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;
- [X] 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
YOSEMITE MOTELS SALARY SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1990

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

1205 FREEDOM BLVD., SUITE 2
WATSONVILLE, CA 95076

2b Employer Identification Number (EIN)
77-0488685

2c Sponsor's telephone number
831-786-1980

2d Business code (see instructions)
721110

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.	03/08/2011	MAX BUSHMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	03/08/2011	MAX BUSHMAN
	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")
YOSEMITE MANAGEMENT GROUP, LLC

1205 FREEDOM BLVD., SUITE 2
WATSONVILLE, CA 95076

3b Administrator's EIN
77-0488685

3c Administrator's telephone number
831-786-1980

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
YOSEMITE MANAGEMENT GROUP, LLC

4b EIN
94-2422649

4c PN
001

5	Total number of participants at the beginning of the plan year	**5**	163
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**	116
b	Retired or separated participants receiving benefits	**6b**	6
c	Other retired or separated participants entitled to future benefits	**6c**	26
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	148
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	148
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	67
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:
2E 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)	X	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)	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)		___ **A** (Insurance Information)
(4)	X	**C** (Service Provider Information)
(5)		**D** (DFE/Participating Plan Information)
(6)	X	**G** (Financial Transaction Schedules)

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

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

A Name of plan	B Three-digit plan number (PN) ▶	
YOSEMITE MOTELS SALARY SAVINGS PLAN		001

C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)
YOSEMITE MANAGEMENT GROUP, LLC	77-0488685

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE G (Form 5500)

Department of Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Financial Transaction Schedules

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:
YOSEMITE MOTELS SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
YOSEMITE MANAGEMENT GROUP, LLC

D Employer Identification Number (EIN):
77-0488685

Part I Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible

Complete as many entries as needed to report all loans or fixed income obligations in default or classified as uncollectible. Check box (a) if obligor is known to be a party in interest. Attach Overdue Loan Explanation for each loan listed. See Instructions.

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐	COASTAL DEVELOPMENT CO., LLC STERLING PACIFIC LENDING, INC. WATSONVILLE, CA 95076	PII TRANSFERRED FUNDS FROM PLAN TO ACQUIRE TRUST DEED UNDER PLAN. TRANSFER REPAID W-INTEREST.

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest
52250	52250	5925	0	0	0

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor	(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items
☐		

	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

Part II Schedule of Leases in Default or Classified as Uncollectible

Complete as many entries as needed to report all leases in default or classified as uncollectible. Check box (a) if lessor or lessee is known to be a party in interest. Attach Overdue Lease Explanation for each lease listed. (See instructions)

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)
☐			

(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value	(d) Purchase price

(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

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
YOSEMITE MOTELS SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
YOSEMITE MANAGEMENT GROUP, LLC

D Employer Identification Number (EIN)
77-0488685

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	12034	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	82720	5587
(2) Participant contributions	1b(2)	19877	3641
(3) Other	1b(3)	103587	159998
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	599	28491
(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)	497500	465000
(7) Loans (other than to participants)	1c(7)	2676222	2822880
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	182311	240407
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(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	3574850	3726004
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	344034	355342
k	Total liabilities (add all amounts in lines 1g through1j)	1k	344034	355342
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	3230816	3370662

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)	70351	
	(B) Participants	2a(1)(B)	165147	
	(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)		235498
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	45	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)	280172	
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)	32368	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		312585
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	850	
	(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)		850
	(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)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	-11500	
(B) Other	2b(5)(B)	-8697	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-20197
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		528736
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	364195	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	33	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		364228
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	24662	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		24662
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		388890
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		139846
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) [X] Unqualified (2) [ ] Qualified (3) [ ] Disclaimer (4) [ ] Adverse

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

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

(1) Name: STOUGHTON, DAVIDSON (2) EIN: 94-2248751

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		103066
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		52250
e	Was this plan covered by a fidelity bond?	4e	X		4000000
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		3287880
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

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
YOSEMITE MOTELS SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
YOSEMITE MANAGEMENT GROUP, LLC

D Employer Identification Number (EIN)
77-0488685

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 41-6257133 94-2422649

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):

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

FINANCIAL STATEMENTS
December 31, 2009 and 2008
And
SUPPLEMENTAL INFORMATION
December 31, 2009

With

INDEPENDENT AUDITOR'S REPORT

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

December 31, 2009 and 2008

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TOM K. MCFERSON
J. SCOTT BRISTOL
SCOTT T. DYE
TRACY A. GARONE
JEFFREY K. TATSUMURA
DARRELL L. CARLIS

STOUGHTON DAVIDSON
ACCOUNTANCY CORPORATION

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(1970-2009)

INDEPENDENT AUDITOR'S REPORT

TO THE BOARD OF TRUSTEES
Yosemite Motels Salary Savings Plan and Trust
Watsonville, California

We have audited the accompanying statements of net assets available for benefits of Yosemite Motels Salary Savings Plan and Trust (the "Plan") as of December 31, 2009 and 2008, and the related statement of changes in net assets available for benefits for the year ended December 31, 2009. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

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

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Yosemite Motels Salary Savings Plan and Trust as of December 31, 2009 and 2008, and the changes in net assets available for benefits for the year ended December 31, 2009, in conformity with accounting principles generally accepted in the United States of America.

Our audits were performed for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedules of Nonexempt Transactions, Delinquent Participant Contributions, Assets Without a Readily Determinable Fair Value, Assets Held at Year End, Assets Acquired and Disposed of Within Year, and Reportable Transactions, together referred to as "Supplemental Information," are presented for the purpose of additional analysis and are not a required part of the basic financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. This supplemental information is the responsibility of the Plan's management. The supplemental information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Stoughton Davidson

Stoughton Davidson Accountancy Corporation

October 15, 2010

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2009 and 2008

ASSETS

	2009	2008
Cash (Note 2)	$ 28,491	$ 12,633
Wells Fargo Investments, at Fair Value (Notes 2, 3 and 6):		
Mutual Funds	239,418	181,142
Government Securities	989	1,169
	240,407	182,311
Trustee-Directed Investments, at Fair Value (Notes 2, 3 and 6):		
Trustee-Directed Investments (Note 11)	2,279,612	2,126,222
Real Estate Investment (Note 11)	465,000	497,500
Note Receivable	543,268	550,000
	3,287,880	3,173,722
Total Investments, at Fair Value	3,528,287	3,356,033
Contributions Receivable:		
Participant	3,641	19,877
Employer	5,587	82,720
	9,228	102,597
Other Receivables, Net (Notes 2 and 5)	159,998	103,587
Total Assets	3,726,004	3,574,850

LIABILITIES

Payables	7,343	3,819
Deferred Loan Origination Fees and Unearned Interest Income (Note 2)	28,193	13,771
Note Payable (Notes 4 and 6)	319,806	326,444
Total Liabilities	355,342	344,034
Net Assets Available for Benefits	$ 3,370,662	$ 3,230,816

See Independent Auditor's Report and Notes to the Financial Statements

Stoughton Davidson Accountancy Corporation

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Year Ended December 31, 2009

Additions to Net Assets Attributed to:		
Wells Fargo and Trustee-Directed Investment Income (Loss):		
Trustee-Directed Interest (Notes 2 and 3)	$	280,172
Net Depreciation in Fair Value of Trustee-Directed Investments (Note 3)		(71,928)
Wells Fargo Interest and Dividends (Notes 2 and 3)		895
Net Appreciation in Fair Value of Mutual Funds (Note 3)		63,231
Total Wells Fargo and Trustee-Directed Investment Income (Loss)		272,370
Real Estate Investment Income (Loss):		
Real Estate Rental Income (Note 3)		21,000
Real Estate Expenses (Note 3)		(24,662)
Net Depreciation in Fair Value of Real Estate (Notes 3, 6 and 11)		(32,500)
Total Real Estate Investment Income (Loss)		(36,162)
Other Income:		
Loan Origination Fee Income and Other Income		32,368
Total Other Income		32,368
Contributions:		
Participants		165,147
Employee Rollovers		-
Employer (Note 1)		70,351
Total Contributions		235,498
Total Additions		504,074
Deductions from Net Assets Attributed to:		
Benefits Paid Directly to Participants		364,228
Total Deductions		364,228
Net Increase		139,846
Net Assets Available for Benefits:		
Beginning of Year		3,230,816
End of Year	$	3,370,662

See Independent Auditor's Report and Notes to the Financial Statements
Stoughton Davidson Accountancy Corporation

Note 1 - Description of Plan

The following description of the Yosemite Motels Salary Savings Plan and Trust (the "Plan") provides only general information with regard to the Plan. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Yosemite Motels Salary Savings Plan and Trust is a defined contribution plan established for the benefit of eligible employees of Yosemite Management Group, LLC ("Employer") and Sterling Pacific Lending, Inc., as a member of a controlled group. The Plan was established on January 1, 1990. The terms of the Plan have since been amended effective January 1, 2009. The Plan is a self-administered plan and is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The Plan is exempt from federal and California taxes on income under the current provisions of the Internal Revenue Code and the California Revenue and Taxation Code, respectively. There were 148 and 170 participants in the Plan as of December 31, 2009 and 2008, respectively.

To become eligible, an employee must be at least 18 years old and have completed 3 calendar months of service. Once eligible to participate, employees can enter the Plan on the first day of the calendar month coincident with or following the satisfaction of the eligibility requirements. To receive an employer matching or discretionary contribution, employees must have completed 1,000 hours of service during the Plan year.

Administration

The Plan is administered by Yosemite Management Group, LLC and Sterling Pacific Lending, Inc. (the "Companies"). Professional fees related to the administration of the Plan are paid by the Companies.

Contributions

Participant contributions to the Plan are elective deferrals, wholly vested in, and invested in accordance with the participant's instructions. Participants may elect to make salary deferrals up to the maximum dollar amount allowed annually as defined by the Internal Revenue Code. During the 2009 Plan year, the Companies provided a matching contribution in an amount equal to 100.00% of the participant's elective contribution up to the first 3.50% of the participant's compensation and 50.00% of the participant's elective contribution of the next 2.00% of compensation. The Companies made matching contributions totaling $70,351 and $137,313 for the years ended December 31, 2009 and 2008, respectively.

(Continued)

Note 1 - Description of the Plan (Continued)

Participant Accounts

Separate accounts are maintained for each participant. Each participant's account is credited with the participant's contribution, the Companies' matching contribution, the Companies' discretionary employer contribution, forfeitures of terminated participants' non-vested account balances, and actual income or loss on investments allocated exclusively to the electing participant. The benefit to which a participant is entitled is the amount that can be provided from the participant's account.

Vesting

Participant and safe harbor contributions and earnings thereon are fully vested at all times. Participants are 100% vested upon reaching age 65, upon death, in the event they become permanently disabled, or upon Plan termination, regardless of the participant's vested percentage at the time of termination. If employment terminates by early retirement, resignation, or discharge prior to normal retirement age, participants will be vested and have a non-forfeitable interest in a percentage of their employer matching and discretionary account determined by the following:

Years of Service	Vesting Percentage
1	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

For the years ended December 31, 2009 and 2008, all employer contributions were safe harbor contributions and were, therefore, fully vested.

Payments of Benefits

Upon termination of employment or retirement, participants may elect to receive a distribution of their vested interest in their account as a lump-sum payment or they may select an alternative method of payment if permitted by the Plan at the time of the distribution. Terminated employees with account balances over $5,000 may request the Plan to distribute their benefit before their retirement date. For terminated employees with account balances under $5,000, the Plan administrator may distribute the benefit without the consent of the terminated employee. Under circumstances defined by the Internal Revenue Service (IRS), the Plan allows, subject to approval by the Companies, a hardship withdrawal of an employee's account due to an immediate and heavy financial need.

(Continued)

Note 1 - Description of the Plan (Continued)

Payments of Benefits (Continued)

In the event the Employer elects to terminate the Plan or discontinue operation of its business, the entire interest of the participants shall vest 100% immediately and be non-forfeitable. Amounts allocated to participants who have elected to terminate from the Plan in current and prior years, but have not been paid were $878,881 and $756,178 as of December 31, 2009 and 2008, respectively.

Loans

Effective January 1, 2009, the Plan permits qualified disaster recovery assistance distributions taken as loans in amounts equal to the lesser of $100,000 or 100% of the Participant's vested account balance. There were no such distributions taken as loans during fiscal year 2009.

Forfeitures

Forfeitures are amounts which could not be paid to terminated participants, as terminated participants were not 100% vested when separating service with the Employer. Forfeitures of employer discretionary contributions will be applied to reduce administrative expenses of the Plan, then any remaining forfeitures will supplement non-elective contributions and supplement matching contributions. Forfeitures of matching contributions will be applied to reduce administrative expenses of the Plan, then any remaining forfeitures will reduce matching contributions, reduce qualified non-elective contributions and reduce non-elective contributions. In order to share in the allocation of forfeitures, a participant must be eligible to share in employer contributions for the Plan year and be employed on the date forfeitures are allocated. There were no forfeitures of non-vested participant accounts for the years ended December 31, 2009 or 2008.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The Plan's financial statements are prepared using the accrual method of accounting in accordance with generally accepted accounting principles.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions and deductions during the reporting period. Actual results could differ from those estimates.

(Continued)

Note 2 - Summary of Significant Accounting Policies (Continued)

Cash

At December 31, 2009 and 2008, $32,470 and $12,034, respectively, of the Plan's cash balance was maintained within a non-interest bearing account. At December 31, 2009 and 2008, the Plan did not have any cash balances that were not federally insured.

Notes and Allowance for Delinquent Receivables

It is the policy of the Plan to review the outstanding receivables periodically, as well as the bad debt write-off experienced in the past, and establish an allowance for doubtful accounts for uncollectible amounts. Delinquent receivables are determined based on how recently payments have been received. If accounts become uncollectible, they will be charged to operations when the determination is made. Management has determined the need for an allowance for accrued interest receivable in the amount of $30,615 as of December 31, 2009, which is included within Other Receivables, Net. Management did not consider an allowance for accrued interest receivable necessary as of December 31, 2008.

If events or changes in circumstances cause the Plan to have serious doubts about the collectability of contractual payments, a note may be categorized as impaired and interest no longer accrued. Any subsequent payments on impaired notes are applied to reduce the outstanding note balances including previously accrued interest and advances. When notes are deemed impaired, the allowance for note losses is updated to reflect the change in the valuation of the collateral security. For the year ended December 31, 2009, management recorded impairment losses of $41,313, due to reductions in the valuation of collateral security, which served to reserve against individual loan balances included within Trustee-Directed Investments. Management did not record any impairment losses for the year ended December 31, 2008.

Valuation of Investments

Wells Fargo Investments:
The Plan's mutual funds and government securities investments are stated at the fair value of all reported assets and liabilities that represent financial instruments (none of which are held for trading purposes) and approximate the carrying value of such amounts.

Trustee-Directed Investments:
The Plan holds investments in notes receivable, which are secured by deeds of trust, from various entities. These notes receivable were first issued during fiscal year 2006. The investments were tested for impairment using the fair value of the collateral method. This method of valuation was used because the notes are collateral-dependent.

(Continued)

Note 2 - Summary of Significant Accounting Policies (Continued)

Valuation of Investments (Continued)

Real Estate Investment:
During the year ended December 31, 2008, the Plan foreclosed on two properties, each of which served as collateral for a loan. One property was sold during 2008, while the other was held as a real estate investment through December 31, 2009, which generated rental income during fiscal years 2008 and 2009.

Other Receivables and Deferred Loan Origination Fees

Other receivables consists of accrued interest receivable and accrued loan origination fees receivable. Interest income on notes receivable is accrued based on the outstanding principal amount of loans using the interest method. Loan origination fees are deferred and recognized over the life of the loan as an adjustment to the interest rate.

Payment of Benefits

Benefits are recorded when paid.

Note 3 - Investments

The Plan's investments include Mutual Funds and a Government Security Fund through an investment arrangement with Wells Fargo Bank (Wells Fargo), as well as Trustee-Directed Investments, which consist of collateralized notes receivable and a real estate investment. By direction of employees, all contributions to the Plan are invested by the Employer. Plan participants may allocate their account balances between 12 mutual funds, one government securities fund, and one trustee-directed investment account. The mutual funds and government securities fund are held by the ancillary trustee, Wells Fargo, while the trustee-directed investments are held by the Plan. The investments held with Wells Fargo represent 6.5% and 5.1% of the Plan's assets as of December 31, 2009 and 2008, respectively. Investments in Trustee-Directed Investments account represent 92.5% and 88.8% of the Plan's assets as of December 31, 2009 and 2008.

The 2009 and 2008 Wells Fargo investments are certified to the Plan by Wells Fargo as complete and accurate.

(Continued)

NOTES TO THE FINANCIAL STATEMENTS
December 31, 2009 and 2008

Note 3 - Investments (Continued)

The following presents the fair value of the Wells Fargo investments and the Trustee-Directed investments at December 31, 2009 and 2008:

	2009	2008
Investments at Fair Value as Determined by Quoted Market Price:		
Shares of Mutual Funds	$ 239,418	$ 181,142
Government Security Fund	989	1,169
Total Wells Fargo Investments at Fair Value	240,407	182,311
Trustee-Directed Investments at Fair Value:		
Trustee-Directed Investments (Note 2)	2,279,612	2,126,222
Real Estate Investment (Note 2)	465,000	497,500
Note Receivable (Note 2)	543,268	550,000
Total Investments	$3,528,287	$3,356,033

During the year ended December 31, 2009, the Plan's Wells Fargo and Trustee-Directed investments (including investments both sold and held during the year) earned income (incurred loss) as follows:

Investments at Fair Value as Determined by Quoted Market Price & Trustee-Directed Investments:	
Trustee-Directed Interest Income	$ 280,172
Net Depreciation in Fair Value of Trustee-Directed Investments	(71,928)
Wells Fargo Interest and Dividends	895
Net Appreciation in Fair Value of Mutual Funds	63,231
Total Wells Fargo and Trustee-Directed Investment Income	$ 272,370

(Continued)

Note 3 - Investments (Continued)

During the year ended December 31, 2008, the Plan foreclosed on two properties, each of which served as collateral for a loan. The revenues, expenses, and appreciation (depreciation) associated with these properties are as follows for the year ended December 31, 2009:

Real Estate Investments at Estimated Fair Value:

Real Estate Rental Income	$21,000
Real Estate Expenses	(24,662)
Net Depreciation in Fair Value of Real Estate	(32,500)
Total Real Estate Investment Income (Loss)	($36,162)

During fiscal year 2009, the Plan incurred expenses associated with the ownership, rental, and maintenance of the real estate investment property. The real estate expenses totaling $24,662 for the year ending December 31, 2009 were comprised of property taxes, interest expense, as well as other maintenance and ownership-related expenses.

Investments representing five percent or more of the Plan's net assets at December 31, 2009 are as follows:

	2009
Trustee-Directed Investments Separated Accounts	
Note Receivable – Samuel Krikorian	$200,000
Note Receivable – Dry Creek Land, LP	178,100
Note Receivable – David Muller	264,000
Note Receivable – William McClure	200,000
Note Receivable – Derrick & Neil Veik	305,250
Other Investments and Receivables	
Real Estate Investment – Antioch, California	465,000
Note Receivable – Antonio Silva	543,268

(Continued)

Note 3 - Investments (Continued)

Investments representing five percent or more of the Plan's net assets at December 31, 2008 are as follows:

	2008
Trustee-Directed Investments Separated Accounts	
Note Receivable – Samuel Krikorian	$200,000
Note Receivable – Dry Creek Land, LP	178,100
Note Receivable – David Muller	264,000
Note Receivable – William McClure	200,000
Note Receivable – Peter Cimino	277,000
Other Investments and Receivables	
Real Estate Investment – Antioch, California	497,500
Note Receivable – Antonio Silva	550,000

Note 4 - Note Payable

During the year ended December 31, 2008, the Companies assumed a note payable to Bank of America (formerly Countrywide Lending) in conjunction with the foreclosure of real estate that served as collateral for a loan (Note 2). In foreclosing on the real estate, the Plan assumed a note payable bearing interest at 5.25%, payable in monthly installments of $1,966, with a lump sum payment of $304,333 due April 17, 2012. The note payable is secured by the real estate. The balance of the note payable was $319,806 and $329,630 at December 31, 2009 and 2008, respectively.

Repayment of the notes payable for the years ending December 31 is as follows:

2010	$ 6,995
2011	7,371
2012	305,440
Total	$ 319,806

Interest expense for the year ended December 31, 2009 associated with the note payable totaled $16,952 and is included in real estate expenses in the statement of changes in net assets available for benefits.

Note 5 - Related Parties

Sterling Pacific Lending, Inc. (hereafter "Sterling"), a company held under common ownership as Yosemite Management Group, LLC, and whose employees are eligible to participate in the Plan (as such, Sterling would be considered a party-in-interest), is a real property lender specializing in commercial and residential loans. Beginning fiscal year 2006, Sterling began servicing certain of the Companies' trustee-directed investments to facilitate payment collection, though no fee is charged for loan servicing.

During fiscal year 2007, the Plan loaned money to Dry Creek Land, LP and DCL Investments, LLC (collectively referred to as "Dry Creek" hereafter). During the year ended December 31, 2008, the ultimate owner of Dry Creek had entered into an operating agreement with Coastal Development Company, LLC to operate three limited liability companies. Coastal Development Company, LLC shares the same ownership as Yosemite Management Group, LLC. Ownership of the three limited liability companies was treated as 50/50 until the operating agreements were finalized and executed in October 2008, at which time it was agreed that the owner of Dry Creek would have a 50.5% profits interest and Coastal Development Company, LLC would have a 49.5% profits interest.

Effective March 19, 2009, Coastal Development Company, LLC acquired the Dry Creek interests in two of the three limited liability companies in which they shared profits interest; as of December 31, 2009, Coastal Development Company, LLC and Dry Creek share profits interest in one limited liability company.

During the years ended December 31, 2009 and 2008, the Plan loaned $0 and $0 to Dry Creek and earned $56,298 and $80,527 of interest income related to loans entered into in prior years, respectively. At December 31, 2009 and 2008, notes receivable from Dry Creek were $523,700 and $523,700, respectively. During the year ended December 31, 2008, the Dry Creek loans came due; however, as of December 31, 2009 the Plan had not been repaid. The Plan continues to accrue interest on these loans, as the Plan anticipates full repayment; however, where the collateral securing the loans has a fair value less than the carrying value of the loans, including the unpaid accrued interest, a reserve is recorded, which is included within Other Receivables, Net. At December 31, 2009 and 2008, accrued interest receivable from Dry Creek was $105,920 and $70,910, respectively.

Note 6 - Fair Value of Financial Instruments

During 2006, the Financial Accounting Standards Board (hereafter "FASB") issued Statement of Financial Accounting Standards No. 157, *Fair Value Measurements* (Accounting Standards Codification (hereafter "ASC") 820, *Fair Value Measurements and Disclosures*), which defines fair value, establishes guidelines for measuring fair value and expands disclosures regarding fair value measurements. ASC 820 does not require any new fair value measurements but rather eliminates inconsistencies in guidance found in various prior accounting pronouncements. To increase consistency and comparability in fair value measurements, ASC 820 establishes a fair value hierarchy based on the inputs used in valuation techniques.

(Continued)

Note 6 - Fair Value of Financial Instruments (Continued)

There are three levels to the fair value hierarchy of inputs to fair value, as follows:

Level 1:
Observable inputs that reflect quoted prices (unadjusted) for identical assets or liabilities in active markets.

Level 2:
Inputs reflect quoted prices for identical assets or liabilities in markets that are not active; quoted prices for similar assets or liabilities in active markets; inputs other than quoted prices that are observable for the assets or liabilities; or inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3:
Unobservable inputs reflecting the Plan's own assumptions incorporated in valuation techniques used to determine fair value. These assumptions are required to be consistent with market participant assumptions that are reasonably available.

The Plan adopted ASC 820 effective January 1, 2008, for all financial assets and liabilities that are recognized or disclosed at fair value on a recurring basis (at least annually). The Plan measures and reports all financial assets and liabilities at fair value on a recurring basis, including its Well-Fargo investments, Trustee-Directed investments, Real Estate investment, note receivable, and note payable.

(Continued)

Note 6 - Fair Value of Financial Instruments (Continued)

The following tables summarize the Plan's financial assets and liabilities measured at fair value on a recurring basis, by level within the fair value hierarchy:

	For the Year Ended December 31, 2009			
	Level 1	Level 2	Level 3	Total
Assets				
Wells Fargo Investments	$ 240,407	$ -	$ -	$ 240,407
Trustee-Directed Investments	-	-	2,279,612	2,279,612
Real Estate Investment	-	-	465,000	465,000
Note Receivable	-	-	543,268	543,268
Total Financial Assets	$ 240,407	$ -	$ 3,287,880	$ 3,528,287
Liabilities				
Note Payable	$ -	$ -	$ 319,806	$ 319,806
Total Financial Liabilities	$ -	$ -	$ 319,806	$ 319,806

	For the Year Ended December 31, 2008			
	Level 1	Level 2	Level 3	Total
Assets				
Wells Fargo Investments	$ 182,311	$ -	$ -	$ 182,311
Trustee-Directed Investments	-	-	2,126,222	2,126,222
Real Estate Investment	-	-	497,500	497,500
Note Receivable	-	-	550,000	550,000
Total Financial Assets	$ 182,311	$ -	$ 3,173,722	$ 3,356,033
Liabilities				
Note Payable	$ -	$ -	$ 326,444	$ 326,444
Total Financial Liabilities	$ -	$ -	$ 326,444	$ 326,444

(Continued)

NOTES TO THE FINANCIAL STATEMENTS
December 31, 2009 and 2008

Note 6 - Fair Value of Financial Instruments (Continued)

The following table summarizes the change in the fair value of the Plan's Level 3 assets and liabilities for the years ended December 31, 2009 and 2008:

	For the Year Ended December 31, 2009					
	Trustee-Directed Investments	Real Estate Investment	Note Receivable	Total Level 3 Assets	Note Payable	Total Level 3 Liabilities
Balance at December 31, 2008	$ 2,126,222	$ 497,500	$ 550,000	$ 3,173,722	$ 326,444	$ 326,444
Purchases	471,703	-	-	471,703	-	-
Settlements	(277,000)	-	(6,732)	(283,732)	(6,638)	(6,638)
Gains or Losses	(41,313)	(32,500)	-	(73,813)	-	-
Balance at December 31, 2009	$ 2,279,612	$ 465,000	$ 543,268	$ 3,287,880	$ 319,806	$ 319,806

	For the Year Ended December 31, 2008					
	Trustee-Directed Investments	Real Estate Investment	Note Receivable	Total Level 3 Assets	Note Payable	Total Level 3 Liabilities
Balance at December 31, 2007	$ 2,432,550	$ -	$ -	$ 2,432,550	$ -	$ -
Purchases	863,610	560,913	550,000	1,974,523	330,151	330,151
Settlements	(1,169,938)	-	-	(1,169,938)	(3,707)	(3,707)
Gains or Losses	-	(63,413)	-	(63,413)	-	-
Balance at December 31, 2008	$ 2,126,222	$ 497,500	$ 550,000	$ 3,173,722	$ 326,444	$ 326,444

The fair value of other financial instruments, carried at cost in the balance sheet, including contributions receivable and accounts payable, approximate the carrying amount, which is the amount for which the instrument could be exchanged in a current transaction between willing parties.

Note 7 - Prohibited Transactions

During the year ended December 31, 2008, the Plan entered into a series of prohibited transactions, as is defined by ERISA section 1106. The prohibited transactions consisted of multiple nonexempt party-in-interest transactions and untimely deposits. The Plan entered into nonexempt party-in-interest transactions when it exchanged cash with a related party for the acquisition of a portion of a trust-deed investment. Collectively, the Plan acquired a $150,000 investment. The Plan also made a total of $147,110 of untimely deposits.

During the year ended December 31, 2009, the Plan entered into a series of prohibited transactions, as is defined by ERISA section 1106. The prohibited transactions consisted of multiple nonexempt party-in-interest transactions and untimely deposits. The Plan entered into nonexempt party-in-interest transactions when it advanced Plan monies to a related party in multiple transactions totaling $52,250. See details on Schedule G in the Supplemental Information section of this report. The Plan also made a total of $103,066 of untimely deposits. The prohibited transactions are detailed in the supplemental schedules to the financial statements.

Note 8 - ERISA Bonding Requirements

ERISA bonding requirements state that a Plan must be bonded for the greater of: 1) 10% of the value of Plan assets, or 2) 100% of the value of non-qualified Plan assets. Non-qualified Plan assets generally include assets that are not publicly traded and/or do not have a readily determinable market value. As the Plan held non-qualified Plan assets in the form of trust-deed investments totaling $3,173,722 at December 31, 2008, the Plan should have had fidelity bond coverage of at least $3,173,722 as of January 1, 2009. However, the then-current fidelity bond coverage in place had a maximum limit of $300,000. Plan management became aware of the fidelity bond coverage deficiency during fiscal year 2009, at which time Plan management began negotiations with insurance carriers to obtain a greater fidelity bond policy. During this time, the Plan's then-current fidelity insurance expired (May 2009). During August 2009, the Plan acquired new fidelity bond insurance sufficient for its non-qualified asset values.

Note 9 - Federal Income Tax Status

The Internal Revenue Service has determined and informed the Plan by a letter dated February 14, 2001, that the Plan is qualified and the trust established under the Plan is tax-exempt, and the related trust is designed in accordance with applicable sections of the Internal Revenue Code (the "Code"). The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code.

Note 10 - Plan Termination

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

NOTES TO THE FINANCIAL STATEMENTS
December 31, 2009 and 2008

Note 11 - Subsequent Events

Subsequent to year end, the Plan commenced foreclosure on a property serving as collateral for a loan with a principal balance of $200,000 as of December 31, 2009. Plan management anticipates the sale of the property and expects to realize the total amount that was receivable as of December 31, 2009.

Subsequent to year end, the Plan foreclosed on a property serving as collateral for a loan with a principal balance of $85,500 as of December 31, 2009. Plan management anticipates the sale of the property and expects to realize the total amount that was receivable as of December 31, 2009.

Subsequent to year end, the Plan entered into a real estate purchase agreement to sell the real estate investment property in Antioch, California. The purchase price is set at $465,000; accordingly, the Plan reduced the value of the real estate investment to $465,000 as of December 31, 2009.

The Plan's management has reviewed the results of the Plan's operations for the period of time from its year ended December 31, 2009 through the date of the independent auditor's report, which was the date the financial statements were available to be issued. The Plan's management has determined that no adjustments are necessary to the amounts reported in the accompanying financial statements, nor have any subsequent events occurred other than that reported above, the nature of which would require disclosure.

SUPPLEMENTAL INFORMATION

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE G - FORM 5500)
December 31, 2009

Schedule G, Part III – Schedule of Nonexempt Transactions

(a) Identity of party involved

Coastal Development Company, LLC (hereafter, Coastal)
Sterling Pacific Lending, Inc. (hereafter, Sterling)

(b) Relationship to plan, employer, or other party-in-interest

The companies referenced in (a) above share in common ownership as Yosemite Management Group, LLC. Also, certain plan fiduciaries hold executive management positions with each of the identified parties-in-interest in (a) above. Further, Sterling employees are eligible to participate within the Plan.

(c) Description of transactions including maturity date, rate of interest, collateral, par, or maturity value

The parties in (a) were participants in transfers of funds from the Plan during fiscal year 2009. The funds transferred to Sterling were subsequently used to acquire a fractional interest in a trust deed investment for the Plan for which the Plan received a loan fee; the funds advanced to Coastal were subsequently repaid with interest. Per Plan management, the advances to Sterling were intended, from the outset, to purchase the incrementally funded fraction trust deed, but were not recorded properly. Also, per Plan management, the advance to Coastal was an error, that when discovered, was returned with interest.

(d) Purchase price

Coastal:	$ 17,500
Sterling:	34,750
	$ 52,250

(e) Selling price

Coastal:	$ 17,860
Sterling:	40,315
	$ 58,175

(f) Lease rental

N/A

(g) Expenses incurred in connection with transaction

N/A

(h) Cost of asset

Coastal:	$ 17,500
Sterling:	34,750
	$ 52,250

(i) Current value of asset

Coastal:	$ 17,860
Sterling:	40,315
	$ 58,175

(j) Net gain or (loss) on each transaction

Coastal:	$ 360
Sterling:	5,565
	$ 5,925

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4a – Schedule of Delinquent Participant Contributions

Pay Period Date	Contribution Date	Contribution Amount
01/02/2009	04/08/2009	$ 3,819.50
01/05/2009	01/28/2009	2,013.85
01/16/2009	04/08/2009	3,819.50
01/20/2009	01/28/2009	1,625.55
01/30/2009	06/02/2009	3,819.50
02/05/2009	02/24/2009	1,700.55
02/13/2009	04/08/2009	3,874.50
02/27/2009	05/19/2009	3,974.50
03/05/2009	04/08/2009	1,877.82
03/20/2009	04/24/2009	1,866.48
03/27/2009	05/19/2009	3,824.50
04/03/2009	04/24/2009	2,033.65
04/10/2009	05/19/2009	3,904.50
04/24/2009	06/02/2009	4,189.50
05/05/2009	05/26/2009	1,881.90
05/08/2009	05/19/2009	4,284.50
05/20/2009	06/03/2009	1,895.04
05/22/2009	06/01/2009	4,284.50
06/19/2009	06/30/2009	4,284.50
07/05/2009	08/06/2009	1,861.44
07/17/2009	08/04/2009	4,469.50
07/20/2009	08/06/2009	1,876.50
08/05/2009	08/20/2009	1,885.44
08/14/2009	08/31/2009	4,649.50
08/20/2009	09/04/2009	1,862.46
09/05/2009	09/16/2009	1,912.20
09/11/2009	09/16/2009	4,649.50
09/25/2009	09/30/2009	4,764.50
10/23/2009	10/30/2009	4,669.50
11/20/2009	12/02/2009	4,139.50
12/04/2009	12/15/2009	4,059.50
12/31/2009	01/05/2010	3,292.00
Total Delinquent Participant Contributions		$103,065.88

Corrective Action Measures:

The amounts in question were remitted to the Plan, with interest on lost earnings, as soon as the oversight was discovered. During the year ended December 31, 2009, procedures were put into place to monitor the timely remittance of all future contribution amounts.

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4g – Schedule of Assets Without a Readily Determinable Fair Value

Trustee-Directed Investments

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Fair Value
DCL Investments, LLC	Note Receivable – Interest-only Pmts 08/15/06 – 9.00% - Real Estate – Par	$ 110,000
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 06/14/07 – 9.00% - Real Estate – Par	52,500
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 09/30/08 – 9.00% - Real Estate – Par	178,100
Gopal Das	Note Receivable – Interest-only Pmts 01/01/09 – 11.75% - Real Estate – Par	75,000
Daniel Viek	Note Receivable – Interest-only Pmts 02/01/09 – 12.50% - Real Estate – Par	10,000
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 03/01/08 – 9.00% - Real Estate – Par	56,250
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 03/01/08 – 9.00% - Real Estate – Par	21,200
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 04/01/08 – 9.00% - Real Estate – Par	47,900
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 04/01/08 – 9.00% - Real Estate – Par	57,750
Massey Butler	Note Receivable – Interest-only Pmts 12/01/09 – 7.00% - Real Estate – Par	79,000
Samuel Krikorian	Note Receivable – Interest-only Pmts 01/01/09 – 11.5% - Real Estate – Par	200,000
Subtotal Carried Forward		$ 887,700

(Continued)

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4g – Schedule of Assets Without a Readily Determinable Fair Value (Continued)

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Fair Value
Subtotal Brought Forward		$ 887,700
David Muller	Note Receivable – Interest-only Pmts 07/01/09 – 13.50% - Real Estate – Par	264,000
William McClure	Note Receivable – Interest-only Pmts 03/01/09 – 12.00% - Real Estate – Par	200,000
Michael Terrance Miller and Jennifer Alice Miller	Note Receivable – Interest-only Pmts 10/01/10 – 7.00% - Real Estate – Par	166,987
Ignacio Serrano Jr., Santiago Saldate, and Amy Saldate	Note Receivable – Interest-only Pmts 01/01/10 – 12.50% - Real Estate – Par	59,000
Juanita Peterson, Santiago Saldate, and Amy Saldate	Note Receivable – Interest-only Pmts 01/01/12 – 15.00% - Real Estate – Par	15,600
Dwight Hannah	Note Receivable – Interest-only Pmts 07/01/09 – 11.50% - Real Estate – Par	119,114
Delmas Tower, LLC	Note Receivable – Interest-only Pmts 06/01/09 – 15.00% - Real Estate – Par	75,073
Edinburgh Development Group, LTD	Note Receivable – Interest-only Pmts 07/01/10 – 11.00% - Real Estate – Par	45,000
Double RD Investments	Note Receivable – Interest-only Pmts 05/01/10 – 12.25% - Real Estate – Par	60,922
Derrick and Neil Veik	Note Receivable – Interest-only Pmts 09/01/11 – 11.00% - Real Estate – Par	305,250
O&S Investment Group	Note Receivable – Interest-only Pmts 12/31/11 – 13.00% - Real Estate – Par	80,966
Total Trustee-Directed Investments		$ 2,279,612

(Continued)

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4g – Schedule of Assets Without a Readily Determinable Fair Value (Continued)

Real Estate Investment

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Fair Value
Real Estate Investment	Residential Real Estate Investment – Antioch, California	$ 465,000
Total Real Estate Investment		$ 465,000

Note Receivable

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Fair Value
Antonio Silva and Maria Brazil	Note Receivable – Interest-only Pmts 11/01/13 – 7.50% - Real Estate – Par	$ 543,268
Total Note Receivable		$ 543,268

Total Fair Value of Assets Without a Readily Determinable Fair Value $ 3,287,880

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4i – Schedule of Assets Held at Year End

(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Wells Fargo Bank	Stable Return Fund	$ 11,634	$ 14,841
Wells Fargo Bank	Asset Allocation Fund	3,081	3,092
Wells Fargo Bank	S & P 500 Index Fund	2,004	1,964
Wells Fargo Bank	T Rowe Price Mid Cap Growth Fund	62,102	66,455
Wells Fargo Bank	T Rowe Price Science & Technology Fund	10,195	11,351
Wells Fargo Bank	T Rowe Price Small Capitalization Stock Fund	92,334	93,714
Wells Fargo Bank	Vanguard Quantitative Portfolios Growth and Income Fund	18,166	14,479
Wells Fargo Bank	Vanguard Total Stock Market Index Fund	8,251	8,211
Wells Fargo Bank	Vanguard International Growth Fund	11,517	10,379
Wells Fargo Bank	Vanguard U.S. Growth Fund	498	443
Wells Fargo Bank	Vanguard Long-Term Treasury Fund	1,037	989
Wells Fargo Bank	T Rowe Price Global Stock Fund	14,511	14,489
Wells Fargo Bank	Cash and Cash Equivalents	602	602
Subtotals Carried Forward		$235,932	$241,009

(Continued)

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

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

(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Subtotals Brought Forward		$ 235,932	$ 241,009
Premier Valley Bank	Cash & Cash Equivalents	27,889	27,889
DCL Investments, LLC	Note Receivable – Interest-only Pmts 08/15/06 – 9.00% - Real Estate – Par	110,000	110,000
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 06/14/07 – 9.00% - Real Estate – Par	52,500	52,500
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 09/30/08 – 9.00% - Real Estate – Par	178,100	178,100
Gopal Das	Note Receivable – Interest-only Pmts 01/01/09 – 11.75% - Real Estate – Par	75,000	75,000
Daniel Viek	Note Receivable – Interest-only Pmts 02/01/09 – 12.50% - Real Estate – Par	10,000	10,000
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 03/01/08 – 9.00% - Real Estate – Par	56,250	56,250
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 03/01/08 – 9.00% - Real Estate – Par	21,200	21,200
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 04/01/08 – 9.00% - Real Estate – Par	47,900	47,900
Dry Creek Land, LP	Note Receivable – Interest-only Pmts 04/01/08 – 9.00% - Real Estate – Par	57,750	57,750
Massey Butler	Note Receivable – Interest-only Pmts 12/01/09 – 7.00% - Real Estate – Par	79,000	79,000
Subtotals Carried Forward		$951,521	$ 956,598

(Continued)

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

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

(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Subtotals Brought Forward		$951,521	$ 956,598
Samuel Krikorian	Note Receivable – Interest-only Pmts 01/01/09 – 11.50% - Real Estate – Par	200,000	200,000
David Muller	Note Receivable – Interest-only Pmts 07/01/09 – 13.50% - Real Estate – Par	264,000	264,000
William McClure	Note Receivable – Interest-only Pmts 03/01/09 – 12.00% - Real Estate – Par	200,000	200,000
Michael Terrance Miller and Jennifer Alice Miller	Note Receivable – Interest-only Pmts 10/01/10 – 7.00% - Real Estate – Par	166,987	166,987
Ignacio Serrano Jr., Santiago Saldate, and Amy Saldate	Note Receivable – Interest-only Pmts 01/01/10 – 12.50% - Real Estate – Par	59,000	59,000
Juanita Peterson, Santiago Saldate, and Amy Saldate	Note Receivable – Interest-only Pmts 01/01/12 – 15.00% - Real Estate – Par	15,600	15,600
Dwight Hannah	Note Receivable – Interest-only Pmts 07/01/09 – 11.50% - Real Estate – Par	150,000	119,114
Antonio Silva and Maria Brazil	Note Receivable – Interest-only Pmts 11/01/13 – 7.50% - Real Estate – Par	543,268	543,268
Delmas Tower, LLC	Note Receivable – Interest-only Pmts 06/01/09 – 15.00% - Real Estate – Par	85,500	75,073
Edinburgh Development Group, LTD	Note Receivable – Interest-only Pmts 07/01/10 – 11.00% - Real Estate – Par	45,000	45,000
Double RD Investments	Note Receivable – Interest-only Pmts 05/01/10 – 12.25% - Real Estate –Par	60,922	60,922
Subtotals Carried Forward		$2,741,798	$2,705,562

(Continued)

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

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

(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Subtotals Brought Forward		$2,741,798	$2,705,562
Derrick and Neil Veik	Note Receivable – Interest-only Pmts 09/01/11 – 11.00% - Real Estate –Par	305,250	305,250
O&S Investment Group	Note Receivable – Interest-only Pmts 12/31/11 – 13.00% - Real Estate –Par	80,966	80,966
Real Estate Investment	Residential Real Estate Investment – Antioch, California	560,913	465,000
Various Borrowers	Accrued Interest Receivable	190,613	159,998
Total Assets Held for Investment Purposes		$3,879,540	$3,716,776

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4i – Schedule of Assets Acquired and Disposed of Within Year

(a) Identity of Issue, Borrower, Lessor or Similar Party	(b) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(c) Cost of Acquisitions	(d) Proceeds of Dispositions

The Plan did not purchase any investment assets during the year ended December 31, 2009 that were also sold during the year ended December 31, 2009.

YOSEMITE MOTELS SALARY SAVINGS PLAN AND TRUST

Watsonville, California

EIN 77-0488685 - Plan Number 001

FINANCIAL SCHEDULES (SCHEDULE H - FORM 5500)
December 31, 2009

Schedule H, line 4j – Schedule of Reportable Transactions

a) Identity of Party Involved	b) Description of Asset	c) Purchase Price	d) Selling Price	e) Lease Rental	f) Expense incurred with Transaction	g) Cost of Asset	h) Current Value of Asset on Transaction Date	i) Net Gain or (Loss)
Peter Cimino	Note Receivable – Interest-only Pmts 12.50% - 07/01/09	277,000	277,000	-	-	277,000	277,000	-
Derrick and Neil Veik	Note Receivable – Interest-only Pmts 11.00% - 09/01/11	305,250	-	-	-	305,250	305,250	-

Schedule H, line 4j
Schedule of Reportable Transactions.

Name of Employer: YOSEMITE MANAGEMENT GROUP, LLC

Employer identification number: 77-0488685

Plan Year 01/01/2009 to 12/31/2009

Three-digit plan number ▶ 001

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
P Cimino	Note Rcv-Int only,12.5%	277000	277000			277000	277000	
Derrick & Neil Veik	Note Rcv-Int only, 11.0%	305250				305250	305250	

Schedule H, line 4i
Schedule of Assets (Held At End of Year)

For the plan year beginning 01/01/2009 and ending 12/31/2009

Name of plan

YOSEMITE MOTELS SALARY SAVINGS PLAN

Employer Identification Number

77-0488685

Three-digit plan number ► 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Wells Fargo Bank	Stable Return Fund	11,634	14,841
	Wells Fargo Bank	Asset Allocation Fund	3,081	3,092
	Wells Fargo Bank	S & P 500 Index Fund	2,004	1,964
	Wells Fargo Bank	T Rowe Price Mid Cap Growth	62,102	66,455
	Wells Fargo Bank	T Rowe Price Science & Tech	10,195	11,351
	Wells Fargo Bank	T Rowe Price Small Cap Stock	92,334	93,714
	Wells Fargo Bank	Vanguard Quantitative Gro&Inc	18,166	14,479
	Wells Fargo Bank	Vanguard Total Stock Mkt Index	8,251	8,211
	Wells Fargo Bank	Vanguard International Growth	11,517	10,379
	Wells Fargo Bank	Vanguard U S Growth Fund	498	443
	Wells Fargo Bank	Vanguard Long-Term Treasury	1,037	989
	Wells Fargo Bank	T Rowe Price Global Stock Fund	14,511	14,489
	Wells Fargo Bank	Cash and Cash Equivalents	602	602
	Premier Valley Bank	Cash and Cash Equivalents	27,889	27,889
	DCL Investments, LLC	Note Receivable; 12.5% Int	110,000	110,000
	Dry Creek Land, LP	Note Receivable; 12.5% Int	52,500	52,500
	Dry Creek Land, LP	Note Receivable; 12.5% Int	178,100	178,100
	Gopal Das	Note Receivable; 11.75% Int	75,000	75,000
	Daniel Vick	Note Receivable; 12.5% Int	10,000	10,000
	Dry Creek Land, LP	Note Receivable; 12.5% Int	56,250	56,250
	Dry Creek Land, LP	Note Receivable; 12.5% Int	21,200	21,200
	Dry Creek Land, LP	Note Receivable; 12.5% Int	47,900	47,900
	Dry Creek Land, LP	Note Receivable; 12.5% Int	57,750	57,750
	Massey Butler	Note Receivable; 7.0% Int	79,000	79,000
	Samuel Krikorian	Note Receivable; 13.0% Int	200,000	200,000
	David Muller	Note Receivable; 13.0% Int	264,000	264,000
	Wm. McClure	Note Receivable; 12.0% Int	200,000	200,000
	Michael and Jennifer Miller	Note Receivable; 7.0% Int	166,987	166,987
	I Serrano/S Saldate/A Saldate	Note Receivable; 12.5% Int	59,000	59,000
	Various Borrowers	Accrued Interest Receivable	190,613	159,998
	J Peterson/S Saldate/A Saldate	Note Receivable; 15.0% Int	15,600	15,600
	Dwight Hannah	Note Receivable; 11.5% Int	150,000	119,114
	A Silva and M Brazil	Note Receivable; 7.5% Int	543,268	543,268
	Delmas Tower, LLC	Note Receivable; 15.0% Int	85,500	75,073
	Edinburgh Development Group	Note Receivable; 11.0% Int	45,000	45,000
	Real Estate Investment	Residential, Antioch, CA	560,913	465,000
	Double RD Investments	Note Receivable; 12.25% Int	60,922	60,922
	Derrick & Neil Veik	Note Receivable; 11.0% Int	305,250	305,250
	O&S Investment Group	Note Receivable; 13.0% Int	80,966	80,966