract with ING Life Insurance and Annuity Company represents an unallocated funding arrangement whereby the insurance company holds, in its general account, funds to be used to meet benefit and/or administrative payments as they come due or to purchase annuities for participants at retirement or on earlier termination of employment with vested benefits. The contract value approximates fair value.

Investments at December 31, 2009 and 2008, that represent 5% or more of the Plan's net assets consist of the following:

	2009	2008
Baron Asset Fund	$ 71,881	$ 54,384
ING Stock Index Portfolio, Institutional Class	73,822	49,490
Fidelity VIP Contrafund Portfolio, Initial Class	55,875	34,215
ING Russell Small Cap Index Portfolio - Class I	41,540	- (A)
ING JPMorgan Mid-Cap Value Portfolio, Initial Class	36,693	28,303
ING Index Plus SmallCap Portfolio, Class I	- (A)	28,075
ING Oppenheimer Global Portfolio, Initial Class	38,759	21,080
Washington Mutual Investors FundSM, Class R-3	19,156 (A)	15,425
ING Fixed Account	28,760	3,298 (A)

(A) - Represents less than 5% of Plan net assets at year end; presented for comparative purposes only.

For the year ended December 31, 2009, the net appreciation in fair value of investments (including investments bought, sold and held during the year) is attributable solely to pooled separate accounts.

4. *Fair value measurements (unaudited)*

The Plan's investments are reported at fair value in the accompanying financial statements. The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008.

	Total Fair Value	Level 2	Level 3
Assets at fair value as of December 31, 2009:			
Pooled separate accounts	$ 435,453	$ 435,453	$ -
Contract with insurance company	28,760	-	28,760
	$ 464,213	$ 435,453	$ 28,760

4. *Fair value measurements (unaudited) (continued)*

Assets at fair value as of December 31, 2008:	*Total Fair Value*	*Level 2*
Pooled separate accounts	$ 315,027	$ 315,027
Contract with insurance company	3,298	3,298
	$ 318,325	$ 318,325

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820 *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. The Plan used Levels 2 and 3 to value its investments as described below.

Level 2 fair value measurements - The fair value of pooled separate accounts and certain contracts with insurance companies were quoted from a pricing service based upon model - derived valuations whose inputs are directly observable or whose significant value drivers are indirectly observable.

Level 3 fair value measurements - Inputs to the valuation methodology are unobservable and significant to the fair value measurement. Level 3 fair value measurements were used to value certain contracts with insurance companies. Such measurements resulted in the value of the contracts being equal to the approximate amount that would have been paid if the contracts had been terminated as of the last day of the reporting period.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The following table provides further details of the Level 3 fair value measurements:

Level 3 assets: contract with insurance company	*2009*	*2008*
Transfer from level 2	$ 3,298	$ -
Realized gains (losses)	-	-
Unrealized gains (losses)	-	-
Purchases, sales, issuances and settlements (net)	25,462	-
	$ 28,760	$ -

5. *Reconciliation of financial statements to Form 5500*

The following reconciles net assets available for benefits at December 31, 2009 per the financial statements to the Form 5500:

Net assets available for benefits per the financial statements	$ 441,299
Add excess contributions payable	22,914
Net assets available for benefits per Form 5500	$ 464,213

The following reconciles the changes in net assets available for benefits per the financial statements to the Form 5500:

Net increase in net assets available for benefits per the financial statements	$ 147,460
Add excess contributions payable at December 31, 2009	22,914
Less excess contributions payable at December 31, 2008	(24,486)
Net increase in net assets available for benefits per Form 5500	$ 145,888

6. *Risks and uncertainties*

Although the Plan permits participants to invest in a variety of pooled separate accounts, most investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. Such changes could materially affect participants' account balances and the amounts reported in the accompanying financial statements.

Financial instruments, which potentially subject the Plan to concentrations of credit risk, consist primarily of investments in pooled separate accounts. The Plan has offered Plan participants investment options in various pooled separate accounts with differing investment objectives as a means of reducing the effects of such risks.

7. *Related party transactions*

The Company absorbed $18,224 of administrative expenses on behalf of the Plan in 2009.

The Plan's investments consist of pooled separate accounts, all of which are funds managed by ING Life Insurance and Annuity Company, the investment custodian of the Plan. Under ERISA, such transactions qualify as party-in-interest transactions.

8. *Plan termination*

By action of its Board of Directors, the Company terminated the Plan on October 15, 2009 and filed an application with the IRS for approval. Once IRS approval has been received, the net assets will be distributed to participants. Participants will have a choice of options regarding these distributions. Participants may elect a lump-sum payment or direct individual account rollover.

9. *Tax status*

The Plan is operating under an adoption agreement of a nonstandardized prototype plan structured by the Plan's third-party administrator. The Internal Revenue Service has determined and informed the Company by a letter dated January 11, 2002, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

FASB ASC 740, formerly "Fin 48" *Accounting for Uncertainty in Income Taxes*, an Interpretation of FASB Statement No. 109 *Accounting for Income Taxes*, applies to all entities, including employee benefit plans and became effective for the Plan in 2009.

FASB ASC 740 prescribes a recognition threshold and measurement of a tax position taken or expected to be taken in the tax returns. Specifically, the financial statement effects of a tax position may be recognized only when it is determined that it is more likely than not, based upon its technical merits, the tax position will be sustained upon examination by the relevant tax authority.

The Plan adopted the provisions of the FASB Accounting Standards Codification Topic 740 in 2009 and concluded that it had no applicability to its financial statements at and for the year ended December 31, 2009.

10. *Subsequent events*

In accordance with FASB Accounting Standards Codification Topic 855, *Subsequent Events*, the Plan has evaluated subsequent events through September 29, 2010, which is the date these financial statements were available to be issued. All subsequent events requiring recognition as of December 31, 2009 have been incorporated into these statements.

SUPPLEMENTARY INFORMATION

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

EIN 52-2268553 - PLAN 001

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

DECEMBER 31, 2009

(a)	(b) Identity of Issue, Borrower Lessor or Simular Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost**	(e) Current Value
		Pooled separate accounts:		
*	ING Life Insurance and Annuity Company	ING Stock Index Portfolio, Institutional Class	$ -	$ 73,822
*	ING Life Insurance and Annuity Company	Baron Asset Fund	-	71,881
*	ING Life Insurance and Annuity Company	Fidelity VIP Contrafund Portfolio, Initial Class	-	55,875
*	ING Life Insurance and Annuity Company	ING Russell Small Cap Index Portfolio - Class I	-	41,540
*	ING Life Insurance and Annuity Company	ING Oppenheimer Global Portfolio, Initial Class	-	38,759
*	ING Life Insurance and Annuity Company	ING JPMorgan Mid Cap Value Portfolio, Initial Class	-	36,693
*	ING Life Insurance and Annuity Company	Fidelity VIP Overseas Portfolio, Initial Class	-	21,381
*	ING Life Insurance and Annuity Company	Washington Mutual Investors FundSM, Class R-3	-	19,156
*	ING Life Insurance and Annuity Company	ING Marsico Growth Portfolio, Service Class	-	15,480
*	ING Life Insurance and Annuity Company	American Balanced Fund, Class R-3	-	12,321
*	ING Life Insurance and Annuity Company	ING Oppenheimer Strategic Income Portfolio, Service Class	-	12,044
*	ING Life Insurance and Annuity Company	ING Strategic Allocation Growth Portfolio, Class I	-	12,026
*	ING Life Insurance and Annuity Company	ING Strategic Allocation Moderate Portfolio, Class I	-	11,528
*	ING Life Insurance and Annuity Company	ING Strategic Allocation Conservative Portfolio, Class I	-	5,635
*	ING Life Insurance and Annuity Company	ING PIMCO Total Return Portfolio, Initial Class	-	5,483
*	ING Life Insurance and Annuity Company	ING Money Market Portfolio, Class I	-	1,829
	Total pooled separate accounts		-	435,453
		Contract with insurance company:		
*	ING Life Insurance and Annuity Company	ING Fixed Account - unallocated funds		28,760
			$ -	$ 464,213

* - Party-in-interest

** - Data not required - participant-directed investments

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

Financial Statements
and Supplementary Information
with
Report of Independent Auditors
For the Year Ended
December 31, 2009

CONTENTS

	Page
Report of independent auditors	2
Financial statements:	
Statements of net assets in liquidation available for benefits	3
Statement of changes in net assets available for benefits	4
Statement of changes in net assets in liquidation available for benefits	5
Notes to financial statements	6-11
Supplementary information:	
Schedule of assets (held at end of year)	12

Grossberg COMPANY LLP
CERTIFIED PUBLIC ACCOUNTANTS

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REPORT OF INDEPENDENT AUDITORS

To The Trustees and Participants
Storage Deluxe Management Company, LLC Retirement Plan

We were engaged to audit the accompanying statement of net assets in liquidation available for benefits of Storage Deluxe Management Company, LLC Retirement Plan at December 31, 2009, the related statements of changes in net assets available for benefits for the period from January 1, 2009 to October 15, 2009 and of changes in net assets in liquidation for the period October 16, 2009 to December 31, 2009 and the supplementary schedule of assets (held at end of year) at December 31, 2009. We were also engaged to audit the statement of net assets available for benefits at December 31, 2008. These financial statements and 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 information summarized in Notes 3 and 4, which was certified by ING Life Insurance and Annuity Company, the Trustee of the Plan, except for comparing the information with the related information included in the financial statements and the supplementary 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 a certification from the Trustee at 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.

On October 15, 2009 the Board of Directors of Storage Deluxe Management Company, LLC, the Plan's sponsor, voted to terminate the Plan. In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting to the liquidation basis for periods after October 15, 2009 (see Note 8).

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

Grossberg Company LLP

September 29, 2010
Bethesda, Maryland

ASSOCIATED WORLD-WIDE WITH JHI

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2009 AND 2008

	2009 (In liquidation)	2008
Assets:		
Investments, at fair value: (Notes 3 and 4)		
Pooled separate accounts	$ 435,453	$ 315,027
Contract with insurance company	28,760	3,298
Total assets	464,213	318,325
Liabilities:		
Excess contributions payable	22,914	24,486
Net assets available for benefits	$ 441,299	$ 293,839

See accompanying notes.

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE PERIOD JANUARY 1, 2009 - OCTOBER 15, 2009

Additions to net assets attributed to:	
Participants' contributions	$ 94,220
Net appreciation in fair value of investments	69,485
Total additions to net assets	163,705
Deductions from net assets attributed to:	
Benefits paid to participants	3,921
Corrective distributions	22,914
Administrative expenses (Note 7)	420
Total deductions from net assets	27,255
Net increase in net assets available for benefits	136,450
Net assets available for benefits, beginning of period	293,839
Net assets available for benefits, end of period	$ 430,289

See accompanying notes.

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

STATEMENT OF CHANGES IN NET ASSETS IN LIQUIDATION AVAILABLE FOR BENEFITS

FOR THE PERIOD OCTOBER 16, 2009 - DECEMBER 31, 2009

Additions to net assets in liquidation attributed to:	
Net appreciation in fair value of investments	$ 33,011
Deductions from net assets in liquidation attributed to:	
Benefits paid to participants	22,001
Net increase in changes in net assets in liquidation available for benefits	11,010
Net assets in liquidation available for benefits, beginning of period	430,289
Net assets in liquidation available for benefits, end of period	$ 441,299

See accompanying notes.

1. *Description of plan*

The following description of Storage Deluxe Management Company, LLC Retirement Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions which were in effect prior to termination of the Plan on October 15, 2009 (see Note 8).

General - The Plan is a defined contribution retirement plan covering all employees of Storage Deluxe Management Company, LLC (the "Company") age 21 or older who have completed either (a) one year of service, or, if earlier, (b) three consecutive months of full-time employment. Eligible employees may commence participation in the Plan on the first day of each calendar quarter that coincides with or next follows the date on which the employee satisfies the eligibility requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions - Each year, participants may contribute up to the lesser of 100% of pretax annual compensation, as defined, or the amount limited under the Internal Revenue Code ($16,500 for 2009). In addition, participants, aged 50 or older, may make a "catch-up" contribution of up to $5,500 for 2009. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of all contributions into various investment options offered by the Plan. Prior to termination the Plan offered 16 pooled separate accounts and a contract with an insurance company as investment options for participants. The Company may, at its sole discretion, make a matching contribution or non-elective contribution in any amount it deems appropriate. Non-elective contributions are allocable to participants based on compensation.

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

Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Because of the termination of the Plan in 2009, all participants became fully vested in the Company's contributions.

Participant loans - Participants may borrow from their accounts a minimum of $1,000 up to a maximum amount equal to the lesser of: (a) $50,000 or (b) 50% or their vested account balance. The loans are to be repaid over a period not to exceed five years, except for loan proceeds used to acquire a home, in which event the term is to be determined by the Plan Administrator considering the maturity dates quoted by representative commercial banks in the local area for a similar loan. The notes are secured by the balance in the participant's account and incur interest at 1% above the prime rate in effect at the inception of the loan. Principal and interest are paid ratably through bi-weekly payroll deductions. No loans were outstanding at December 31, 2009 or 2008.

Payment of benefits - Participants are entitled to 100% of their vested account balance upon termination of employment or upon attaining the normal retirement age of 65, disability or death. Benefit payments may be made in the form of a single, lump-sum payment.

2. *Accounting policies*

Basis of accounting - The accompanying financial statements are presented on the accrual basis of accounting for the period through the date of the Plan's termination (October 15, 2009); thereafter the Plan's financial statements are presented on the liquation basis of accounting.

Use of estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make certain estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results may differ from those estimates.

Valuation of investments - The Plan's investments in pooled separate accounts are stated at fair value as determined by the Plan's Trustee. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4).

Investment income - Purchases and sales of securities are recorded on the trade-date. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis of accounting. The net decline in the fair value of investments includes the Plan's gains and losses on investments bought and sold as well as investments held during the year.

Payment of benefits - Benefits are recognized when paid.

Administrative fees - For 2009, the Company funded the costs associated with administering the Plan.

3. *Investments (unaudited)*

At December 31, 2009 and 2008, the Plan's investments were held by the Trustee. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the Trustee as complete and accurate in accordance with Section 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 fair value of investments at December 31, 2009 and 2008, as reported by the Trustee, is summarized as follows:

	2009	*2008*
Pooled separate accounts	$ 435,453	$ 315,027
Contract with insurance company	28,760	3,298
	$ 464,213	$ 318,325

3. *Investments (unaudited) (continued)*

The Plan's contract with ING Life Insurance and Annuity Company represents an unallocated funding arrangement whereby the insurance company holds, in its general account, funds to be used to meet benefit and/or administrative payments as they come due or to purchase annuities for participants at retirement or on earlier termination of employment with vested benefits. The contract value approximates fair value.

Investments at December 31, 2009 and 2008, that represent 5% or more of the Plan's net assets consist of the following:

	2009	2008
Baron Asset Fund	$ 71,881	$ 54,384
ING Stock Index Portfolio, Institutional Class	73,822	49,490
Fidelity VIP Contrafund Portfolio, Initial Class	55,875	34,215
ING Russell Small Cap Index Portfolio - Class I	41,540	- (A)
ING JPMorgan Mid-Cap Value Portfolio, Initial Class	36,693	28,303
ING Index Plus SmallCap Portfolio, Class I	- (A)	28,075
ING Oppenheimer Global Portfolio, Initial Class	38,759	21,080
Washington Mutual Investors FundSM, Class R-3	19,156 (A)	15,425
ING Fixed Account	28,760	3,298 (A)

(A) - Represents less than 5% of Plan net assets at year end; presented for comparative purposes only.

For the year ended December 31, 2009, the net appreciation in fair value of investments (including investments bought, sold and held during the year) is attributable solely to pooled separate accounts.

4. *Fair value measurements (unaudited)*

The Plan's investments are reported at fair value in the accompanying financial statements. The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008.

	Total Fair Value	Level 2	Level 3
Assets at fair value as of December 31, 2009:			
Pooled separate accounts	$ 435,453	$ 435,453	$ -
Contract with insurance company	28,760	-	28,760
	$ 464,213	$ 435,453	$ 28,760

4. *Fair value measurements (unaudited) (continued)*

Assets at fair value as of December 31, 2008:	*Total Fair Value*	*Level 2*
Pooled separate accounts	$ 315,027	$ 315,027
Contract with insurance company	3,298	3,298
	$ 318,325	$ 318,325

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820 *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. The Plan used Levels 2 and 3 to value its investments as described below.

Level 2 fair value measurements - The fair value of pooled separate accounts and certain contracts with insurance companies were quoted from a pricing service based upon model - derived valuations whose inputs are directly observable or whose significant value drivers are indirectly observable.

Level 3 fair value measurements - Inputs to the valuation methodology are unobservable and significant to the fair value measurement. Level 3 fair value measurements were used to value certain contracts with insurance companies. Such measurements resulted in the value of the contracts being equal to the approximate amount that would have been paid if the contracts had been terminated as of the last day of the reporting period.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The following table provides further details of the Level 3 fair value measurements:

Level 3 assets: contract with insurance company	*2009*	*2008*
Transfer from level 2	$ 3,298	$ -
Realized gains (losses)	-	-
Unrealized gains (losses)	-	-
Purchases, sales, issuances and settlements (net)	25,462	-
	$ 28,760	$ -

5. *Reconciliation of financial statements to Form 5500*

The following reconciles net assets available for benefits at December 31, 2009 per the financial statements to the Form 5500:

Net assets available for benefits per the financial statements	$ 441,299
Add excess contributions payable	22,914
Net assets available for benefits per Form 5500	$ 464,213

The following reconciles the changes in net assets available for benefits per the financial statements to the Form 5500:

Net increase in net assets available for benefits per the financial statements	$ 147,460
Add excess contributions payable at December 31, 2009	22,914
Less excess contributions payable at December 31, 2008	(24,486)
Net increase in net assets available for benefits per Form 5500	$ 145,888

6. *Risks and uncertainties*

Although the Plan permits participants to invest in a variety of pooled separate accounts, most investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. Such changes could materially affect participants' account balances and the amounts reported in the accompanying financial statements.

Financial instruments, which potentially subject the Plan to concentrations of credit risk, consist primarily of investments in pooled separate accounts. The Plan has offered Plan participants investment options in various pooled separate accounts with differing investment objectives as a means of reducing the effects of such risks.

7. *Related party transactions*

The Company absorbed $18,224 of administrative expenses on behalf of the Plan in 2009.

The Plan's investments consist of pooled separate accounts, all of which are funds managed by ING Life Insurance and Annuity Company, the investment custodian of the Plan. Under ERISA, such transactions qualify as party-in-interest transactions.

8. *Plan termination*

By action of its Board of Directors, the Company terminated the Plan on October 15, 2009 and filed an application with the IRS for approval. Once IRS approval has been received, the net assets will be distributed to participants. Participants will have a choice of options regarding these distributions. Participants may elect a lump-sum payment or direct individual account rollover.

9. *Tax status*

The Plan is operating under an adoption agreement of a nonstandardized prototype plan structured by the Plan's third-party administrator. The Internal Revenue Service has determined and informed the Company by a letter dated January 11, 2002, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

FASB ASC 740, formerly "Fin 48" *Accounting for Uncertainty in Income Taxes*, an Interpretation of FASB Statement No. 109 *Accounting for Income Taxes*, applies to all entities, including employee benefit plans and became effective for the Plan in 2009.

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The Plan adopted the provisions of the FASB Accounting Standards Codification Topic 740 in 2009 and concluded that it had no applicability to its financial statements at and for the year ended December 31, 2009.

10. *Subsequent events*

In accordance with FASB Accounting Standards Codification Topic 855, *Subsequent Events*, the Plan has evaluated subsequent events through September 29, 2010, which is the date these financial statements were available to be issued. All subsequent events requiring recognition as of December 31, 2009 have been incorporated into these statements.

SUPPLEMENTARY INFORMATION

STORAGE DELUXE MANAGEMENT COMPANY, LLC RETIREMENT PLAN

EIN 52-2268553 - PLAN 001

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

DECEMBER 31, 2009

(a)	(b) Identity of Issue, Borrower Lessor or Simular Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost**	(e) Current Value
		Pooled separate accounts:		
*	ING Life Insurance and Annuity Company	ING Stock Index Portfolio, Institutional Class	$ -	$ 73,822
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		Contract with insurance company:		
*	ING Life Insurance and Annuity Company	ING Fixed Account - unallocated funds		28,760
			$ -	$ 464,213

* - Party-in-interest

** - Data not required - participant-directed investments