

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2010 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</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>SCHMITZ & SCHMITZ PROPERTIES, IN</u>	1b Three-digit plan number (PN) ► <u>001</u> 1c Effective date of plan <u>01/01/2008</u>
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>SCHMITZ & SCHMITZ PROPERTIES, IN</u> <u>PO BOX 975</u> <u>GAINESVILLE, TX 76241</u>	2b Employer Identification Number (EIN) <u>75-2716275</u> 2c Sponsor's telephone number <u>940-665-4373</u> 2d Business code (see instructions) <u>561300</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	<u>Filed with authorized/valid electronic signature.</u>	<u>07/22/2011</u>	<u>STEVE SCHMITZ</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") SCHMITZ & SCHMITZ PROPERTIES, IN PO BOX 975 GAINESVILLE, TX 76241	3b Administrator's EIN 75-2716275 3c Administrator's telephone number 940-665-4373
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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 TRENDSTAFF LLC	4b EIN 26-1301586 4c PN 001	
5 Total number of participants at the beginning of the plan year	5	118
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	96
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	12
d Subtotal. Add lines 6a , 6b , and 6c	6d	108
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	108
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	64
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2E 2F 2G 2J 2K 3D 3H

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

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

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information – Small Plan)
 (3) ☐ **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
		2010
		This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010	
A Name of plan SCHMITZ & SCHMITZ PROPERTIES, IN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHMITZ & SCHMITZ PROPERTIES, IN	D Employer Identification Number (EIN) 75-2716275

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
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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).
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ALLIANZ GLOBAL INVESTORS DISTRIBUTO	1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation	
ALLIANZ GLOBAL INVESTORS DISTRIBUTO	1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
BLACKROCK INVESTMENTS, INC.	

23-2784752

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

85-0360310

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

FIDELITY DISTRIBUTORS CORP.

500 SALEM STREET
MAIL ZONE 03N
SMITHFIELD, RI 02917

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

FRED ALGER & COMPANY, INCORPORATED

13-2510833

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

INVESCO DISTRIBUTORS, INC.

74-1894784

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

J.P. MORGAN INVESTMENT MANAGEMENT I

13-3200244

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

JANUS DISTRIBUTORS, LLC

151 DETROIT STREET
DENVER, CO 80206

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

NEUBERGER BERMAN

605 THIRD AVENUE
3RD FLOOR
NEW YORK, NY 10158

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

OPPENHEIMER FUNDS INC.

13-2527171

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

PHOENIX - VIRTUS

56 PROSPECT STREET
PO BOX 150480
HARTFORD, CT 06115

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

T. ROWE PRICE

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

TOCQUEVILLE

615 EAST MICHIGAN STREET
3RD FLOOR
MILWAUKEE, WI 53202

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

VAN KAMPEN FUNDS INC.

36-2811402

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

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

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

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

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

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)

ADP

22-1467904

(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?
37 50 15 64	RECORD KEEPER	675	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

STATE STREET CORPORATION

04-1867445

(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?
64 52	DIRECTED TRUSTEE/CUSTODIAN	0	Yes ☒ No ☐	Yes ☒ No ☐	454	Yes ☐ No ☒

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

ADP BROKER-DEALER

22-3319984

(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?
63 99 60 59 49	RECORD KEEPER	0	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 ☐

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
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
ALLIANZ GLOBAL INVESTORS DISTRIBUTO 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2		
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
ALLIANZ GLOBAL INVESTORS DISTRIBUTO 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2		
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
BLACKROCK INVESTMENTS, INC. 23-2784752	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	

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
ADP BROKER-DEALER	63 60 59	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.	
DAVIS DISTRIBUTORS, LLC 85-0360310	ANNUAL RATE 0.00200 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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 DISTRIBUTORS CORP. 500 SALEM STREET MAIL ZONE O3N SMITHFIELD, RI 02917	ANNUAL RATE 0.00050 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	63 99 49	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.	
FRED ALGER & COMPANY, INCORPORATED 13-2510833	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	

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
ADP BROKER-DEALER	63 60 59	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.	
INVESCO DISTRIBUTORS, INC. 74-1894784	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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.	
J.P. MORGAN INVESTMENT MANAGEMENT I 13-3200244	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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 DISTRIBUTORS, LLC 151 DETROIT STREET DENVER, CO 80206	ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	

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
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
NEUBERGER BERMAN 605 THIRD AVENUE 3RD FLOOR NEW YORK, NY 10158	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00400 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00100 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2		
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
OPPENHEIMER FUNDS INC. 13-2527171	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2		
ADP BROKER-DEALER	63 60 59	0
(d) Enter name and EIN (address) of source of indirect compensation		
PHOENIX - VIRTUS 56 PROSPECT STREET PO BOX 150480 HARTFORD, CT 06115	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation. ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS	

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
ADP BROKER-DEALER	99 49	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.	
STATE STREET CORPORATION 04-1867445	ANNUAL RATE 0.00760 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	63 60 59	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 100 EAST PRATT STREET BALTIMORE, MD 21202	ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
ADP BROKER-DEALER	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.	
TOCQUEVILLE 615 EAST MICHIGAN STREET 3RD FLOOR MILWAUKEE, WI 53202	ANNUAL RATE 0.00500 OF AVERAGE DAILY ASSETS	

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
ADP BROKER-DEALER	63 60 59 99 49	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.	
VAN KAMPEN FUNDS INC. 36-2811402	ANNUAL RATE 0.00150 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00250 OF AVERAGE DAILY ASSETS ANNUAL RATE 0.00100 OF AVERAGE DAILY ASSETS	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

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

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

Part III	Termination Information on Accountants and Enrolled Actuaries (see instructions) (complete as many entries as needed)
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a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2010 This Form is Open to Public Inspection.	
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010					
A Name of plan SCHMITZ & SCHMITZ PROPERTIES, IN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 SCHMITZ & SCHMITZ PROPERTIES, IN				D Employer Identification Number (EIN) 75-2716275	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA STABLE VALUE FUND					
b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST CO					
c EIN-PN 04-2675543-001		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 69643	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or	

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 2010 This Form is Open to Public Inspection
For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan SCHMITZ & SCHMITZ PROPERTIES, IN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHMITZ & SCHMITZ PROPERTIES, IN	D Employer Identification Number (EIN) 75-2716275	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	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)	12063	11778
	(9) Value of interest in common/collective trusts	1c(9)	27129	69643
	(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)	985291	1487159
	(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	1024483	1568580

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	1024483	1568580
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	123273	
(B) Participants	2a(1)(B)	261055	
(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)		384328
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)	857	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		857
(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)	17558	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		17558
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		609
(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)		172243
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		575595

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	30823	
(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)		30823
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)	675	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		675
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		31498

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		544097
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: BRIMER, PERRY & ASSOCIATES

(2) EIN: 20-0624227

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		103000
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 2010 This Form is Open to Public Inspection.
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan <u>SCHMITZ & SCHMITZ PROPERTIES, IN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SCHMITZ & SCHMITZ PROPERTIES, IN</u>	D Employer Identification Number (EIN) <u>75-2716275</u>

Part I	Distributions
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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>57-1198022</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)
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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
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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
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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.
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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) 2010
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): _____

Schmitz & Schmitz Properties, Inc.

AUDITED FINANCIAL STATEMENTS

Year Ended December 31, 2010

Schmitz & Schmitz Properties, Inc.

Year Ended December 31, 2010

Table of Contents

Independent Auditors' Report	1
Financial Statements:	
Statements of Net Assets Available for Benefits - Modified Cash Basis	3
Statements of Changes in Net Assets Available for Benefits-Modified Cash Basis	4
Notes to Financial Statements	5
Schedules:	
Form 5500, Schedule H, Line 4i - Schedule of Assets Held for Investment Purposes	13

BRIMER, PERRY & ASSOCIATES

Certified Public Accountants

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REPORT OF INDEPENDENT AUDITORS

To The Board of Directors and Plan Administrator of
Schmitz & Schmitz Properties, Inc 401(k) Plan
(formally TrendStaff LLC 401K Plan)

We were engaged to audit the statement of net assets available for benefits – modified cash basis of the Schmitz & Schmitz Properties Inc. 401(k) plan (the “plan”) as of December 31, 2009 and 2010 and the statement of changes in net assets – modified cash basis available for benefits for the year ended December 31, 2010, and for the supplemental schedule of assets held for investment as of December 31, 2010. These financial statements and schedule are the responsibility of the Plan’s management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor’s Rules (DOL) 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 the footnotes to the financial statements, which was certified by the trustee of the Plan for the year ended December 31, 2010, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan Administrator that the trustee holds the Plan’s investments assets and execute investment transactions. The Plan Administrator has obtained a certification from the trustee as of and for the year ended December 31, 2010 and the information provided to the plan Administrator by the agent of the trustee is complete and accurate.

As described in the footnotes to the financial statements, these financial statements and supplemental schedule were 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 schedule taken as a whole. The form and content of the information included in the financial statements and 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.

A handwritten signature in cursive script that reads "Brimer, Perry & Associates".

Brimer, Perry and Associates
Certified Public Accountants
Arlington, Texas

July 8, 2011

Schmitz & Schmitz Properties, Inc.
Statements of Net Assets Available for Benefits - Modified Cash Basis
As of December 31,

	2010	2009
ASSETS		
Investments, at fair value		
Value of interest in common/collective trusts	\$69,643	\$27,129
Shares of registered investment companies:		
Mutual Funds - Separate Accounts	<u>1,487,159</u>	<u>985,291</u>
Total Investments	1,556,802	1,012,420
Receivables:		
Participant loans	<u>11,778</u>	<u>12,063</u>
Total Assets	<u><u>\$1,568,580</u></u>	<u><u>\$1,024,483</u></u>
Liabilities		
	<u> </u>	<u> </u>
Net assets available for benefits	<u><u>\$1,568,580</u></u>	<u><u>\$1,024,483</u></u>

See accompanying notes to financial statements.

Schmitz & Schmitz Properties, Inc.
Statements of Changes in Net Assets Available for Benefits - Modified Cash Basis
Year Ended December 31, 2010

Additions in Net Assets Attributed To:

Investment income:	
Net realized and unrealized gain in fair value of investments	\$172,243
Net investment gain from common/collective trusts	609
Dividends from investment company shares	17,558
Interest from participant loans	857
	191,267
Employer contributions	123,273
Participant contributions	261,055
Participant rollovers	0
	384,328
Total Additions	575,595

Deductions from Assets Attributed to:

Administrative Expenses and Commissions	675
Benefits paid to participants	30,823
Total Deductions	
	31,498
Net Increase in Net Assets Available for Benefits	544,097
Net assets available for benefits at the beginning of the year	
	1,024,483
Net assets available for benefits at the end of the year	
	<u>\$1,568,580</u>

See accompanying notes to financial statements.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS

December 31, 2010

A. Description of Plan

The following description of the Schmitz & Schmitz Properties, Inc. 401(k) plan (the “Plan”) is provided for general information purposes only. The plan Sponsor is Schmitz & Schmitz Properties, Inc. The Plan changed its name and Federal ID number during 2011. The Plan is filing its Form 5500 under the new Plan name and number in order to notify the Department of Labor and Internal Revenue Service of the change. Participants should refer to the Plan Agreement for more complete information.

General

The Plan was adopted effective January 1, 2008, and amended November 19, 2009, and is a qualified defined contribution plan covering all eligible employees of Schmitz & Schmitz Properties, Inc. and subsidiaries (Company) who have completed three months of service and are 21 years of age or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). Automatic Data Processing, Inc (ADP), acts as record keeper and third party administrator of the Plan. State Street Bank and Trust Company acts as the trustee of the Plan.

Contributions

Each year, participants may contribute up to 60 percent of either their pretax or after tax (ROTH) compensation, as defined in the Plan, subject to certain maximum dollar amounts, which are indexed for inflation and adjusted for age. The Company makes matching contributions up to 4% of the amount of the participant’s elective deferrals, as defined by the “safe harbor” 401(k) plan election effective in 2008. The Company made a matching contribution in the amount of \$121,217 for 2009 and \$123,273 for 2010.

Participant Accounts

Each participant’s account is credited with the participant’s contributions and allocations of (a) the Company’s contribution and (b) Plan earnings. Allocations are based on participant 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 balance.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Description of Plan – continued

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Employer's contribution is also immediate.

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. For termination of service due to other reasons, a participant with an account balance of \$5,000 or less may automatically have benefits distributed in a lump-sum payment.

A participant may receive a hardship distribution of his or her salary reduction contributions if the distribution is (1) an account of medical expenses incurred by the participant, his spouse or dependents, (2) to purchase (excluding mortgage payments) a principal residence of the participant, (3) for the payment of tuition, related educational fees and room and board for the next twelve months of post secondary education for the participant, his spouse, children or dependents, (4) needed to prevent eviction of the participant from his principal residence or foreclosure upon the mortgage of the participant's principal residence, (5) for the payment of funeral expenses for your deceased parent, spouse, children or other dependents or your primary beneficiary under the Plan, or (6) expenses for the repair of damage to your principal residence that would qualify for the casualty deduction under the Internal Revenue Code.

Loans to Participants

Participants may borrow up to 50% from their vested balance and the loan is collateralized by their vested balance. Loans must be repaid within five years, unless used to purchase primary residence. Interest is charged at the rate of The Wall Street Journal prime rate plus 2% and is credited to the participant's account when paid.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Description of Plan – continued

Forfeiture

Forfeitures may be used to reduce Employer contributions for the Plan year. The available forfeitures available and used by the plan were \$196 for 2010.

Administrative Expenses

The Plan pays substantially all administrative fees and expense related to maintaining the Plan. Fees of \$675 were charged to the plan in 2010. The Sponsor pays the majority of the administrative costs through their payroll costs of the plan administrator, ADP charges, and other overhead and administrative costs. Indirect fees from mutual funds are paid by the plan and are reductions to the earnings of the mutual funds.

B. Summary of Accounting Principles

Basis of Accounting

The trustee prepares the Plan's fund statements on a modified cash basis and also reports assets on Form 5500 on a modified cash basis. Accordingly, the accompanying financial statements are also presented on the modified cash basis of accounting whereby cash basis assets have been adjusted to reflect investments at fair value. This is a comprehensive basis of accounting other than U. S. generally accepted accounting principles that is acceptable under ERISA and DOL regulations. The Plan does not account for liabilities and, accordingly, recognizes expenditures when money is disbursed.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of American requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Summary of Accounting Principles – Continued

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year end. These investments are subject to market and/or credit risks customarily associated with equity investments.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The investments are subject to market or credit risks customarily associated with debt and equity investments.

The financial statements reflect the adoption of Statement on Financial Accounting Standards No. 157 (SFAS No. 157), Fair Value Measurements. SFAS No. 157 is effective for financial statements issued for fiscal years beginning after November 17, 2007. SFAS No. 157 established a single authoritative definition of fair value, sets a framework for measuring fair value and requires additional disclosures about fair value measurement.

In accordance with SFAS No. 157, the Plan classified its investments into Level 1, which refers to securities traded in an active market. Level 2 and Level 3 do not apply to the Plan

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

C. Investments

The following presents investments at December 31, represent 5% or more of the Plan's net assets:

<u>Investment</u>	<u>2010</u>	<u>2009</u>
Janus Adv Fort Fund - S	*	58,405
T Rowe Price Retirement 2040-R	79,692	*
T Rowe International G&I Advisor CL	*	62,779
INVVK Equity & Income - A	137,572	111,514
T Rowe Price Retirement 2010-R	92,256	53,594
T Rowe Price Retirement 2020-R	109,765	59,478
T Rowe Price Retirement 2030-R	173,894	124,805
Fidelity Advisor Lev Co Stk – T	169,612	100,584

* Did not represent 5%

D. 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. Because the Plan is a defined contribution plan, it is not covered by Pension Benefit Guaranty Coverage insurance.

E. Tax Status

The Plan has received a determination letter from the Internal Revenue Service (the "IRS") dated March 31, 2008; stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "Code") and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax counsel believe that the plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

F. Plan Amendments and Changes

The Plan amended the Plan Agreement on November 19, 2009 to comply with federal legislation .

G. Party-In-Interest Transactions

ADP is the record keeper and third party administrator of the plan and as such is a party-in-interest with respect to the plan. Fees paid to ADP aggregated \$675 in 2010 which does not include indirect fees paid to ADP as broker/dealer commissions by the mutual funds. State Street Bank & Trust Company is the Plan's trustee.

H. Financial Information Certified by the Plan's Custodians (Unaudited)

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator instructed the independent auditors not to perform any auditing procedures with respect to the following information certified as complete and accurate by State Street Bank, the custodians and parties-in-interest as defined by ERISA, as of December 31, 2007, except for comparing such information certified by the custodians to information included in the Plan's financial statements. The information consists of the following:

Registered investment company funds	\$ 1,487,159
Common/collective trusts	69,643
Participant loans	11,778
	<u>\$ 1,024,483</u>
	=====
Benefits paid	30,823
Interest on participant loans	857
Net gain in investments and CCT	172,852
Dividend income	17,558

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

J. Concentrations of Risk

The Plan's investments are not insured by agencies of the United States government. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with investments, it is at least reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits. The maximum amount of loss due to credit risk that the Plan would incur if parties to the financial instruments failed to perform according to the terms of the contracts and the collateral, in any, proved to be of no value would approximate the balances that appear on the Statement of Net Assets Available for Benefits.

K. Investment Options

Upon enrollment in the Plan, a participant may direct contributions in any of several investment options, and may change their investment options at anytime via the internet. At December 31, the following investment options were available:

Income Funds:

1. SSGA Stable Value Fund
2. PIMCO Real Return Fund – Class A
3. PIMCO Total Return fund – Class A
4. Oppenheimer Global Strategic Income Fund – Class A

Growth & Income:

1. INVVK Equity and Income Fund – Class A
2. T Rowe Price Retirement Income Fund – R Class
3. T Rowe Price Retirement 2010 Fund – R Class
4. T Rowe Price Retirement 2020 Fund – R Class
5. T Rowe Price Retirement 2030 Fund – R Class
6. T Rowe Price Retirement 2040 Fund – R Class

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Investment Options – Continued

Growth:

1. Blackrock Large Cap Value Fund – Class A
2. Davis New York Venture Fund – Class A
3. Neuberger Berman Socially Responsive Fund – Trust Class
4. Janus Adviser Forty Fund – Class S
5. Delafield Fund, Inc
6. Fidelity Advisor Leverage Company Stock Fund – Class T
7. Alger MidCap Growth Institutional Fund – Class I

Aggressive Growth:

1. Alger Capital Appreciation Institutional Fund – Class I
2. Janus Adviser International Growth Fund – Class S
3. Phoenix Foreign Opportunities Fund – Class A
4. T Rowe Price International Growth & Income Fund – Advisor Class
5. Investco Developing Markets Fund – Class A
6. Allianz NFJ Small-Cap Value Fund – Class A
7. Oppenheimer Main Street Small Cap Fund – Class A
8. JP Morgan Small Cap Growth fund – Class A
9. Investco Real Estate Fund – Class A
10. Virtus Foreign Opportunity A

SUPPLEMENTAL SCHEDULE

Schmitz & Schmitz Properties, Inc.
Form 5500, Schedule H, Line 4i - Schedule of Assets Held for Investment
Purposes at End of Year
December 31, 2010

EIN: 75-2716275
Plan 001

(a)	(b) Identity of Issue	(c) Description of Investments	(d) Cost	(e) Current Value
		MUTUAL FUNDS		
	SSGA Stable Value Fund	Common/Collective Trust	NA	69,643
	PIMCO Real Return Fund - A	Registered Investment Company	NA	26,970
	Invesco Developing Markets - A	Registered Investment Company	NA	45,522
	Delafield Fund	Registered Investment Company	NA	29,502
	Invesco Real Estate - A	Registered Investment Company	NA	25,519
	Neuberger Soc Res - Trust	Registered Investment Company	NA	5,712
	JP Morgan Small Cap Growth - A	Registered Investment Company	NA	51,820
	Janus Adv Forty Fund - S	Registered Investment Company	NA	71,496
	Janus Overseas Fund - S	Registered Investment Company	NA	58,151
	Oppenheimer Global Strateg Income - A	Registered Investment Company	NA	67,257
	Alger Midcap Growth Instit - I	Registered Investment Company	NA	40,708
	Oppenheimer Main St Sm Cap A	Registered Investment Company	NA	52,430
	T Rowe Int G&I Advisor CI	Registered Investment Company	NA	77,742
	PIMCO Total Return Fund - A	Registered Investment Company	NA	22,036
	Allianz NFJ Small-Cap Value - A	Registered Investment Company	NA	11,721
	INVVK Equity & Income - A	Registered Investment Company	NA	137,572
	Davis New York Venture Fund - A	Registered Investment Company	NA	11,368
	Alger Capial Appr Instit - I	Registered Investment Company	NA	23,097
	Blackrock Lg Cap Val Fund - A	Registered Investment Company	NA	73,093
	T Rowe Price Retirement 2020-R	Registered Investment Company	NA	109,765
	T Rowe Price Retirement 2030-R	Registered Investment Company	NA	173,894
	T Rowe Price Retirement 2040-R	Registered Investment Company	NA	79,692
	Fidelity Advisor Lev Co Stk - T	Registered Investment Company	NA	169,612
	T Rowe Price Retirement Inc-R	Registered Investment Company	NA	8,767
	T Rowe Price Retirement 2010-R	Registered Investment Company	NA	92,256
	Virtus Foreign Opport A	Registered Investment Company	NA	21,457
*	Participant Loans	Participant loans secured by participant vested accrued benefits with interest at 5.25% to 7% with varying maturities	-0-	11,778
		Total Mutual Funds	0	1,568,580
		Total	\$ -	\$ 1,568,580

* Indicates a party-in-interest to the Plan.

Schedule C, Line 2(h) Formula Description

For those service providers listed on Line 2 for which Line 2(h) has been checked “yes”:

For a description of indirect compensation received by service providers listed on Line 2 that was disclosed as a formula, please see Line 3(e). Please note: If indirect compensation disclosed as a formula was received by a service provider from more than one source, there will be multiple Lines 3(e) for that service provider.

Schmitz & Schmitz Properties, Inc.

AUDITED FINANCIAL STATEMENTS

Year Ended December 31, 2010

Schmitz & Schmitz Properties, Inc.

Year Ended December 31, 2010

Table of Contents

Independent Auditors' Report	1
Financial Statements:	
Statements of Net Assets Available for Benefits - Modified Cash Basis	3
Statements of Changes in Net Assets Available for Benefits-Modified Cash Basis	4
Notes to Financial Statements	5
Schedules:	
Form 5500, Schedule H, Line 4i - Schedule of Assets Held for Investment Purposes	13

BRIMER, PERRY & ASSOCIATES

Certified Public Accountants

An Association of Professional Corporations
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817-795-1040 • Metro 817-265-8844 • Fax 817-265-4276



REPORT OF INDEPENDENT AUDITORS

To The Board of Directors and Plan Administrator of
Schmitz & Schmitz Properties, Inc 401(k) Plan
(formally TrendStaff LLC 401K Plan)

We were engaged to audit the statement of net assets available for benefits – modified cash basis of the Schmitz & Schmitz Properties Inc. 401(k) plan (the “plan”) as of December 31, 2009 and 2010 and the statement of changes in net assets – modified cash basis available for benefits for the year ended December 31, 2010, and for the supplemental schedule of assets held for investment as of December 31, 2010. These financial statements and schedule are the responsibility of the Plan’s management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor’s Rules (DOL) 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 the footnotes to the financial statements, which was certified by the trustee of the Plan for the year ended December 31, 2010, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan Administrator that the trustee holds the Plan’s investments assets and execute investment transactions. The Plan Administrator has obtained a certification from the trustee as of and for the year ended December 31, 2010 and the information provided to the plan Administrator by the agent of the trustee is complete and accurate.

As described in the footnotes to the financial statements, these financial statements and supplemental schedule were 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 schedule taken as a whole. The form and content of the information included in the financial statements and 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.

A handwritten signature in cursive script that reads "Brimer, Perry & Associates".

Brimer, Perry and Associates
Certified Public Accountants
Arlington, Texas

July 8, 2011

Schmitz & Schmitz Properties, Inc.
Statements of Net Assets Available for Benefits - Modified Cash Basis
As of December 31,

	2010	2009
ASSETS		
Investments, at fair value		
Value of interest in common/collective trusts	\$69,643	\$27,129
Shares of registered investment companies:		
Mutual Funds - Separate Accounts	<u>1,487,159</u>	<u>985,291</u>
Total Investments	1,556,802	1,012,420
Receivables:		
Participant loans	<u>11,778</u>	<u>12,063</u>
Total Assets	<u><u>\$1,568,580</u></u>	<u><u>\$1,024,483</u></u>
Liabilities		
	<u> </u>	<u> </u>
Net assets available for benefits	<u><u>\$1,568,580</u></u>	<u><u>\$1,024,483</u></u>

See accompanying notes to financial statements.

Schmitz & Schmitz Properties, Inc.
Statements of Changes in Net Assets Available for Benefits - Modified Cash Basis
Year Ended December 31, 2010

Additions in Net Assets Attributed To:

Investment income:	
Net realized and unrealized gain in fair value of investments	\$172,243
Net investment gain from common/collective trusts	609
Dividends from investment company shares	17,558
Interest from participant loans	857
	191,267
Employer contributions	123,273
Participant contributions	261,055
Participant rollovers	0
	384,328
Total Additions	575,595

Deductions from Assets Attributed to:

Administrative Expenses and Commissions	675
Benefits paid to participants	30,823
Total Deductions	
	31,498
Net Increase in Net Assets Available for Benefits	544,097
Net assets available for benefits at the beginning of the year	
	1,024,483
Net assets available for benefits at the end of the year	
	<u>\$1,568,580</u>

See accompanying notes to financial statements.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS

December 31, 2010

A. Description of Plan

The following description of the Schmitz & Schmitz Properties, Inc. 401(k) plan (the “Plan”) is provided for general information purposes only. The plan Sponsor is Schmitz & Schmitz Properties, Inc. The Plan changed its name and Federal ID number during 2011. The Plan is filing its Form 5500 under the new Plan name and number in order to notify the Department of Labor and Internal Revenue Service of the change. Participants should refer to the Plan Agreement for more complete information.

General

The Plan was adopted effective January 1, 2008, and amended November 19, 2009, and is a qualified defined contribution plan covering all eligible employees of Schmitz & Schmitz Properties, Inc. and subsidiaries (Company) who have completed three months of service and are 21 years of age or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). Automatic Data Processing, Inc (ADP), acts as record keeper and third party administrator of the Plan. State Street Bank and Trust Company acts as the trustee of the Plan.

Contributions

Each year, participants may contribute up to 60 percent of either their pretax or after tax (ROTH) compensation, as defined in the Plan, subject to certain maximum dollar amounts, which are indexed for inflation and adjusted for age. The Company makes matching contributions up to 4% of the amount of the participant’s elective deferrals, as defined by the “safe harbor” 401(k) plan election effective in 2008. The Company made a matching contribution in the amount of \$121,217 for 2009 and \$123,273 for 2010.

Participant Accounts

Each participant’s account is credited with the participant’s contributions and allocations of (a) the Company’s contribution and (b) Plan earnings. Allocations are based on participant 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 balance.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Description of Plan – continued

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Employer's contribution is also immediate.

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. For termination of service due to other reasons, a participant with an account balance of \$5,000 or less may automatically have benefits distributed in a lump-sum payment.

A participant may receive a hardship distribution of his or her salary reduction contributions if the distribution is (1) an account of medical expenses incurred by the participant, his spouse or dependents, (2) to purchase (excluding mortgage payments) a principal residence of the participant, (3) for the payment of tuition, related educational fees and room and board for the next twelve months of post secondary education for the participant, his spouse, children or dependents, (4) needed to prevent eviction of the participant from his principal residence or foreclosure upon the mortgage of the participant's principal residence, (5) for the payment of funeral expenses for your deceased parent, spouse, children or other dependents or your primary beneficiary under the Plan, or (6) expenses for the repair of damage to your principal residence that would qualify for the casualty deduction under the Internal Revenue Code.

Loans to Participants

Participants may borrow up to 50% from their vested balance and the loan is collateralized by their vested balance. Loans must be repaid within five years, unless used to purchase primary residence. Interest is charged at the rate of The Wall Street Journal prime rate plus 2% and is credited to the participant's account when paid.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Description of Plan – continued

Forfeiture

Forfeitures may be used to reduce Employer contributions for the Plan year. The available forfeitures available and used by the plan were \$196 for 2010.

Administrative Expenses

The Plan pays substantially all administrative fees and expense related to maintaining the Plan. Fees of \$675 were charged to the plan in 2010. The Sponsor pays the majority of the administrative costs through their payroll costs of the plan administrator, ADP charges, and other overhead and administrative costs. Indirect fees from mutual funds are paid by the plan and are reductions to the earnings of the mutual funds.

B. Summary of Accounting Principles

Basis of Accounting

The trustee prepares the Plan's fund statements on a modified cash basis and also reports assets on Form 5500 on a modified cash basis. Accordingly, the accompanying financial statements are also presented on the modified cash basis of accounting whereby cash basis assets have been adjusted to reflect investments at fair value. This is a comprehensive basis of accounting other than U. S. generally accepted accounting principles that is acceptable under ERISA and DOL regulations. The Plan does not account for liabilities and, accordingly, recognizes expenditures when money is disbursed.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of American requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Summary of Accounting Principles – Continued

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year end. These investments are subject to market and/or credit risks customarily associated with equity investments.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The investments are subject to market or credit risks customarily associated with debt and equity investments.

The financial statements reflect the adoption of Statement on Financial Accounting Standards No. 157 (SFAS No. 157), Fair Value Measurements. SFAS No. 157 is effective for financial statements issued for fiscal years beginning after November 17, 2007. SFAS No. 157 established a single authoritative definition of fair value, sets a framework for measuring fair value and requires additional disclosures about fair value measurement.

In accordance with SFAS No. 157, the Plan classified its investments into Level 1, which refers to securities traded in an active market. Level 2 and Level 3 do not apply to the Plan

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

C. Investments

The following presents investments at December 31, represent 5% or more of the Plan's net assets:

<u>Investment</u>	<u>2010</u>	<u>2009</u>
Janus Adv Fort Fund - S	*	58,405
T Rowe Price Retirement 2040-R	79,692	*
T Rowe International G&I Advisor CL	*	62,779
INVVK Equity & Income - A	137,572	111,514
T Rowe Price Retirement 2010-R	92,256	53,594
T Rowe Price Retirement 2020-R	109,765	59,478
T Rowe Price Retirement 2030-R	173,894	124,805
Fidelity Advisor Lev Co Stk – T	169,612	100,584

* Did not represent 5%

D. 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. Because the Plan is a defined contribution plan, it is not covered by Pension Benefit Guaranty Coverage insurance.

E. Tax Status

The Plan has received a determination letter from the Internal Revenue Service (the "IRS") dated March 31, 2008; stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "Code") and, therefore, the related trust is exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax counsel believe that the plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

F. Plan Amendments and Changes

The Plan amended the Plan Agreement on November 19, 2009 to comply with federal legislation .

G. Party-In-Interest Transactions

ADP is the record keeper and third party administrator of the plan and as such is a party-in-interest with respect to the plan. Fees paid to ADP aggregated \$675 in 2010 which does not include indirect fees paid to ADP as broker/dealer commissions by the mutual funds. State Street Bank & Trust Company is the Plan's trustee.

H. Financial Information Certified by the Plan's Custodians (Unaudited)

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator instructed the independent auditors not to perform any auditing procedures with respect to the following information certified as complete and accurate by State Street Bank, the custodians and parties-in-interest as defined by ERISA, as of December 31, 2007, except for comparing such information certified by the custodians to information included in the Plan's financial statements. The information consists of the following:

Registered investment company funds	\$ 1,487,159
Common/collective trusts	69,643
Participant loans	11,778
	<u>\$ 1,024,483</u>
	=====
Benefits paid	30,823
Interest on participant loans	857
Net gain in investments and CCT	172,852
Dividend income	17,558

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

J. Concentrations of Risk

The Plan's investments are not insured by agencies of the United States government. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with investments, it is at least reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits. The maximum amount of loss due to credit risk that the Plan would incur if parties to the financial instruments failed to perform according to the terms of the contracts and the collateral, in any, proved to be of no value would approximate the balances that appear on the Statement of Net Assets Available for Benefits.

K. Investment Options

Upon enrollment in the Plan, a participant may direct contributions in any of several investment options, and may change their investment options at anytime via the internet. At December 31, the following investment options were available:

Income Funds:

1. SSGA Stable Value Fund
2. PIMCO Real Return Fund – Class A
3. PIMCO Total Return fund – Class A
4. Oppenheimer Global Strategic Income Fund – Class A

Growth & Income:

1. INVVK Equity and Income Fund – Class A
2. T Rowe Price Retirement Income Fund – R Class
3. T Rowe Price Retirement 2010 Fund – R Class
4. T Rowe Price Retirement 2020 Fund – R Class
5. T Rowe Price Retirement 2030 Fund – R Class
6. T Rowe Price Retirement 2040 Fund – R Class

Schmitz & Schmitz Properties, Inc.

NOTES TO FINANCIAL STATEMENTS (continued)

December 31, 2010

Investment Options – Continued

Growth:

1. Blackrock Large Cap Value Fund – Class A
2. Davis New York Venture Fund – Class A
3. Neuberger Berman Socially Responsive Fund – Trust Class
4. Janus Adviser Forty Fund – Class S
5. Delafield Fund, Inc
6. Fidelity Advisor Leverage Company Stock Fund – Class T
7. Alger MidCap Growth Institutional Fund – Class I

Aggressive Growth:

1. Alger Capital Appreciation Institutional Fund – Class I
2. Janus Adviser International Growth Fund – Class S
3. Phoenix Foreign Opportunities Fund – Class A
4. T Rowe Price International Growth & Income Fund – Advisor Class
5. Investco Developing Markets Fund – Class A
6. Allianz NFJ Small-Cap Value Fund – Class A
7. Oppenheimer Main Street Small Cap Fund – Class A
8. JP Morgan Small Cap Growth fund – Class A
9. Investco Real Estate Fund – Class A
10. Virtus Foreign Opportunity A

SUPPLEMENTAL SCHEDULE

Schmitz & Schmitz Properties, Inc.
Form 5500, Schedule H, Line 4i - Schedule of Assets Held for Investment
Purposes at End of Year
December 31, 2010

EIN: 75-2716275
Plan 001

(a)	(b) Identity of Issue	(c) Description of Investments	(d) Cost	(e) Current Value
		MUTUAL FUNDS		
	SSGA Stable Value Fund	Common/Collective Trust	NA	69,643
	PIMCO Real Return Fund - A	Registered Investment Company	NA	26,970
	Invesco Developing Markets - A	Registered Investment Company	NA	45,522
	Delafield Fund	Registered Investment Company	NA	29,502
	Invesco Real Estate - A	Registered Investment Company	NA	25,519
	Neuberger Soc Res - Trust	Registered Investment Company	NA	5,712
	JP Morgan Small Cap Growth - A	Registered Investment Company	NA	51,820
	Janus Adv Forty Fund - S	Registered Investment Company	NA	71,496
	Janus Overseas Fund - S	Registered Investment Company	NA	58,151
	Oppenheimer Global Strateg Income - A	Registered Investment Company	NA	67,257
	Alger Midcap Growth Instit - I	Registered Investment Company	NA	40,708
	Oppenheimer Main St Sm Cap A	Registered Investment Company	NA	52,430
	T Rowe Int G&I Advisor CI	Registered Investment Company	NA	77,742
	PIMCO Total Return Fund - A	Registered Investment Company	NA	22,036
	Allianz NFJ Small-Cap Value - A	Registered Investment Company	NA	11,721
	INVVK Equity & Income - A	Registered Investment Company	NA	137,572
	Davis New York Venture Fund - A	Registered Investment Company	NA	11,368
	Alger Capial Appr Instit - I	Registered Investment Company	NA	23,097
	Blackrock Lg Cap Val Fund - A	Registered Investment Company	NA	73,093
	T Rowe Price Retirement 2020-R	Registered Investment Company	NA	109,765
	T Rowe Price Retirement 2030-R	Registered Investment Company	NA	173,894
	T Rowe Price Retirement 2040-R	Registered Investment Company	NA	79,692
	Fidelity Advisor Lev Co Stk - T	Registered Investment Company	NA	169,612
	T Rowe Price Retirement Inc-R	Registered Investment Company	NA	8,767
	T Rowe Price Retirement 2010-R	Registered Investment Company	NA	92,256
	Virtus Foreign Opport A	Registered Investment Company	NA	21,457
*	Participant Loans	Participant loans secured by participant vested accrued benefits with interest at 5.25% to 7% with varying maturities	-0-	11,778
		Total Mutual Funds	0	1,568,580
		Total	\$ -	\$ 1,568,580

* Indicates a party-in-interest to the Plan.

Attachment to 2010 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name PlanName1
Plan Sponsor's Name SCHMITZ & SCHMITZ PROPERTIES, IN

EIN: 75-2716275
PN: 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	PIMCO REAL RETURN FUND - A	REGISTERED INVESTMENT COMPANY		26,970
	INVESCO DEVELOPING MARKETS A	REGISTERED INVESTMENT COMPANY		45,522
	DELAFIELD FUND INC	REGISTERED INVESTMENT COMPANY		29,502
	INVESCO REAL ESTATE - A	REGISTERED INVESTMENT COMPANY		25,519
	NEUBERGER SOC RES - TRUST	REGISTERED INVESTMENT COMPANY		5,712
	JPMORGAN SMALL CAP GROWTH - A	REGISTERED INVESTMENT COMPANY		51,820
	OPPENHEIMER GLBL STRAT INC A	REGISTERED INVESTMENT COMPANY		67,257

Attachment to 2010 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name _____
Plan Sponsor's Name _____

EIN: _____
PN: _____

(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
	ALGER MID CAP GROWTH INSTL - I	REGISTERED INVESTMENT COMPANY		40,708
	OPP MAIN ST SM & MID CAP A	REGISTERED INVESTMENT COMPANY		52,430
	T ROWE INT G&I ADVISOR CL	REGISTERED INVESTMENT COMPANY		77,742
	PIMCO TOTAL RETURN FUND - A	REGISTERED INVESTMENT COMPANY		22,036
	ALLIANZ NFJ SMALL-CAP VALUE -A	REGISTERED INVESTMENT COMPANY		11,721
	DAVIS NEW YORK VENTURE FUND- A	REGISTERED INVESTMENT COMPANY		11,368
	ALGER CAPITAL APPR INSTIT - I	REGISTERED INVESTMENT COMPANY		23,097

Attachment to 2010 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name _____ EIN: _____
 Plan Sponsor's Name _____ PN: _____

(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
	BLACKROCK LARGE CAP VALUE - A	REGISTERED INVESTMENT COMPANY		73,093
	JANUS FORTY FUND - S	REGISTERED INVESTMENT COMPANY		71,496
	JANUS OVERSEAS FUND - S	REGISTERED INVESTMENT COMPANY		58,151
	INVVK EQUITY AND INCOME A	REGISTERED INVESTMENT COMPANY		137,572
	T.ROWE PRICE RETIREMENT 2020-R	REGISTERED INVESTMENT COMPANY		109,765
	T.ROWE PRICE RETIREMENT 2030-R	REGISTERED INVESTMENT COMPANY		173,894
	T.ROWE PRICE RETIREMENT 2040-R	REGISTERED INVESTMENT COMPANY		79,692

Attachment to 2010 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name _____
 Plan Sponsor's Name _____

EIN: _____
 PN: _____

(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
	FIDELITY ADVISOR LEV CO STK -T	REGISTERED INVESTMENT COMPANY		169,612
	T. ROWE PRICE RETIREMENT INC-R	REGISTERED INVESTMENT COMPANY		8,767
	T. ROWE PRICE RETIREMENT 2010-R	REGISTERED INVESTMENT COMPANY		92,256
	VIRTUS FOREIGN OPPORT A	REGISTERED INVESTMENT COMPANY		21,457
	PARTICIPANT LOANS	INTEREST RATES (5.25% TO 7.00%)		11,778
	SSGA STABLE VALUE FUND	COMMON/COLLECTIVE TRUST		69,643