

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold;">2009</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning <u>07/01/2009</u> and ending <u>06/30/2010</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>WAX WORKS, INC. PROFIT SHARING/ 401(K) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/1975</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>07/01/1975</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>07/01/1975</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>WAX WORKS, INC.</u> <u>325 EAST THIRD STREET</u> <u>OWENSBORO, KY 42303</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>61-0587833</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>270-926-0008</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>453990</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>61-0587833</u>	2c Sponsor's telephone number <u>270-926-0008</u>	2d Business code (see instructions) <u>453990</u>	
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2c Sponsor's telephone number <u>270-926-0008</u>					
2d Business code (see instructions) <u>453990</u>					

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			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>04/14/2011</u>	<u>TERRY WOODWARD</u>
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") WAX WORKS, INC. 325 EAST THIRD STREET OWENSBORO, KY 42303	3b Administrator's EIN 61-0587833 3c Administrator's telephone number 270-926-0008
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	145
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	132
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	24
d Subtotal. Add lines 6a , 6b , and 6c	6d	156
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	156
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	99
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	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 2G 2J 2K 3D

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
 (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
 (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information – Small Plan)
 (3) ☐ **A** (Insurance Information)
 (4) ☒ **C** (Service Provider Information)
 (5) ☒ **D** (DFE/Participating Plan Information)
 (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010		
A Name of plan WAX WORKS, INC. PROFIT SHARING/ 401(K) PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 WAX WORKS, INC.		D Employer Identification Number (EIN) 61-0587833

Part I	Service Provider Information (see instructions)
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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)

PNC BANK, N.A.

25-1211909

(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?
25 59 60 63	TRUSTEE	6350	Yes ☒ No ☐	Yes ☒ No ☐	0	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
PNC BANK, N.A.	59 60 63	0
(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.	
AIM LARGE CAP GROWTH FD CLS A 1555 PEACHTREE STREET, N.E. ATLANTA, GA 30309	5 BASIS POINTS ANNUALLY-59 25 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.	
AMERICAN CENTURY EQUITY GROWTH FUND P.O. BOX 419385 KANSAS CITY, MO 64141	25 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.	
AMERICAN FUNDS - AMERICAN BALANCED 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63	

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
PNC BANK, N.A.	60 63	0

(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.
AMERICAN FUNDS - EUROPACIFIC GROWTH 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
AMERICAN FUNDS - FUNDAMENTAL INVEST 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
AMERICAN FUNDS - NEW PERSPECTIVE FU 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

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
PNC BANK, N.A.	60 63	0

(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.
AMERICAN FUNDS - NEW WORLD FUND R3 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
AMERICAN FUNDS - THE GROWTH FUND OF 333 SOUTH HOPE STREET LOS ANGELES, CA 90071	10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
BLACKROCK INDEX EQUITY PORTFOLIO 40 EAST 52ND STREET NEW YORK, NY 10022	4 BASIS POINTS ANNUALLY-60 15 BASIS POINTS ANNUALLY-63

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
PNC BANK, N.A.	60 63	0
(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.	
BLACKROCK INTERNATIONAL OPPORTUNITI 40 EAST 52ND STREET NEW YORK, NY 10022	25 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.	
BLACKROCK TOTAL RETURN II PORTFOLIO 40 EAST 52ND STREET NEW YORK, NY 10022	20 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	59 60	0
(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.	
FEDERATED MID-CAP INDEX FUND FEDERATED INVESTORS TOWER PITTSBURGH, PA 15222	25 BASIS POINTS ANNUALLY-59 5 BASIS POINTS ANNUALLY-60	

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
PNC BANK, N.A.	60 63	0
(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.
FIDELITY ADVISOR EQUITY GROWTH FUND 82 DEVONSHIRE ST. BOSTON, MA 02109		10 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.
JANUS FORTY FUND CLASS S 151 DETROIT STREET DENVER, CO 80206		25 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	59 63	0
(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.
MFS CORE GROWTH 500 BOYLSTON STREET BOSTON, MA 02116		15 BASIS POINTS ANNUALLY-59 25 BASIS POINTS ANNUALLY-63

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
PNC BANK, N.A.	60 63	0
(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.
MUTUAL GLOBAL DISCOVERY FUND ONE FRANKLIN PARKWAY SAN MATEO, CA 94403	15 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.
ROYCE PENNSYLVANIA FUND 745 5TH AVENUE, 24TH FLOOR NEW YORK, NY 10151	10 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0
(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.
ROYCE PREMIER FUND 745 5TH AVENUE, 24TH FLOOR NEW YORK, NY 10151	10 BASIS POINTS ANNUALLY-60 25 BASIS POINTS ANNUALLY-63	

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
PNC BANK, N.A.	60 63	0

(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.
T. ROWE PRICE RETIREMENT 2020 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
T. ROWE PRICE RETIREMENT 2030 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PNC BANK, N.A.	60 63	0

(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.
T. ROWE PRICE RETIREMENT 2040 FUND 100 EAST PRATT STREET BALTIMORE, MD 21202	15 BASIS POINTS ANNUALLY-60 50 BASIS POINTS ANNUALLY-63

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
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(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:

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

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

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

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

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

For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010		
A Name of plan WAX WORKS, INC. PROFIT SHARING/ 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 WAX WORKS, INC.	D Employer Identification Number (EIN) 61-0587833	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	364429	310863
(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)	2372536	2732904
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	2736965	3043767

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	2736965	3043767
---	-----------	---------	---------

Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	44149	
(B) Participants	2a(1)(B)	118369	
(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)		162518

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	25885	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		25885

(3) Rents	2b(3)		
-----------------	--------------	--	--

(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	472836	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	419011	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		53825

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		4661
(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)		289156
c Other income.....	2c		3819
d Total income. Add all income amounts in column (b) and enter total.....	2d		539864

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	226712	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		226712
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)	6350	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		6350
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		233062

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		306802
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: ALEXANDER & COMPANY, PSC

(2) EIN: 61-1120064

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection.
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For calendar plan year 2009 or fiscal plan year beginning 07/01/2009 and ending 06/30/2010

A Name of plan <u>WAX WORKS, INC. PROFIT SHARING/ 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>WAX WORKS, INC.</u>	D Employer Identification Number (EIN) <u>61-0587833</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>25-1211909</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

- 19** If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
REPORT ON AUDIT OF FINANCIAL STATEMENTS
AS OF JUNE 30, 2010 AND 2009
AND
FOR YEAR ENDED JUNE 30, 2010

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN

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ALEXANDER & COMPANY, PSC

CERTIFIED PUBLIC ACCOUNTANTS

- SERVING OUR CLIENTS SINCE 1924 -

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INDEPENDENT AUDITORS' REPORT

To the Participants of
Wax Works, Inc. Profit Sharing/401(k) Plan
Owensboro, Kentucky

We were engaged to audit the accompanying statements of net assets available for benefits - modified cash basis of Wax Works, Inc. Profit Sharing/401(k) Plan as of June 30, 2010 and 2009, the statement of changes in net assets available for benefits - modified cash basis for the year ended June 30, 2010, and the supplemental schedule as of June 30, 2010, as listed in the accompanying table of contents. These financial statements are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note H, which was certified by PNC Bank, N.A., the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of June 30, 2010 and 2009 and for the year ended June 30, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

As described in Note B, these financial statements and supplemental schedule have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America, and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



Owensboro, Kentucky
April 13, 2011

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
June 30, 2010 and 2009

	<u>2010</u>	<u>2009</u>
ASSETS		
Investments:		
Investments (at fair value)	<u>\$ 3,044,547</u>	<u>\$ 2,723,033</u>
TOTAL ASSETS	3,044,547	2,723,033
LIABILITIES	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE	3,044,547	2,723,033
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(780)</u>	<u>13,932</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 3,043,767</u></u>	<u><u>\$ 2,736,965</u></u>

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

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
For the Year Ended June 30, 2010

ADDITIONS

Additions (deductions) to net assets attributed to:

Investment income:

Net appreciation in fair value of investments	\$ 347,642
Dividends	<u>25,885</u>

373,527

Less investment expenses	<u>(6,350)</u>
	<u>367,177</u>

Contributions:

Participants	118,369
Employer	<u>44,149</u>
	<u>162,518</u>

Other income	<u>3,819</u>
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TOTAL ADDITIONS	<u><u>533,514</u></u>
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DEDUCTIONS

Deductions from net assets attributed to:

Benefits paid to participants	<u>226,712</u>
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TOTAL DEDUCTIONS	<u><u>226,712</u></u>
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NET INCREASE	306,802
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	<u>2,736,965</u>
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END OF YEAR	<u><u>\$ 3,043,767</u></u>
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The accompanying notes are an integral part of the financial statements.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE A - DESCRIPTION OF PLAN

The following description of the Wax Works, Inc. Profit Sharing/401(k) Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General. The Plan is a defined contribution plan covering all full-time employees of Wax Works, Inc. ("Company") who have one year of service and are age twenty-one or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions. Each year, participants may contribute up to 15% of pretax annual compensation, as defined in the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified retirement plans. Participants direct the investment of their contributions and the Company match into various investment options offered by the Plan. The Plan currently offers eighteen mutual funds, four target date funds, and a common trust fund as investment options for participants. The Company contributes 50% of the first 6% of base compensation that a participant contributes to the Plan. Additional amounts may be contributed at the option of the Company's board of directors. Contributions are subject to certain limitations.

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

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after five years of credited service. Regardless of length of service, a participant becomes fully vested upon attainment of retirement age, disability, death, or termination of the Plan.

Payment of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account, a non-transferable annuity, or installments over a period of years. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution or in partial payments with a minimum of \$ 1,000 per payment.

Forfeited Accounts. At June 30, 2010 and 2009, forfeited nonvested accounts totaled \$ 0 and \$ 312, respectively. These accounts will be used first to reduce future plan expenses and secondly to reduce future employer contributions. During the plan year ended June 30, 2010, plan expenses were reduced \$ 624 by amounts in forfeited nonvested accounts.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). Consequently, investment income is recognized when received and disbursements when made. Accordingly, the financial statements are not intended to present the net assets and changes in net assets of the Plan in conformity with GAAP.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Basis of Accounting (Continued)

As described in Financial Accounting Standards Board Staff Position (FSP) AAG INV-1 and SOP 94-4-1, *Reporting of Fully Benefit-Responsive Investment Contracts Held by Certain Investment Companies Subject to the AICPA Investment Company Guide and Defined-Contribution Health and Welfare and Pension Plans* (the FSP), investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Plan invests in investment contracts through a common trust fund. As required by the FSP, the statement of net assets available for benefits - modified cash basis presents the fair value of the investment in the common trust fund as well as the adjustment of the investment in the common trust fund from fair value to contract value relating to the investment contracts. The statement of changes in net assets available for benefits - modified cash basis is prepared on a contract value basis.

Estimates

The preparation of financial statements in conformity with a modified cash basis of accounting requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of mutual funds are valued at quoted market prices, which represent the net asset value of shares held by the Plan at June 30, 2010 and 2009. The Plan's interest in the common trust fund, PNC Investment Contract Fund, is valued based on information reported by the trustee using the common trust fund's audited financial statements at December 31, 2010 and 2009 and unaudited financial statements at June 30, 2010 and 2009.

Dividend income is recorded on the cash basis. Realized gains and losses on investments are recognized upon the sale of the related investments and unrealized appreciation or depreciation is recognized at year-end when the carrying values of the related investments are adjusted to their estimated fair market value. Purchases and sales of securities are reflected on a trade-date basis.

Net Change in Fair Value of Investments

The statement of changes in net assets available for benefits - modified cash basis presents the net change in the fair value of the Plan's investments. The net change consists of the realized gains or losses and the net unrealized increase (decrease) on those investments.

Contributions

Employee and employer contributions are recorded when received by the trustee.

Payment of Benefits

Benefits are recorded when paid.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Expenses

The Company provides certain administrative and accounting services to the Plan at no cost. Most administrative expenses are paid directly by the Plan sponsor and include audit and legal fees. Administrative expenses incurred by the Plan include investment management fees which are netted against investment returns and amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE C - INVESTMENTS

The following presents investments at June 30, 2010 and 2009 that represent 5% or more of the Plan's net assets.

	2010	2009
American Century Equity Growth	\$ 614,050	\$ 585,982
Federated Mid-Cap	689,924	579,352
Janus Adviser Forty Fund	172,711	153,260
Am EuroPacific Growth	-	146,031
American Balanced	163,817	169,073
American New Perspective	159,103	157,401
Royce Premier	223,525	174,032
PNC Investment Contract Fund	311,643 *	350,497 *

* Amounts shown at fair value. Contract values at June 30, 2010 and 2009 were \$ 310,863 and \$ 364,429, respectively.

During the year ended June 30, 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value by \$ 347,642 as follows:

Mutual funds	\$ 342,330
Common trust fund	<u>5,312</u>
	<u>\$ 347,642</u>

NOTE D - FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board ("FASB") issued Statement of Financial Standard ("SFAS") No. 157, "*Fair Value Measurements* (FASB ASB 820-10)," which is effective for fiscal years beginning after November 15, 2007. This standard defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles (GAAP), and expands disclosures about fair value measurements. The Plan adopted this statement as of the beginning of the year ended June 30, 2009.

In accordance with SFAS 157 (FASB ASB 820-10), fair value is based upon one or more inputs, defined as assumptions that market participants would use in pricing an asset or liability. Fair value inputs are separated into a three-tier hierarchy:

- Level 1 - Observable, which represents assets or liabilities with quoted prices in active markets for identical assets or liabilities.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

- Level 2 - Other Observable, which represents assets or liabilities with quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly.
- Level 3 - Unobservable, which represents assets or liabilities with prices or valuations that reflect the reporting entity's assumptions and significant management judgment.

As required by SFAS 157, the asset or liability is classified within the fair value hierarchy based upon the lowest level of any input that is significant to the fair value measurement of that asset or liability.

The following table presents the Plan's investments by level within the fair value hierarchy at June 30, 2010 and 2009:

		Fair Value Measurements Using:		
		Observable	Other	Unobservable
		Inputs	Observable	Unobservable
		(Level 1)	Inputs	Inputs
		(Level 1)	(Level 2)	(Level 3)
<u>June 30, 2010</u>	<u>Fair Value</u>			
Mutual funds:				
Balanced funds	\$ 163,817	\$ 163,817	\$ -	\$ -
Growth funds	1,981,077	1,981,077	-	-
Blend	586,410	586,410	-	-
Target date funds	1,600	1,600	-	-
Common trust fund	311,643	-	-	311,643
Total	<u>\$3,044,547</u>	<u>\$ 2,732,904</u>	<u>\$ -</u>	<u>\$ 311,643</u>
<u>June 30, 2009</u>				
Mutual funds:				
Balanced funds	\$ 169,073	\$ 169,073	\$ -	\$ -
Growth funds	483,160	483,160	-	-
Blend	1,720,303	1,720,303	-	-
Common trust fund	350,497	-	-	350,497
Total	<u>\$2,723,033</u>	<u>\$ 2,372,536</u>	<u>\$ -</u>	<u>\$ 350,497</u>

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

Quoted market prices in active markets were used to value the Level 1 inputs. The common trust fund's management determined the fair values of the Level 3 inputs by discounting the present value of expected cash flows, based on issuer quotes, from investment contracts within the common trust fund. There have been no changes in the methodologies used at June 30, 2010.

The following table provides further details of the fair value measurements at June 30, 2010 and 2009 using significant unobservable inputs (Level 3):

	<u>2010</u>	<u>2009</u>
Common Collective Trust:		
Beginning balance	\$ 350,497	\$ 235,928
Total gains and losses (realized and unrealized) included in changes in net assets available for benefits	5,312	9,639
Purchases, sales, issuances, and settlements (net)	<u>(44,166)</u>	<u>104,930</u>
Ending balance	<u>\$ 311,643</u>	<u>\$ 350,497</u>

Gain and losses (realized and unrealized) included in changes in net assets available for benefits for the year ended June 30, 2010 are reported in net depreciation of fair value of investments.

NOTE E - RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds and a common trust fund managed by PNC Bank, N.A., which is the trustee as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE F - PLAN TERMINATION

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

NOTE G - TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated January 11, 1996, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE H - INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

At June 30, 2010 and 2009, PNC Bank, N.A. as trustee held the Plan's investments. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the trustee as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA).

	<u>2010</u>	<u>2009</u>
Mutual funds (at fair value)	\$ 2,732,904	\$ 2,372,536
Common trust fund (at contract value)	310,863	364,429
Investment income:		
Mutual funds	342,330	
Common trust fund	5,312	

NOTE I - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities which are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE J - RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net depreciation in fair value of investments per the financial statements for the year ended June 30, 2010, to Schedule H of Form 5500:

Net appreciation in fair value of investments per financial statements	<u>\$ 347,642</u>
Net gain (loss) on sale of assets per Schedule H, Form 5500, line 2b(4)(C)	\$ 53,825
Net investment gain (loss) from common/collective trusts per Schedule H, Form 5500, line 2b(6)	\$ 4,661
Net investment gain (loss) from registered investment companies per Schedule H, Form 5500, line 2b(10)	<u>\$ 289,156</u>
	<u>\$ 347,642</u>

NOTE K - SUBSEQUENT EVENTS

In preparing these financial statements, Plan management has evaluated events and transactions for potential recognition or disclosure through April 13, 2011, the date the financial statements were available to be issued. Plan management determined that, except for the preceding paragraph, no events or transactions require recognition or disclosure as subsequent events in these financial statements.

SUPPLEMENTAL INFORMATION

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Schedule H, line 4i - Schedule of Assets Held at End of Year
Federal ID 61-0587833
Plan Number: 001
June 30, 2010

(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
	<u>Mutual Funds:</u>			
	American Century Equity Growth Fund	Value of interest in registered investment companies	**	\$ 614,050
	Federated Mid-Cap Fund	Value of interest in registered investment companies	**	689,924
*	BlackRock Total Return II Portfolio	Value of interest in registered investment companies	**	60,260
*	BlackRock Index Equity Portfolio A	Value of interest in registered investment companies	**	57,254
	Janus Adviser Forty Fund	Value of interest in registered investment companies	**	172,711
	MFS Core Growth Fund	Value of interest in registered investment companies	**	14,305
	AIM Large Cap Growth Fund	Value of interest in registered investment companies	**	112,663
	EuroPacific Growth Fund R3	Value of interest in registered investment companies	**	145,851
	American Balanced Fund R3	Value of interest in registered investment companies	**	163,817
	Fidelity Advisor Equity Growth Fund	Value of interest in registered investment companies	**	38,470
	New Perspective Fund R3	Value of interest in registered investment companies	**	159,103
	Royce Premier Fund	Value of interest in registered investment companies	**	223,525
	Growth Fund of America R3	Value of interest in registered investment companies	**	57,466
	American Fundamental Investors R3	Value of interest in registered investment companies	**	71,869
	American New World Growth & Income R3	Value of interest in registered investment companies	**	89,175
*	BlackRock Int'l Small Cap Growth Portfolio	Value of interest in registered investment companies	**	14,806
	Franklin Mutual Discovery Fund	Value of interest in registered investment companies	**	31,692
	Royce Pennsylvania Fund	Value of interest in registered investment companies	**	14,363
	T. Rowe Price Retirement 2020 R	Value of interest in registered investment companies	**	835
	T. Rowe Price Retirement 2030 R	Value of interest in registered investment companies	**	154
	T. Rowe Price Retirement 2040 R	Value of interest in registered investment companies	**	611
	Common/Collective Trusts:			
	PNC Investment Contract Fund	Common trust fund	**	311,643
				<u>\$ 3,044,547</u>

* Represents party-in-interest transactions

** Cost omitted for participant-directed investments

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
REPORT ON AUDIT OF FINANCIAL STATEMENTS
AS OF JUNE 30, 2010 AND 2009
AND
FOR YEAR ENDED JUNE 30, 2010

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN

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ALEXANDER & COMPANY, PSC

CERTIFIED PUBLIC ACCOUNTANTS

- SERVING OUR CLIENTS SINCE 1924 -

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INDEPENDENT AUDITORS' REPORT

To the Participants of
Wax Works, Inc. Profit Sharing/401(k) Plan
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Owensboro, Kentucky
April 13, 2011

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
June 30, 2010 and 2009

	<u>2010</u>	<u>2009</u>
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Investments:		
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WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
For the Year Ended June 30, 2010

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TOTAL ADDITIONS	533,514
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DEDUCTIONS

Deductions from net assets attributed to:

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TOTAL DEDUCTIONS	226,712
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NET INCREASE	306,802
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	2,736,965
	2,736,965

END OF YEAR	\$ 3,043,767
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Notes to the Financial Statements
June 30, 2010 and 2009

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Payment of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account, a non-transferable annuity, or installments over a period of years. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution or in partial payments with a minimum of \$ 1,000 per payment.

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Basis of Accounting

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WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Basis of Accounting (Continued)

As described in Financial Accounting Standards Board Staff Position (FSP) AAG INV-1 and SOP 94-4-1, *Reporting of Fully Benefit-Responsive Investment Contracts Held by Certain Investment Companies Subject to the AICPA Investment Company Guide and Defined-Contribution Health and Welfare and Pension Plans* (the FSP), investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Plan invests in investment contracts through a common trust fund. As required by the FSP, the statement of net assets available for benefits - modified cash basis presents the fair value of the investment in the common trust fund as well as the adjustment of the investment in the common trust fund from fair value to contract value relating to the investment contracts. The statement of changes in net assets available for benefits - modified cash basis is prepared on a contract value basis.

Estimates

The preparation of financial statements in conformity with a modified cash basis of accounting requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of mutual funds are valued at quoted market prices, which represent the net asset value of shares held by the Plan at June 30, 2010 and 2009. The Plan's interest in the common trust fund, PNC Investment Contract Fund, is valued based on information reported by the trustee using the common trust fund's audited financial statements at December 31, 2010 and 2009 and unaudited financial statements at June 30, 2010 and 2009.

Dividend income is recorded on the cash basis. Realized gains and losses on investments are recognized upon the sale of the related investments and unrealized appreciation or depreciation is recognized at year-end when the carrying values of the related investments are adjusted to their estimated fair market value. Purchases and sales of securities are reflected on a trade-date basis.

Net Change in Fair Value of Investments

The statement of changes in net assets available for benefits - modified cash basis presents the net change in the fair value of the Plan's investments. The net change consists of the realized gains or losses and the net unrealized increase (decrease) on those investments.

Contributions

Employee and employer contributions are recorded when received by the trustee.

Payment of Benefits

Benefits are recorded when paid.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Expenses

The Company provides certain administrative and accounting services to the Plan at no cost. Most administrative expenses are paid directly by the Plan sponsor and include audit and legal fees. Administrative expenses incurred by the Plan include investment management fees which are netted against investment returns and amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE C - INVESTMENTS

The following presents investments at June 30, 2010 and 2009 that represent 5% or more of the Plan's net assets.

	2010	2009
American Century Equity Growth	\$ 614,050	\$ 585,982
Federated Mid-Cap	689,924	579,352
Janus Adviser Forty Fund	172,711	153,260
Am EuroPacific Growth	-	146,031
American Balanced	163,817	169,073
American New Perspective	159,103	157,401
Royce Premier	223,525	174,032
PNC Investment Contract Fund	311,643 *	350,497 *

* Amounts shown at fair value. Contract values at June 30, 2010 and 2009 were \$ 310,863 and \$ 364,429, respectively.

During the year ended June 30, 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value by \$ 347,642 as follows:

Mutual funds	\$ 342,330
Common trust fund	<u>5,312</u>
	<u>\$ 347,642</u>

NOTE D - FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board ("FASB") issued Statement of Financial Standard ("SFAS") No. 157, "*Fair Value Measurements* (FASB ASB 820-10)," which is effective for fiscal years beginning after November 15, 2007. This standard defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles (GAAP), and expands disclosures about fair value measurements. The Plan adopted this statement as of the beginning of the year ended June 30, 2009.

In accordance with SFAS 157 (FASB ASB 820-10), fair value is based upon one or more inputs, defined as assumptions that market participants would use in pricing an asset or liability. Fair value inputs are separated into a three-tier hierarchy:

- Level 1 - Observable, which represents assets or liabilities with quoted prices in active markets for identical assets or liabilities.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

- Level 2 - Other Observable, which represents assets or liabilities with quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly.
- Level 3 - Unobservable, which represents assets or liabilities with prices or valuations that reflect the reporting entity's assumptions and significant management judgment.

As required by SFAS 157, the asset or liability is classified within the fair value hierarchy based upon the lowest level of any input that is significant to the fair value measurement of that asset or liability.

The following table presents the Plan's investments by level within the fair value hierarchy at June 30, 2010 and 2009:

		Fair Value Measurements Using:		
		Observable	Other	Unobservable
		Inputs	Observable	Inputs
		(Level 1)	(Level 2)	(Level 3)
<u>June 30, 2010</u>	<u>Fair Value</u>			
Mutual funds:				
Balanced funds	\$ 163,817	\$ 163,817	\$ -	\$ -
Growth funds	1,981,077	1,981,077	-	-
Blend	586,410	586,410	-	-
Target date funds	1,600	1,600	-	-
Common trust fund	311,643	-	-	311,643
Total	<u>\$3,044,547</u>	<u>\$ 2,732,904</u>	<u>\$ -</u>	<u>\$ 311,643</u>
<u>June 30, 2009</u>				
Mutual funds:				
Balanced funds	\$ 169,073	\$ 169,073	\$ -	\$ -
Growth funds	483,160	483,160	-	-
Blend	1,720,303	1,720,303	-	-
Common trust fund	350,497	-	-	350,497
Total	<u>\$2,723,033</u>	<u>\$ 2,372,536</u>	<u>\$ -</u>	<u>\$ 350,497</u>

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

Quoted market prices in active markets were used to value the Level 1 inputs. The common trust fund's management determined the fair values of the Level 3 inputs by discounting the present value of expected cash flows, based on issuer quotes, from investment contracts within the common trust fund. There have been no changes in the methodologies used at June 30, 2010.

The following table provides further details of the fair value measurements at June 30, 2010 and 2009 using significant unobservable inputs (Level 3):

	<u>2010</u>	<u>2009</u>
Common Collective Trust:		
Beginning balance	\$ 350,497	\$ 235,928
Total gains and losses (realized and unrealized) included in changes in net assets available for benefits	5,312	9,639
Purchases, sales, issuances, and settlements (net)	<u>(44,166)</u>	<u>104,930</u>
Ending balance	<u>\$ 311,643</u>	<u>\$ 350,497</u>

Gain and losses (realized and unrealized) included in changes in net assets available for benefits for the year ended June 30, 2010 are reported in net depreciation of fair value of investments.

NOTE E - RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds and a common trust fund managed by PNC Bank, N.A., which is the trustee as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE F - PLAN TERMINATION

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

NOTE G - TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated January 11, 1996, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE H - INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

At June 30, 2010 and 2009, PNC Bank, N.A. as trustee held the Plan's investments. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the trustee as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA).

	<u>2010</u>	<u>2009</u>
Mutual funds (at fair value)	\$ 2,732,904	\$ 2,372,536
Common trust fund (at contract value)	310,863	364,429
Investment income:		
Mutual funds	342,330	
Common trust fund	5,312	

NOTE I - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities which are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE J - RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net depreciation in fair value of investments per the financial statements for the year ended June 30, 2010, to Schedule H of Form 5500:

Net appreciation in fair value of investments per financial statements	<u>\$ 347,642</u>
Net gain (loss) on sale of assets per Schedule H, Form 5500, line 2b(4)(C)	\$ 53,825
Net investment gain (loss) from common/collective trusts per Schedule H, Form 5500, line 2b(6)	\$ 4,661
Net investment gain (loss) from registered investment companies per Schedule H, Form 5500, line 2b(10)	<u>\$ 289,156</u>
	<u>\$ 347,642</u>

NOTE K - SUBSEQUENT EVENTS

In preparing these financial statements, Plan management has evaluated events and transactions for potential recognition or disclosure through April 13, 2011, the date the financial statements were available to be issued. Plan management determined that, except for the preceding paragraph, no events or transactions require recognition or disclosure as subsequent events in these financial statements.

SUPPLEMENTAL INFORMATION

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Schedule H, line 4i - Schedule of Assets Held at End of Year
Federal ID 61-0587833
Plan Number: 001
June 30, 2010

(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
	<u>Mutual Funds:</u>			
	American Century Equity Growth Fund	Value of interest in registered investment companies	**	\$ 614,050
	Federated Mid-Cap Fund	Value of interest in registered investment companies	**	689,924
*	BlackRock Total Return II Portfolio	Value of interest in registered investment companies	**	60,260
*	BlackRock Index Equity Portfolio A	Value of interest in registered investment companies	**	57,254
	Janus Adviser Forty Fund	Value of interest in registered investment companies	**	172,711
	MFS Core Growth Fund	Value of interest in registered investment companies	**	14,305
	AIM Large Cap Growth Fund	Value of interest in registered investment companies	**	112,663
	EuroPacific Growth Fund R3	Value of interest in registered investment companies	**	145,851
	American Balanced Fund R3	Value of interest in registered investment companies	**	163,817
	Fidelity Advisor Equity Growth Fund	Value of interest in registered investment companies	**	38,470
	New Perspective Fund R3	Value of interest in registered investment companies	**	159,103
	Royce Premier Fund	Value of interest in registered investment companies	**	223,525
	Growth Fund of America R3	Value of interest in registered investment companies	**	57,466
	American Fundamental Investors R3	Value of interest in registered investment companies	**	71,869
	American New World Growth & Income R3	Value of interest in registered investment companies	**	89,175
*	BlackRock Int'l Small Cap Growth Portfolio	Value of interest in registered investment companies	**	14,806
	Franklin Mutual Discovery Fund	Value of interest in registered investment companies	**	31,692
	Royce Pennsylvania Fund	Value of interest in registered investment companies	**	14,363
	T. Rowe Price Retirement 2020 R	Value of interest in registered investment companies	**	835
	T. Rowe Price Retirement 2030 R	Value of interest in registered investment companies	**	154
	T. Rowe Price Retirement 2040 R	Value of interest in registered investment companies	**	611
	Common/Collective Trusts:			
	PNC Investment Contract Fund	Common trust fund	**	311,643
				<u>\$ 3,044,547</u>

* Represents party-in-interest transactions

** Cost omitted for participant-directed investments

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
REPORT ON AUDIT OF FINANCIAL STATEMENTS
AS OF JUNE 30, 2010 AND 2009
AND
FOR YEAR ENDED JUNE 30, 2010

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN

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ALEXANDER & COMPANY, PSC

CERTIFIED PUBLIC ACCOUNTANTS

- SERVING OUR CLIENTS SINCE 1924 -

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INDEPENDENT AUDITORS' REPORT

To the Participants of
Wax Works, Inc. Profit Sharing/401(k) Plan
Owensboro, Kentucky

We were engaged to audit the accompanying statements of net assets available for benefits - modified cash basis of Wax Works, Inc. Profit Sharing/401(k) Plan as of June 30, 2010 and 2009, the statement of changes in net assets available for benefits - modified cash basis for the year ended June 30, 2010, and the supplemental schedule as of June 30, 2010, as listed in the accompanying table of contents. These financial statements are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note H, which was certified by PNC Bank, N.A., the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of June 30, 2010 and 2009 and for the year ended June 30, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

As described in Note B, these financial statements and supplemental schedule have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America, and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



Owensboro, Kentucky
April 13, 2011

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
June 30, 2010 and 2009

	<u>2010</u>	<u>2009</u>
ASSETS		
Investments:		
Investments (at fair value)	<u>\$ 3,044,547</u>	<u>\$ 2,723,033</u>
TOTAL ASSETS	3,044,547	2,723,033
LIABILITIES	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE	3,044,547	2,723,033
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	<u>(780)</u>	<u>13,932</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 3,043,767</u></u>	<u><u>\$ 2,736,965</u></u>

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

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
- MODIFIED CASH BASIS
For the Year Ended June 30, 2010

ADDITIONS

Additions (deductions) to net assets attributed to:

Investment income:

Net appreciation in fair value of investments	\$ 347,642
Dividends	25,885

373,527

Less investment expenses	(6,350)
	367,177

Contributions:

Participants	118,369
Employer	44,149
	162,518

Other income	3,819
	3,819

TOTAL ADDITIONS	533,514
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DEDUCTIONS

Deductions from net assets attributed to:

Benefits paid to participants	226,712
	226,712

TOTAL DEDUCTIONS	226,712
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NET INCREASE	306,802
---------------------	----------------

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	2,736,965
	2,736,965

END OF YEAR	\$ 3,043,767
--------------------	---------------------

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

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE A - DESCRIPTION OF PLAN

The following description of the Wax Works, Inc. Profit Sharing/401(k) Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General. The Plan is a defined contribution plan covering all full-time employees of Wax Works, Inc. ("Company") who have one year of service and are age twenty-one or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions. Each year, participants may contribute up to 15% of pretax annual compensation, as defined in the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified retirement plans. Participants direct the investment of their contributions and the Company match into various investment options offered by the Plan. The Plan currently offers eighteen mutual funds, four target date funds, and a common trust fund as investment options for participants. The Company contributes 50% of the first 6% of base compensation that a participant contributes to the Plan. Additional amounts may be contributed at the option of the Company's board of directors. Contributions are subject to certain limitations.

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

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after five years of credited service. Regardless of length of service, a participant becomes fully vested upon attainment of retirement age, disability, death, or termination of the Plan.

Payment of Benefits. On termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account, a non-transferable annuity, or installments over a period of years. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution or in partial payments with a minimum of \$ 1,000 per payment.

Forfeited Accounts. At June 30, 2010 and 2009, forfeited nonvested accounts totaled \$ 0 and \$ 312, respectively. These accounts will be used first to reduce future plan expenses and secondly to reduce future employer contributions. During the plan year ended June 30, 2010, plan expenses were reduced \$ 624 by amounts in forfeited nonvested accounts.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). Consequently, investment income is recognized when received and disbursements when made. Accordingly, the financial statements are not intended to present the net assets and changes in net assets of the Plan in conformity with GAAP.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Basis of Accounting (Continued)

As described in Financial Accounting Standards Board Staff Position (FSP) AAG INV-1 and SOP 94-4-1, *Reporting of Fully Benefit-Responsive Investment Contracts Held by Certain Investment Companies Subject to the AICPA Investment Company Guide and Defined-Contribution Health and Welfare and Pension Plans* (the FSP), investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Plan invests in investment contracts through a common trust fund. As required by the FSP, the statement of net assets available for benefits - modified cash basis presents the fair value of the investment in the common trust fund as well as the adjustment of the investment in the common trust fund from fair value to contract value relating to the investment contracts. The statement of changes in net assets available for benefits - modified cash basis is prepared on a contract value basis.

Estimates

The preparation of financial statements in conformity with a modified cash basis of accounting requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of mutual funds are valued at quoted market prices, which represent the net asset value of shares held by the Plan at June 30, 2010 and 2009. The Plan's interest in the common trust fund, PNC Investment Contract Fund, is valued based on information reported by the trustee using the common trust fund's audited financial statements at December 31, 2010 and 2009 and unaudited financial statements at June 30, 2010 and 2009.

Dividend income is recorded on the cash basis. Realized gains and losses on investments are recognized upon the sale of the related investments and unrealized appreciation or depreciation is recognized at year-end when the carrying values of the related investments are adjusted to their estimated fair market value. Purchases and sales of securities are reflected on a trade-date basis.

Net Change in Fair Value of Investments

The statement of changes in net assets available for benefits - modified cash basis presents the net change in the fair value of the Plan's investments. The net change consists of the realized gains or losses and the net unrealized increase (decrease) on those investments.

Contributions

Employee and employer contributions are recorded when received by the trustee.

Payment of Benefits

Benefits are recorded when paid.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Expenses

The Company provides certain administrative and accounting services to the Plan at no cost. Most administrative expenses are paid directly by the Plan sponsor and include audit and legal fees. Administrative expenses incurred by the Plan include investment management fees which are netted against investment returns and amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE C - INVESTMENTS

The following presents investments at June 30, 2010 and 2009 that represent 5% or more of the Plan's net assets.

	2010	2009
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Federated Mid-Cap	689,924	579,352
Janus Adviser Forty Fund	172,711	153,260
Am EuroPacific Growth	-	146,031
American Balanced	163,817	169,073
American New Perspective	159,103	157,401
Royce Premier	223,525	174,032
PNC Investment Contract Fund	311,643 *	350,497 *

* Amounts shown at fair value. Contract values at June 30, 2010 and 2009 were \$ 310,863 and \$ 364,429, respectively.

During the year ended June 30, 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value by \$ 347,642 as follows:

Mutual funds	\$ 342,330
Common trust fund	<u>5,312</u>
	<u>\$ 347,642</u>

NOTE D - FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board ("FASB") issued Statement of Financial Standard ("SFAS") No. 157, "*Fair Value Measurements* (FASB ASB 820-10)," which is effective for fiscal years beginning after November 15, 2007. This standard defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles (GAAP), and expands disclosures about fair value measurements. The Plan adopted this statement as of the beginning of the year ended June 30, 2009.

In accordance with SFAS 157 (FASB ASB 820-10), fair value is based upon one or more inputs, defined as assumptions that market participants would use in pricing an asset or liability. Fair value inputs are separated into a three-tier hierarchy:

- Level 1 - Observable, which represents assets or liabilities with quoted prices in active markets for identical assets or liabilities.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

- Level 2 - Other Observable, which represents assets or liabilities with quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly.
- Level 3 - Unobservable, which represents assets or liabilities with prices or valuations that reflect the reporting entity's assumptions and significant management judgment.

As required by SFAS 157, the asset or liability is classified within the fair value hierarchy based upon the lowest level of any input that is significant to the fair value measurement of that asset or liability.

The following table presents the Plan's investments by level within the fair value hierarchy at June 30, 2010 and 2009:

		Fair Value Measurements Using:		
		Observable	Other	Unobservable
		Inputs	Observable	Unobservable
		(Level 1)	Inputs	Inputs
		(Level 1)	(Level 2)	(Level 3)
<u>June 30, 2010</u>	<u>Fair Value</u>			
Mutual funds:				
Balanced funds	\$ 163,817	\$ 163,817	\$ -	\$ -
Growth funds	1,981,077	1,981,077	-	-
Blend	586,410	586,410	-	-
Target date funds	1,600	1,600	-	-
Common trust fund	311,643	-	-	311,643
Total	<u>\$3,044,547</u>	<u>\$ 2,732,904</u>	<u>\$ -</u>	<u>\$ 311,643</u>
<u>June 30, 2009</u>				
Mutual funds:				
Balanced funds	\$ 169,073	\$ 169,073	\$ -	\$ -
Growth funds	483,160	483,160	-	-
Blend	1,720,303	1,720,303	-	-
Common trust fund	350,497	-	-	350,497
Total	<u>\$2,723,033</u>	<u>\$ 2,372,536</u>	<u>\$ -</u>	<u>\$ 350,497</u>

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE D - FAIR VALUE MEASUREMENTS (Continued)

Quoted market prices in active markets were used to value the Level 1 inputs. The common trust fund's management determined the fair values of the Level 3 inputs by discounting the present value of expected cash flows, based on issuer quotes, from investment contracts within the common trust fund. There have been no changes in the methodologies used at June 30, 2010.

The following table provides further details of the fair value measurements at June 30, 2010 and 2009 using significant unobservable inputs (Level 3):

	<u>2010</u>	<u>2009</u>
Common Collective Trust:		
Beginning balance	\$ 350,497	\$ 235,928
Total gains and losses (realized and unrealized) included in changes in net assets available for benefits	5,312	9,639
Purchases, sales, issuances, and settlements (net)	<u>(44,166)</u>	<u>104,930</u>
Ending balance	<u>\$ 311,643</u>	<u>\$ 350,497</u>

Gain and losses (realized and unrealized) included in changes in net assets available for benefits for the year ended June 30, 2010 are reported in net depreciation of fair value of investments.

NOTE E - RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds and a common trust fund managed by PNC Bank, N.A., which is the trustee as defined by the Plan. Therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to \$ 6,350 for the year ended June 30, 2010.

NOTE F - PLAN TERMINATION

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

NOTE G - TAX STATUS

The Internal Revenue Service has determined and informed the Company by a letter dated January 11, 1996, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. Accordingly, no provision for income taxes has been included in the accompanying financial statements.

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Notes to the Financial Statements
June 30, 2010 and 2009

NOTE H - INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

At June 30, 2010 and 2009, PNC Bank, N.A. as trustee held the Plan's investments. The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the trustee as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA).

	<u>2010</u>	<u>2009</u>
Mutual funds (at fair value)	\$ 2,732,904	\$ 2,372,536
Common trust fund (at contract value)	310,863	364,429
Investment income:		
Mutual funds	342,330	
Common trust fund	5,312	

NOTE I - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities which are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE J - RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net depreciation in fair value of investments per the financial statements for the year ended June 30, 2010, to Schedule H of Form 5500:

Net appreciation in fair value of investments per financial statements	<u>\$ 347,642</u>
Net gain (loss) on sale of assets per Schedule H, Form 5500, line 2b(4)(C)	\$ 53,825
Net investment gain (loss) from common/collective trusts per Schedule H, Form 5500, line 2b(6)	\$ 4,661
Net investment gain (loss) from registered investment companies per Schedule H, Form 5500, line 2b(10)	<u>\$ 289,156</u>
	<u>\$ 347,642</u>

NOTE K - SUBSEQUENT EVENTS

In preparing these financial statements, Plan management has evaluated events and transactions for potential recognition or disclosure through April 13, 2011, the date the financial statements were available to be issued. Plan management determined that, except for the preceding paragraph, no events or transactions require recognition or disclosure as subsequent events in these financial statements.

SUPPLEMENTAL INFORMATION

WAX WORKS, INC. PROFIT SHARING/401(K) PLAN
Schedule H, line 4i - Schedule of Assets Held at End of Year
Federal ID 61-0587833
Plan Number: 001
June 30, 2010

(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
	<u>Mutual Funds:</u>			
	American Century Equity Growth Fund	Value of interest in registered investment companies	**	\$ 614,050
	Federated Mid-Cap Fund	Value of interest in registered investment companies	**	689,924
*	BlackRock Total Return II Portfolio	Value of interest in registered investment companies	**	60,260
*	BlackRock Index Equity Portfolio A	Value of interest in registered investment companies	**	57,254
	Janus Adviser Forty Fund	Value of interest in registered investment companies	**	172,711
	MFS Core Growth Fund	Value of interest in registered investment companies	**	14,305
	AIM Large Cap Growth Fund	Value of interest in registered investment companies	**	112,663
	EuroPacific Growth Fund R3	Value of interest in registered investment companies	**	145,851
	American Balanced Fund R3	Value of interest in registered investment companies	**	163,817
	Fidelity Advisor Equity Growth Fund	Value of interest in registered investment companies	**	38,470
	New Perspective Fund R3	Value of interest in registered investment companies	**	159,103
	Royce Premier Fund	Value of interest in registered investment companies	**	223,525
	Growth Fund of America R3	Value of interest in registered investment companies	**	57,466
	American Fundamental Investors R3	Value of interest in registered investment companies	**	71,869
	American New World Growth & Income R3	Value of interest in registered investment companies	**	89,175
*	BlackRock Int'l Small Cap Growth Portfolio	Value of interest in registered investment companies	**	14,806
	Franklin Mutual Discovery Fund	Value of interest in registered investment companies	**	31,692
	Royce Pennsylvania Fund	Value of interest in registered investment companies	**	14,363
	T. Rowe Price Retirement 2020 R	Value of interest in registered investment companies	**	835
	T. Rowe Price Retirement 2030 R	Value of interest in registered investment companies	**	154
	T. Rowe Price Retirement 2040 R	Value of interest in registered investment companies	**	611
	Common/Collective Trusts:			
	PNC Investment Contract Fund	Common trust fund	**	311,643
				<u>\$ 3,044,547</u>

* Represents party-in-interest transactions

** Cost omitted for participant-directed investments



CERTIFICATION FOR ENCLOSURE WITH FORM 5500

We certify that pursuant to Department of Labor Regulations §2520.103-9(c) the Fund Trustee will file with the Department of Labor on or before the filing due date a Form 5500 for the 2009 calendar year for the collective trusts listed below. This filing will include an annual Statement of Assets and Liabilities for the following PNC Bank Collective Investment Trust Funds held by Employee Benefits plans:

FUND	TRUST NO.	FUND EIN
PNC EBT Investment Contract Fund	1028398	25-1197336

We also certify that we will furnish, to the Administrator or Sponsor for each participating plan, a copy of the most recent Statement of Assets and Liabilities of the above funds.

PNC Bank, N.A.

I, Bonnie Fawcett, Vice President, certify the accuracy and completeness of the information provided in this certification and in the above-described Statement of Assets and Liabilities.

Sincerely,

Bonnie Fawcett
Vice President
Director, Vested Interest

The PNC Financial Services Group, Inc. ("PNC") provides investment and wealth management, fiduciary services, non-discretionary defined contribution plan services and investment options, FDIC-insured banking products and services and lending and borrowing of funds through its subsidiaries, PNC Bank, National Association, PNC Bank, Delaware and National City Bank, which are Members FDIC. PNC does not provide legal, tax or accounting advice. PNC does not provide investment advice to Vested Interest plan sponsors or participants.

Investments: Not FDIC Insured. No Bank Guarantee. May Lose Value.