# 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**

## Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

**A** This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

**B** This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

**C** If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

**D** Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
FIRST CO. 401 K RETIREMENT PLAN

**1b** Three-digit plan number (PN) ▶ 001

**1c** Effective date of plan 02/01/1970

**2a** Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
FIRST CO.

PO BOX 180849
DALLAS, TX 75218-0849

**2b** Employer Identification Number (EIN)
75-1232784

**2c** Sponsor's telephone number
214-388-5751

**2d** Business code (see instructions)
333410

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

| | | | |
|---|---|---|---|
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 07/29/2011 | JAMES H. NATION |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | | | |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| **SIGN HERE** | | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

**3a** Plan administrator's name and address (if same as plan sponsor, enter "Same")

FIRST CO.

PO BOX 180849
DALLAS, TX 75218-0849

**3b** Administrator's EIN
75-1232784

**3c** Administrator's telephone number
214-388-5751

**4** If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

**a** Sponsor's name

**4b** EIN

**4c** PN

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 302 |
| **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** | 262 |
| **b** | Retired or separated participants receiving benefits | **6b** | 1 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 20 |
| **d** | Subtotal. Add lines **6a**, **6b**, and **6c** | **6d** | 283 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits | **6e** | 0 |
| **f** | Total. Add lines **6d** and **6e** | **6f** | 283 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 280 |
| **h** | Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 5 |
| **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 2T 3D 3F

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

**9a** Plan funding arrangement (check all that apply)

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

**9b** Plan benefit arrangement (check all that apply)

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

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

**a Pension Schedules**

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

**b General Schedules**

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

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2010**<br>**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
FIRST CO. 401 K RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
FIRST CO.

**D** Employer Identification Number (EIN)
75-1232784

## Part I Service Provider Information (see instructions)

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

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

THE VANGUARD GROUP, INC

23-1945930

| (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? |
|---|---|---|---|---|---|---|
| 15 37 52 | NONE | 16665 | Yes [X] No [ ] | Yes [X] No [ ] | 0 | Yes [ ] No [X] |

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

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

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

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

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

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

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

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

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

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

## Part I Service Provider Information (continued)

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

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

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

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

## Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

**Part III** **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

# SCHEDULE 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
FIRST CO. 401 K RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
FIRST CO.

**D** Employer Identification Number (EIN)
75-1232784

## 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: VANGUARD RETIREMENT SAVINGS TRUST

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **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) |
|---|---|---|
| 23-2186884-022 | C | 5494224 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| | | |

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|

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

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

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**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
FIRST CO. 401 K RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
FIRST CO.

**D** Employer Identification Number (EIN)
75-1232784

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | | |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | | |
| **(2)** Participant contributions | 1b(2) | | |
| **(3)** Other | 1b(3) | | |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | |
| **(2)** U.S. Government securities | 1c(2) | | |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | | |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | 751414 | 769921 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 5555652 | 5494224 |
| **(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) | 10920287 | 11250752 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **1d** Employer-related investments: | | | |
| **(1)** Employer securities | 1d(1) | | |
| **(2)** Employer real property | 1d(2) | | |
| **e** Buildings and other property used in plan operation | 1e | | |
| **f** Total assets (add all amounts in lines 1a through 1e) | 1f | 17227353 | 17514897 |
| **Liabilities** | | | |
| **g** Benefit claims payable | 1g | | |
| **h** Operating payables | 1h | | |
| **i** Acquisition indebtedness | 1i | | |
| **j** Other liabilities | 1j | | |
| **k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 0 | 0 |
| **Net Assets** | | | |
| **l** Net assets (subtract line 1k from line 1f) | 1l | 17227353 | 17514897 |

## 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) | 295461 | |
| **(B)** Participants | 2a(1)(B) | 513646 | |
| **(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) | | 809107 |
| **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) | 30175 | |
| **(F)** Other | 2b(1)(F) | | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 30175 |
| **(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) | 242468 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 242468 |
| **(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) | | 158822 |
| (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) | | 1145691 |
| c Other income | 2c | | 161 |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 2386424 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 2072556 | |
| (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) | | 2072556 |
| f Corrective distributions (see instructions) | 2f | | |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 12874 |
| 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) | 13450 | |
| (5) Total administrative expenses. Add lines 2i(1) through (4) | 2i(5) | | 13450 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 2098880 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line 2j from line 2d | 2k | | 287544 |
| 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: VIVIANO AND ASSOCIATES, P.A. (2) EIN: 75-2794910

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

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

## Part IV Compliance Questions

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

During the plan year:

| | | Yes | No | Amount |
|---|---|---|---|---|
| **a** | Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | 4a | | X | |
| **b** | Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | 4b | | X | |
| **c** | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | 4c | | X | |
| **d** | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | 4d | | X | |
| **e** | Was this plan covered by a fidelity bond? | 4e | X | | 500000 |
| **f** | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 4f | | X | |
| **g** | Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4g | | X | |
| **h** | Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4h | | X | |
| **i** | Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | 4i | X | | |
| **j** | Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.) | 4j | | X | |
| **k** | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 4k | | X | |
| **l** | Has the plan failed to provide any benefit when due under the plan? | 4l | | X | |
| **m** | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 4m | | X | |
| **n** | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | 4n | | X | |

**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.**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

**A** Name of plan
FIRST CO. 401 K RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
FIRST CO.

**D** Employer Identification Number (EIN)
75-1232784

## Part I Distributions

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

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

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

EIN(s): 23-2186884

**Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.**

**3** Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. ..... **3**

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

**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

**If the plan is a defined benefit plan, go to line 8.**

**5** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

**If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.**

**6** **a** Enter the minimum required contribution for this plan year ..... **6a**

**b** Enter the amount contributed by the employer to the plan for this plan year ..... **6b**

**c** Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... **6c**

**If you completed line 6c, skip lines 8 and 9.**

**7** Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

**8** If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

## Part III Amendments

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

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

**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

**11** **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

**b** If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

**12** Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

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

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

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

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

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

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

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

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

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

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

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

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

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

VIVIANO
AND ASSOCIATES, PC > CPAS

# INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of the
First Co. 401(k) Retirement Plan

We were engaged to audit the financial statements of First Co. 401(k) Retirement Plan as of December 31, 2010 and 2009, and for the year ended December 31, 2010, and the supplemental schedules as of and for the year ended December 31, 2010 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Vanguard Fiduciary Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee is complete and accurate.

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

Viviano & Associates, P.C.

Dallas, Texas
July 25, 2011

# FIRST CO. 401(k) RETIREMENT PLAN

Annual Plan-level Financial Reporting Package for the
years ended December 31, 2010 and 2009

Includes information required for Form 5500
for the year ended December 31, 2010

Plan 093517

VIVIANO
AND ASSOCIATES, PC > CPAS

# INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of the
First Co. 401(k) Retirement Plan

We were engaged to audit the financial statements of First Co. 401(k) Retirement Plan as of December 31, 2010 and 2009, and for the year ended December 31, 2010, and the supplemental schedules as of and for the year ended December 31, 2010 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Vanguard Fiduciary Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2010 and 2009, that the information provided to the plan administrator by the trustee is complete and accurate.

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

Viviano & Associates, P.C.

Dallas, Texas
July 25, 2011

First Co. 401(k) Retirement Plan

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Form 5500 Information*

Schedule of Assets Held for Investment Purposes at End of Year – Attachment for Schedule H, Line 4i

Schedule of Reportable Transactions – Attachment for Schedule H, Line 4j**


*Other supplemental schedules required by Section 2520.103-10 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.

**Transactions or a series of transactions in excess of 5% of the current value of the Plan's assets as of the beginning of the plan year as defined in section 2520.103-6 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA.

**FIRST CO. 401(K) RETIREMENT PLAN**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2010 AND 2009**

| | 2010 | 2009 |
|---|---|---|
| **Investments, at fair value** | | |
| Registered investment companies | $ 11,250,752 | $ 10,920,287 |
| **Investments, at contract value** | | |
| Vanguard Retirement Savings Trust | 5,494,224 | 5,555,652 |
| Loan fund | 769,921 | 751,414 |
| **TOTAL ASSETS** | $ 17,514,897 | $ 17,227,353 |
| **LIABILITIES** | - | - |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 17,514,897 | $ 17,227,353 |

See accompanying notes.

**FIRST CO. 401(K) RETIREMENT PLAN**
**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEAR ENDED DECEMBER 31, 2010**

| | | |
|---|---|---|
| **ADDITIONS** | | |
| Additions to net assets attributed to: | | |
| Investment income: | | |
| Interest and dividend income, investments | $ | 401,290 |
| Interest income, participant loans | | 30,175 |
| Net appreciation (depreciation) in fair value of investments | | 1,145,691 |
| | | 1,577,156 |
| Contributions: | | |
| Employer | | 295,461 |
| Participant | | 513,646 |
| | | 809,107 |
| Other additions | | 161 |
| **TOTAL ADDITIONS** | | 2,386,424 |
| **DEDUCTIONS** | | |
| Deductions from net assets attributed to: | | |
| Payments of benefits | | 2,072,556 |
| Deemed distributions of participant loans | | 12,874 |
| Adminstration expenses | | 13,450 |
| **TOTAL DEDUCTIONS** | | 2,098,880 |
| **NET INCREASE (DECREASE)** | | 287,544 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | | |
| Beginning of year | | 17,227,353 |
| **END OF YEAR** | $ | 17,514,897 |

See accompanying notes.

## NOTE 1 - DESCRIPTION OF PLAN

The following description of First Co. (the Company) 401(k) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

### General

The Plan is a safe harbor defined contribution plan covering all full-time employees of the Company who have performed six months of service and are at least 18 years of age. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

### Contributions

Each year, eligible employees may contribute pretax annual compensation, not to exceed the maximum permitted by law. Participants may also contribute distributions from other qualified plans. The Company makes matching contributions in an amount equal to employee elective deferrals that do not exceed 6% of participant compensation for the plan year. Participants direct the investment of their contributions into various investment options defined by the Plan. The Plan currently offers approximately twenty mutual funds and a retirement savings trust.

### Participant Accounts

Each participant's account is credited with the participant's contribution and the related matching contribution (funded monthly), and allocations of plan earnings, and charged with administrative expenses, as defined by the plan. Allocations of plan earnings are based on actual results of individual participant investment balances, as electively designated, and certified by the trustee. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

### Vesting

Participants are 100% vested in their elective deferrals, rollover contributions and matching contributions, plus actual earnings thereon. Vesting in the remaining account balance is based on years of service. A participant is 100% vested after six years.

## NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

Participant Loans

Active participants may borrow from their investment accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at the Prime Rate, as published by the Wall Street Journal. Loan repayments are made monthly by payroll deductions.

Payment of Benefits

On termination of service, a participant is eligible to receive a lump sum distribution of an amount equal to the value of the participant's vested interest in his or her account. For termination of service due to death or disability, the participant will be entitled to 100% of his or her account balance. Hardship distributions are allowed in certain circumstances as defined in the Plan.

Forfeited Accounts

Participants who are not 100% vested, and who receive a distribution of profit sharing contributions or other amounts subject to vesting provisions, are deemed to have forfeited their non-vested benefit. If a participant returns to work for the Company before five consecutive one year breaks in service, they may recapture the forfeited benefit, provided they repay the distribution received. Forfeitures may be applied first to payment of plan administrative expenses, and any remaining forfeitures are allocated to the remaining plan participants based on plan provisions.

Administrative Fees

The Company pays certain Plan related fees and expenses. However, to offset recordkeeping expenses incurred by the Company, individual participant accounts are charged $10 per quarter. Participants are also charged fees for loan initiation and maintenance.

## NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

Plan Termination

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Estimates

The preparation of financial statements in conformity with generally accepted accounting policies requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of registered investment companies are valued at quoted market prices which represent the net asset value of shares held by the Plan at year-end. Units of the Retirement Savings Trust are valued at net asset value at year-end, which approximates fair value. Participant loans are valued at cost, which approximates fair value.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is accrued when earned. Dividend income is recorded on the ex-dividend date. Capital gain distributions are included in dividend income.

Contributions

Contributions are recorded on the accrual basis.

Payment of Benefits

Benefits are recorded when paid.

## NOTE 3 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by the trustee.

| | 2010 | 2009 |
|---|---|---|
| Investments, at fair value: | | |
| Registered investment companies | $11,250,752 | $10,920,287 |
| Investments, at contract value: | | |
| Retirement savings trust | 5,494,224 | 5,555,652 |
| Loan fund | 769,921 | 751,414 |
| | $17,514,897 | $17,227,353 |
| Investment income (loss) | 1,577,156 | 2,175,250 |
| Payments of benefits | 2,072,556 | 745,210 |
| Deemed distributions of loans | 12,874 | -0- |
| Administrative fees | 13,450 | 14,407 |

## NOTE 4 - INVESTMENTS

The following presents investments that represent 5% or more of the Plan's net assets:

| | 2010 | 2009 |
|---|---|---|
| Vanguard Retirement Svgs Trust | $ 5,494,224 | $ 5,555,652 |
| Vanguard Equity Income Fund | 1,529,157 | 1,646,780 |
| Vanguard International Growth Fund | 1,176,211 | 1,037,795 |
| Vanguard Primecap Fund | 1,725,498 | 2,143,354 |
| Vanguard Target Retirement 2010 | <5% | 880,216 |
| Vanguard Total Bond Market Index | 1,230,751 | 1,210,186 |

During 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated by $1,145,691.

## NOTE 5 - RELATED PARTY TRANSACTIONS

The Plan invests in shares of mutual funds managed by an affiliate of Vanguard Fiduciary Trust Company ("VFTC"). VFTC acts as trustee for only those investments as defined by the Plan. Transactions in such investments qualify as party-in-interest transactions which are exempt from the prohibited transaction rules.

## NOTE 6 - TAX STATUS

The Internal Revenue Service has determined by a letter dated March 31, 2008 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Company uses a prototype plan and trust sponsored by the Vanguard Fiduciary Trust Company. Although the plan has been amended since receiving the determination letter, the Plan administrator and tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

## NOTE 7 - RISKS AND UNCERTAINTIES

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

## NOTE 8- SUBSEQUENT EVENTS

The Plan has evaluated subsequent events up and through the date which the financial statements were available to be issued, which was July 25, 2011.

Beginning January 1, 2011, the Company reduced its matching contributions of employee elective deferrals from 6% to 3% of participant compensation for the plan year.

Supplemental Information

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2010** is as follows:

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard 500 Index Fund Investor Shares | Vanguard Equity Income Fund Investor Shares | Vanguard Explorer Fund Investor Shares | Vanguard Extended Market Index Fund Investor Shares | Vanguard International Growth Fund Investor Shares |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 10,943.52 | $ 45,318.54 | $ 374.91 | $ 1,682.34 | $ 17,191.43 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | (4,554.30) | 13,329.22 | 67.78 | 491.85 | (3,992.11) |
| Net unrealized appreciation of investments | 65,968.03 | 156,862.99 | 49,684.97 | 34,341.27 | 128,094.60 |
| | 72,357.25 | 215,510.75 | 50,127.66 | 36,515.46 | 141,293.92 |
| Contributions: | | | | | |
| Employer | 9,323.71 | 18,380.28 | 6,562.54 | 4,662.45 | 18,608.80 |
| Participant | 17,921.00 | 36,965.35 | 11,102.00 | 5,612.50 | 39,554.95 |
| Participant loan repayments | 13,690.39 | 40,511.54 | 42.70 | - | 29,880.59 |
| | 40,935.10 | 95,857.17 | 17,707.24 | 10,274.95 | 88,044.34 |
| Other additions | - | - | - | - | - |
| Total additions | 113,292.35 | 311,367.92 | 67,834.90 | 46,790.41 | 229,338.26 |
| **Deductions** | | | | | |
| Payment of benefits | 251,845.24 | 236,250.82 | - | 246.26 | 121,675.49 |
| Participant loan withdrawals | 11,339.68 | 33,870.14 | 87.80 | 4,014.14 | 19,725.45 |
| Other deductions | 326.75 | 831.99 | 115.78 | 35.81 | 473.20 |
| Total deductions | 263,511.67 | 270,952.95 | 203.58 | 4,296.21 | 141,874.14 |
| Net increase (decrease) prior to interfund transfers | (150,219.32) | 40,414.97 | 67,631.32 | 42,494.20 | 87,464.12 |
| Interfund transfers | 192,159.77 | (158,037.98) | 216,769.48 | 281,927.55 | 50,951.64 |
| Net increase (decrease) | 41,940.45 | (117,623.01) | 284,400.80 | 324,421.75 | 138,415.76 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 743,820.53 | 1,646,780.50 | 152,380.64 | 71,458.99 | 1,037,795.54 |
| End of period | $ 785,760.98 | $ 1,529,157.49 | $ 436,781.44 | $ 395,880.74 | $ 1,176,211.30 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2010** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Mid-Cap Index Fund Investor Shares | Vanguard PRIMECAP Fund Investor Shares | Vanguard Prime Money Market Fund | Vanguard Small-Cap Index Fund Investor Shares | Vanguard Target Retirement 2005 Fund |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 6,413.80 | $ 37,777.34 | $ 3.63 | $ 3,594.67 | $ 6,386.92 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 23,745.31 | 13,792.40 | - | 2,562.96 | 1,151.76 |
| Net unrealized appreciation of investments | 83,232.45 | 163,691.77 | - | 68,376.05 | 15,085.98 |
| | 113,391.56 | 215,261.51 | 3.63 | 74,533.68 | 22,624.66 |
| Contributions: | | | | | |
| Employer | 6,589.40 | 25,638.27 | - | 6,986.85 | 1,015.00 |
| Participant | 16,077.50 | 49,721.15 | - | 14,567.50 | 1,020.00 |
| Participant loan repayments | 2,466.38 | 39,958.12 | - | 567.83 | 1,409.13 |
| | 25,133.28 | 115,317.54 | - | 22,122.18 | 3,444.13 |
| Other additions | - | - | 161.43 | - | - |
| Total additions | 138,524.84 | 330,579.05 | 165.06 | 96,655.86 | 26,068.79 |
| **Deductions** | | | | | |
| Payment of benefits | 64,858.33 | 231,079.23 | - | 49,193.26 | - |
| Participant loan withdrawals | 4,522.66 | 28,623.79 | - | 4,492.32 | 26,919.06 |
| Other deductions | 78.88 | 754.92 | 40.00 | 60.26 | 52.08 |
| Total deductions | 69,459.87 | 260,457.94 | 40.00 | 53,745.84 | 26,971.14 |
| Net increase (decrease) prior to interfund transfers | 69,064.97 | 70,121.11 | 125.06 | 42,910.02 | (902.35) |
| Interfund transfers | 20,267.91 | (487,977.26) | - | 220,920.93 | - |
| Net increase (decrease) | 89,332.88 | (417,856.15) | 125.06 | 263,830.95 | (902.35) |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 431,959.60 | 2,143,353.76 | 5,743.74 | 281,625.20 | 245,141.89 |
| End of period | $ 521,292.48 | $ 1,725,497.61 | $ 5,868.80 | $ 545,456.15 | $ 244,239.54 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2010** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Target Retirement 2010 Fund | Vanguard Target Retirement 2015 Fund | Vanguard Target Retirement 2020 Fund | Vanguard Target Retirement 2025 Fund | Vanguard Target Retirement 2030 Fund |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 5,895.28 | $ 18,228.67 | $ 4,609.24 | $ 7,028.59 | $ 4,516.48 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 60,028.27 | 4,485.32 | 657.42 | 946.15 | (257.16) |
| Net unrealized appreciation of investments | 19,061.17 | 66,095.50 | 19,129.04 | 31,834.60 | 23,825.58 |
| | 84,984.72 | 88,809.49 | 24,395.70 | 39,809.34 | 28,084.90 |
| Contributions: | | | | | |
| Employer | - | 14,530.00 | 13,655.30 | 19,087.75 | 14,842.00 |
| Participant | - | 20,379.00 | 15,828.00 | 29,760.00 | 16,760.00 |
| Participant loan repayments | - | 2,588.41 | 12,954.04 | 29,208.38 | 28,468.67 |
| | - | 37,497.41 | 42,437.34 | 78,056.13 | 60,070.67 |
| Other additions | - | - | - | - | - |
| Total additions | 84,984.72 | 126,306.90 | 66,833.04 | 117,865.47 | 88,155.57 |
| **Deductions** | | | | | |
| Payment of benefits | 599,107.43 | 12,423.56 | - | 11,261.73 | - |
| Participant loan withdrawals | - | 49,414.12 | 9,857.49 | 25,370.10 | 38,741.78 |
| Other deductions | 64.80 | 341.71 | 453.96 | 808.03 | 986.44 |
| Total deductions | 599,172.23 | 62,179.39 | 10,311.45 | 37,439.86 | 39,728.22 |
| Net increase (decrease) prior to interfund transfers | (514,187.51) | 64,127.51 | 56,521.59 | 80,425.61 | 48,427.35 |
| Interfund transfers | (122,712.78) | - | - | (7,766.55) | - |
| Net increase (decrease) | (636,900.29) | 64,127.51 | 56,521.59 | 72,659.06 | 48,427.35 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 880,216.27 | 708,797.14 | 160,755.64 | 267,842.44 | 190,906.86 |
| End of period | $ 243,315.98 | $ 772,924.65 | $ 217,277.23 | $ 340,501.50 | $ 239,334.21 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2010** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Target Retirement 2035 Fund | Vanguard Target Retirement 2040 Fund | Vanguard Target Retirement 2045 Fund | Vanguard Target Retirement 2050 Fund | Vanguard Target Retirement Income |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 3,404.76 | $ 7,313.03 | $ 2,965.94 | $ 1,113.89 | $ 42.06 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 1,395.83 | 661.59 | 464.47 | 503.36 | 2.33 |
| Net unrealized appreciation of investments | 16,246.20 | 38,373.97 | 11,867.53 | 3,911.36 | 97.49 |
| | 21,046.79 | 46,348.59 | 15,297.94 | 5,528.61 | 141.88 |
| Contributions: | | | | | |
| Employer | 9,399.00 | 21,426.00 | 8,679.00 | 2,978.00 | - |
| Participant | 10,870.00 | 27,810.00 | 10,260.00 | 3,490.00 | - |
| Participant loan repayments | 19,877.45 | 30,022.97 | 7,435.74 | 3,122.43 | - |
| | 40,146.45 | 79,258.97 | 26,374.74 | 9,590.43 | - |
| Other additions | - | - | - | - | - |
| Total additions | 61,193.24 | 125,607.56 | 41,672.68 | 15,119.04 | 141.88 |
| **Deductions** | | | | | |
| Payment of benefits | 19,979.70 | 7,424.62 | 7,093.66 | 2,895.48 | 63.66 |
| Participant loan withdrawals | 17,029.49 | 19,707.96 | 8,466.74 | 2,880.99 | - |
| Other deductions | 830.66 | 1,495.27 | 750.11 | 319.82 | 4.91 |
| Total deductions | 37,839.85 | 28,627.85 | 16,310.51 | 6,096.29 | 68.57 |
| Net increase (decrease) prior to interfund transfers | 23,353.39 | 96,979.71 | 25,362.17 | 9,022.75 | 73.31 |
| Interfund transfers | - | 159.56 | - | - | - |
| Net increase (decrease) | 23,353.39 | 97,139.27 | 25,362.17 | 9,022.75 | 73.31 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 134,269.89 | 267,520.78 | 93,328.66 | 30,914.57 | 1,547.76 |
| End of period | $ 157,623.28 | $ 364,660.05 | $ 118,690.83 | $ 39,937.32 | $ 1,621.07 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2010** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Total Bond Market Index Fund Investor Shares | Vanguard Windsor II Fund Investor Shares | Vanguard Retirement Savings Trust | Loan Fund | Total |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 53,607.97 | $ 4,054.96 | $ 158,822.03 | $ - | $ 401,290.00 |
| Interest income, participant loans | - | - | - | 30,174.60 | 30,174.60 |
| Net realized gain (loss) on sale of investments | 6,290.97 | (1,540.73) | - | - | 120,232.69 |
| Net unrealized appreciation of investments | 17,855.40 | 11,820.36 | - | - | 1,025,456.31 |
| | 77,754.34 | 14,334.59 | 158,822.03 | 30,174.60 | 1,577,153.60 |
| Contributions: | | | | | |
| Employer | 29,367.95 | 4,228.00 | 59,500.70 | - | 295,461.00 |
| Participant | 60,738.50 | 13,272.50 | 111,936.05 | - | 513,646.00 |
| Participant loan repayments | 25,274.40 | 2,386.34 | 122,634.53 | (412,500.04) | - |
| | 115,380.85 | 19,886.84 | 294,071.28 | (412,500.04) | 809,107.00 |
| Other additions | - | - | - | - | 161.43 |
| Total additions | 193,135.19 | 34,221.43 | 452,893.31 | (382,325.44) | 2,386,422.03 |
| **Deductions** | | | | | |
| Payment of benefits | 3,744.52 | 74,542.75 | 344,527.46 | 34,342.53 | 2,072,555.73 |
| Participant loan withdrawals | 12,259.96 | - | 130,724.19 | (448,047.86) | - |
| Other deductions | 175.95 | 61.22 | 4,387.45 | - | 13,450.00 |
| Total deductions | 16,180.43 | 74,603.97 | 479,639.10 | (413,705.33) | 2,086,005.73 |
| Net increase (decrease) prior to interfund transfers | 176,954.76 | (40,382.54) | (26,745.79) | 31,379.89 | 300,416.30 |
| Interfund transfers | (156,389.17) | (15,590.42) | (34,682.68) | - | - |
| Net increase (decrease) | 20,565.59 | (55,972.96) | (61,428.47) | 31,379.89 | 300,416.30 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 1,210,185.88 | 213,941.08 | 5,555,652.48 | 751,414.18 | 17,227,354.02 |
| End of period | $ 1,230,751.47 | $ 157,968.12 | $ 5,494,224.01 | $ 782,794.07 | $ 17,527,770.32 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2009** is as follows:

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard 500 Index Fund Investor Shares | Vanguard Equity Income Fund Investor Shares | Vanguard Explorer Fund Investor Shares | Vanguard Extended Market Index Fund Investor Shares | Vanguard International Growth Fund Investor Shares |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 15,489.22 | $ 45,903.11 | $ 254.81 | $ 700.22 | $ 17,026.44 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 7,705.60 | (41,507.95) | (12.08) | (13,771.72) | (18,742.40) |
| Net unrealized appreciation of investments | 139,248.55 | 186,101.23 | 30,258.91 | 18,411.57 | 248,072.70 |
| | 162,443.37 | 190,496.39 | 30,501.64 | 5,340.07 | 246,356.74 |
| Contributions: | | | | | |
| Employer | 11,857.58 | 20,773.90 | 5,514.97 | 1,132.00 | 18,377.10 |
| Participant | 21,005.35 | 38,323.65 | 10,436.00 | 2,280.00 | 35,759.45 |
| Participant loan repayments | 19,675.93 | 47,493.47 | 34.68 | - | 24,868.61 |
| | 52,538.86 | 106,591.02 | 15,985.65 | 3,412.00 | 79,005.16 |
| Other additions | - | - | - | - | - |
| Total additions | 214,982.23 | 297,087.41 | 46,487.29 | 8,752.07 | 325,361.90 |
| **Deductions** | | | | | |
| Payment of benefits | 5,867.60 | 4,424.55 | 1,363.34 | - | 5,991.73 |
| Participant loan withdrawals | 7,470.67 | 23,401.94 | 1,052.38 | - | 9,040.27 |
| Other deductions | 402.55 | 799.38 | 59.91 | 30.45 | 491.30 |
| Total deductions | 13,740.82 | 28,625.87 | 2,475.63 | 30.45 | 15,523.30 |
| Net increase (decrease) prior to interfund transfers | 201,241.41 | 268,461.54 | 44,011.66 | 8,721.62 | 309,838.60 |
| Interfund transfers | (70,568.41) | (68,241.45) | 33,437.58 | (50,604.06) | (72,146.98) |
| Net increase (decrease) | 130,673.00 | 200,220.09 | 77,449.24 | (41,882.44) | 237,691.62 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 613,147.53 | 1,446,560.41 | 74,931.40 | 113,341.43 | 800,103.92 |
| End of period | $ 743,820.53 | $ 1,646,780.50 | $ 152,380.64 | $ 71,458.99 | $ 1,037,795.54 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2009** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Mid-Cap Index Fund Investor Shares | Vanguard PRIMECAP Fund Investor Shares | Vanguard Prime Money Market Fund | Vanguard Small-Cap Index Fund Investor Shares | Vanguard Target Retirement 2005 Fund |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 4,707.52 | $ 15,895.07 | $ 1.97 | $ 2,753.66 | $ 6,032.74 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | (24,106.47) | 52.17 | - | (865.13) | 2.80 |
| Net unrealized appreciation of investments | 103,240.48 | 519,728.70 | - | 52,924.33 | 27,871.26 |
| | 83,841.53 | 535,675.94 | 1.97 | 54,812.86 | 33,906.80 |
| Contributions: | | | | | |
| Employer | 7,261.15 | 30,454.65 | - | 5,381.65 | 1,020.00 |
| Participant | 17,510.00 | 53,768.55 | - | 11,041.00 | 1,020.00 |
| Participant loan repayments | 2,457.70 | 37,890.51 | - | 604.91 | 1,409.13 |
| | 27,228.85 | 122,113.71 | - | 17,027.56 | 3,449.13 |
| Other additions | - | - | - | - | - |
| **Total additions** | 111,070.38 | 657,789.65 | 1.97 | 71,840.42 | 37,355.93 |
| **Deductions** | | | | | |
| Payment of benefits | - | 10,833.72 | - | 226.55 | - |
| Participant loan withdrawals | 471.66 | 13,427.84 | - | 2,850.62 | - |
| Other deductions | 71.37 | 800.24 | 10.00 | 49.48 | 54.74 |
| **Total deductions** | 543.03 | 25,061.80 | 10.00 | 3,126.65 | 54.74 |
| Net increase (decrease) prior to interfund transfers | 110,527.35 | 632,727.85 | (8.03) | 68,713.77 | 37,301.19 |
| Interfund transfers | (107,911.05) | 34,405.25 | 5,751.77 | 31,602.89 | - |
| **Net increase (decrease)** | 2,616.30 | 667,133.10 | 5,743.74 | 100,316.66 | 37,301.19 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 429,343.30 | 1,476,220.66 | - | 181,308.54 | 207,840.70 |
| End of period | $ 431,959.60 | $ 2,143,353.76 | $ 5,743.74 | $ 281,625.20 | $ 245,141.89 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2009** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Target Retirement 2010 Fund | Vanguard Target Retirement 2015 Fund | Vanguard Target Retirement 2020 Fund | Vanguard Target Retirement 2025 Fund | Vanguard Target Retirement 2030 Fund |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 20,735.77 | $ 16,887.33 | $ 3,467.77 | $ 5,833.64 | $ 3,741.94 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 10,389.17 | 2,347.96 | 250.42 | 1,326.08 | 1,276.82 |
| Net unrealized appreciation of investments | 121,916.55 | 105,023.18 | 24,201.90 | 42,726.45 | 32,410.24 |
| | 153,041.49 | 124,258.47 | 27,920.09 | 49,886.17 | 37,429.00 |
| Contributions: | | | | | |
| Employer | 2,821.00 | 17,386.00 | 14,799.00 | 19,955.25 | 16,068.00 |
| Participant | 5,410.00 | 23,352.00 | 17,768.00 | 29,498.00 | 18,215.00 |
| Participant loan repayments | 404.79 | 11,770.96 | 13,654.81 | 23,740.51 | 24,436.58 |
| | 8,635.79 | 52,508.96 | 46,221.81 | 73,193.76 | 58,719.58 |
| Other additions | - | - | - | - | - |
| Total additions | 161,677.28 | 176,767.43 | 74,141.90 | 123,079.93 | 96,148.58 |
| **Deductions** | | | | | |
| Payment of benefits | 40,264.03 | 44,459.88 | 2,790.82 | 35,247.79 | 12,587.74 |
| Participant loan withdrawals | 15,885.65 | 13,706.00 | 3,978.72 | 22,950.24 | 22,463.24 |
| Other deductions | 104.16 | 438.38 | 417.14 | 849.94 | 899.91 |
| Total deductions | 56,253.84 | 58,604.26 | 7,186.68 | 59,047.97 | 35,950.89 |
| Net increase (decrease) prior to interfund transfers | 105,423.44 | 118,163.17 | 66,955.22 | 64,031.96 | 60,197.69 |
| Interfund transfers | (74,890.12) | (5,062.96) | (4,319.46) | - | - |
| Net increase (decrease) | 30,533.32 | 113,100.21 | 62,635.76 | 64,031.96 | 60,197.69 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 849,682.95 | 595,696.93 | 98,119.88 | 203,810.48 | 130,709.17 |
| End of period | $ 880,216.27 | $ 708,797.14 | $ 160,755.64 | $ 267,842.44 | $ 190,906.86 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2009** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Target Retirement 2035 Fund | Vanguard Target Retirement 2040 Fund | Vanguard Target Retirement 2045 Fund | Vanguard Target Retirement 2050 Fund | Vanguard Target Retirement Income |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 2,695.36 | $ 5,070.70 | $ 1,872.05 | $ 588.85 | $ 39.56 |
| Interest income, participant loans | - | - | - | - | - |
| Net realized gain (loss) on sale of investments | 1,565.86 | 4,126.55 | 2,586.99 | 578.59 | 0.20 |
| Net unrealized appreciation of investments | 23,779.58 | 48,462.54 | 16,912.81 | 5,484.59 | 153.84 |
| | 28,040.80 | 57,659.79 | 21,371.85 | 6,652.03 | 193.60 |
| Contributions: | | | | | |
| Employer | 12,008.00 | 21,572.00 | 10,994.00 | 3,929.00 | - |
| Participant | 13,560.00 | 29,734.00 | 13,070.00 | 4,425.00 | - |
| Participant loan repayments | 24,044.43 | 29,646.37 | 5,781.49 | 2,040.06 | - |
| | 49,612.43 | 80,952.37 | 29,845.49 | 10,394.06 | - |
| Other additions | - | - | - | - | - |
| Total additions | 77,653.23 | 138,612.16 | 51,217.34 | 17,046.09 | 193.60 |
| **Deductions** | | | | | |
| Payment of benefits | 35,748.58 | 29,878.87 | 11,928.64 | 348.62 | - |
| Participant loan withdrawals | 24,118.65 | 35,422.52 | 5,398.27 | 3,067.13 | - |
| Other deductions | 882.55 | 1,350.00 | 868.01 | 308.13 | 5.89 |
| Total deductions | 60,749.78 | 66,651.39 | 18,194.92 | 3,723.88 | 5.89 |
| Net increase (decrease) prior to interfund transfers | 16,903.45 | 71,960.77 | 33,022.42 | 13,322.21 | 187.71 |
| Interfund transfers | - | 2,042.53 | - | - | - |
| Net increase (decrease) | 16,903.45 | 74,003.30 | 33,022.42 | 13,322.21 | 187.71 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 117,366.44 | 193,517.48 | 60,306.24 | 17,592.36 | 1,360.05 |
| End of period | $ 134,269.89 | $ 267,520.78 | $ 93,328.66 | $ 30,914.57 | $ 1,547.76 |

# FIRST CO. 401(k) RETIREMENT PLAN

## Statement of Changes in Net Assets Available for Benefits by Investment Fund (Continued)

The allocation of changes in net assets available for plan benefits for the year ended **December 31, 2009** is as follows (Continued):

| | PARTICIPANT DIRECTED | | | | |
|---|---|---|---|---|---|
| | Vanguard Total Bond Market Index Fund Investor Shares | Vanguard Windsor II Fund Investor Shares | Vanguard Retirement Savings Trust | Loan Fund | Total |
| **Additions** | | | | | |
| Investment income: | | | | | |
| Interest and dividend income, investments | $ 47,656.33 | $ 6,761.83 | $ 156,846.09 | $ - | $ 380,961.98 |
| Interest income, participant loans | - | - | - | 42,795.48 | 42,795.48 |
| Net realized gain (loss) on sale of investments | 8,780.76 | 10,661.94 | - | - | (47,353.84) |
| Net unrealized appreciation of investments | 14,446.89 | 37,471.76 | - | - | 1,798,848.06 |
| | 70,883.98 | 54,895.53 | 156,846.09 | 42,795.48 | 2,175,251.68 |
| Contributions: | | | | | |
| Employer | 28,382.20 | 8,243.75 | 69,663.80 | - | 327,595.00 |
| Participant | 55,711.00 | 20,375.00 | 123,592.00 | - | 545,854.00 |
| Participant loan repayments | 11,241.22 | 2,948.87 | 140,096.60 | (424,241.63) | - |
| | 95,334.42 | 31,567.62 | 333,352.40 | (424,241.63) | 873,449.00 |
| Other additions | - | - | - | - | - |
| **Total additions** | 166,218.40 | 86,463.15 | 490,198.49 | (381,446.15) | 3,048,700.68 |
| **Deductions** | | | | | |
| Payment of benefits | 123,132.01 | - | 293,814.98 | 86,300.96 | 745,210.41 |
| Participant loan withdrawals | - | - | 123,217.23 | (327,923.03) | - |
| Other deductions | 229.82 | 89.08 | 5,194.53 | - | 14,406.96 |
| **Total deductions** | 123,361.83 | 89.08 | 422,226.74 | (241,622.07) | 759,617.37 |
| Net increase (decrease) prior to interfund transfers | 42,856.57 | 86,374.07 | 67,971.75 | (139,824.08) | 2,289,083.31 |
| Interfund transfers | 261,433.76 | (319,345.62) | 404,416.33 | - | - |
| **Net increase (decrease)** | 304,290.33 | (232,971.55) | 472,388.08 | (139,824.08) | 2,289,083.31 |
| Net assets available for plan benefits: | | | | | |
| Beginning of period | 905,895.55 | 446,912.63 | 5,083,264.40 | 891,238.26 | 14,938,270.71 |
| End of period | $ 1,210,185.88 | $ 213,941.08 | $ 5,555,652.48 | $ 751,414.18 | $ 17,227,354.02 |

# Additional Information
# Required for Form 5500

FIRST CO. 401(k) RETIREMENT PLAN

Schedule I

Schedule of Assets Held for Investment Purposes at End of Year - Attachment for Schedule H, Line 4i
As of December 31, 2010

First Co. 401(k) Retirement Plan

EIN 75-1232784, PN 001

| | Identity of Issue | Investment Type | Cost | Current Value |
|---|---|---|---|---|
| * | Vanguard 500 Index Inv | Registered Investment Company | $ 740,469.35 | $ 785,760.98 |
| * | Vanguard Equity Income Inv | Registered Investment Company | 1,606,522.46 | 1,529,157.49 |
| * | Vanguard Explorer Fund Inv | Registered Investment Company | 401,861.62 | 436,781.44 |
| * | Vanguard Extend Mkt Index Inv | Registered Investment Company | 358,644.97 | 395,880.74 |
| * | Vanguard Int'l Growth Fund Inv | Registered Investment Company | 1,089,576.87 | 1,176,211.30 |
| * | Vanguard Mid-Cap Index Fd Inv | Registered Investment Company | 413,303.20 | 521,292.48 |
| * | Vanguard PRIMECAP Fund Inv | Registered Investment Company | 1,484,452.94 | 1,725,497.61 |
| * | Vanguard Prime Money Mkt | Registered Investment Company | 5,868.80 | 5,868.80 |
| * | Vanguard Sm-Cap Index Inv | Registered Investment Company | 466,160.10 | 545,456.15 |
| * | Vanguard Tgt Retirement 2005 | Registered Investment Company | 251,104.82 | 244,239.54 |
| * | Vanguard Tgt Retirement 2010 | Registered Investment Company | 252,921.05 | 243,315.98 |
| * | Vanguard Tgt Retirement 2015 | Registered Investment Company | 782,559.95 | 772,924.65 |
| * | Vanguard Tgt Retirement 2020 | Registered Investment Company | 205,404.84 | 217,277.23 |
| * | Vanguard Tgt Retirement 2025 | Registered Investment Company | 323,393.02 | 340,501.50 |
| * | Vanguard Tgt Retirement 2030 | Registered Investment Company | 226,418.18 | 239,334.21 |
| * | Vanguard Tgt Retirement 2035 | Registered Investment Company | 151,400.02 | 157,623.28 |
| * | Vanguard Tgt Retirement 2040 | Registered Investment Company | 340,673.72 | 364,660.05 |
| * | Vanguard Tgt Retirement 2045 | Registered Investment Company | 112,381.71 | 118,690.83 |
| * | Vanguard Tgt Retirement 2050 | Registered Investment Company | 37,380.94 | 39,937.32 |
| * | Vanguard Target Retirement Inc | Registered Investment Company | 1,584.77 | 1,621.07 |

* Party in Interest

FIRST CO. 401(k) RETIREMENT PLAN

Schedule I

Schedule of Assets Held for Investment Purposes at End of Year - Attachment for Schedule H, Line 4i (Continued)
As of December 31, 2010

First Co. 401(k) Retirement Plan

EIN 75-1232784, PN 001

| | Identity of Issue | Investment Type | Cost | Current Value |
|---|---|---|---|---|
| * | Vanguard Total Bd Mkt Indx Inv | Registered Investment Company | 1,198,069.35 | 1,230,751.47 |
| * | Vanguard Windsor II Fund Inv | Registered Investment Company | 170,485.50 | 157,968.12 |
| * | Vanguard Retirement Savings Trust ** | Common/Collective Trust | 5,494,224.01 | 5,494,224.01 |
| * | Loan Fund | 3.25% - 8.25% | 782,794.07 | 782,794.07 |
| Total assets held for investment purposes | | | $ 16,897,656.26 | $ 17,527,770.32 |

* Party in Interest

**Contract Value

FIRST CO. 401(k) RETIREMENT PLAN

Schedule II

Schedule of Reportable Transactions - Attachment for Schedule H, Line 4j
Year Ended December 31, 2010

First Co. 401(k) Retirement Plan

EIN 75-1232784, PN 001

| Identity of Party Involved | Description of Asset (include interest rate and maturity in the case of a loan) | Purchase Price | Selling Price | Historical Cost of Asset | Current Value of Asset on Transaction Date | Historical Gain (Loss) |
|---|---|---|---|---|---|---|
| Vanguard | Vanguard PRIMECAP Fund Inv | $ 162,642.12 | | | $ 162,642.12 | |
| Vanguard | Vanguard PRIMECAP Fund Inv | | $ 757,982.44 | $ 692,002.30 | 757,982.44 | $ 65,980.14 |
| Vanguard | Vanguard Retire Savings Trust | 720,562.03 | | | 720,562.03 | |
| Vanguard | Vanguard Retire Savings Trust | | 781,990.50 | 781,990.50 | 781,990.50 | - |

FIRST CO. 401(k) RETIREMENT PLAN

Schedule I

Schedule of Assets Held for Investment Purposes at End of Year - Attachment for Schedule H, Line 4i
As of December 31, 2010

First Co. 401(k) Retirement Plan

EIN 75-1232784, PN 001

| | Identity of Issue | Investment Type | Cost | Current Value |
|---|---|---|---|---|
| * | Vanguard 500 Index Inv | Registered Investment Company | $ 740,469.35 | $ 785,760.98 |
| * | Vanguard Equity Income Inv | Registered Investment Company | 1,606,522.46 | 1,529,157.49 |
| * | Vanguard Explorer Fund Inv | Registered Investment Company | 401,861.62 | 436,781.44 |
| * | Vanguard Extend Mkt Index Inv | Registered Investment Company | 358,644.97 | 395,880.74 |
| * | Vanguard Int'l Growth Fund Inv | Registered Investment Company | 1,089,576.87 | 1,176,211.30 |
| * | Vanguard Mid-Cap Index Fd Inv | Registered Investment Company | 413,303.20 | 521,292.48 |
| * | Vanguard PRIMECAP Fund Inv | Registered Investment Company | 1,484,452.94 | 1,725,497.61 |
| * | Vanguard Prime Money Mkt | Registered Investment Company | 5,868.80 | 5,868.80 |
| * | Vanguard Sm-Cap Index Inv | Registered Investment Company | 466,160.10 | 545,456.15 |
| * | Vanguard Tgt Retirement 2005 | Registered Investment Company | 251,104.82 | 244,239.54 |
| * | Vanguard Tgt Retirement 2010 | Registered Investment Company | 252,921.05 | 243,315.98 |
| * | Vanguard Tgt Retirement 2015 | Registered Investment Company | 782,559.95 | 772,924.65 |
| * | Vanguard Tgt Retirement 2020 | Registered Investment Company | 205,404.84 | 217,277.23 |
| * | Vanguard Tgt Retirement 2025 | Registered Investment Company | 323,393.02 | 340,501.50 |
| * | Vanguard Tgt Retirement 2030 | Registered Investment Company | 226,418.18 | 239,334.21 |
| * | Vanguard Tgt Retirement 2035 | Registered Investment Company | 151,400.02 | 157,623.28 |
| * | Vanguard Tgt Retirement 2040 | Registered Investment Company | 340,673.72 | 364,660.05 |
| * | Vanguard Tgt Retirement 2045 | Registered Investment Company | 112,381.71 | 118,690.83 |
| * | Vanguard Tgt Retirement 2050 | Registered Investment Company | 37,380.94 | 39,937.32 |
| * | Vanguard Target Retirement Inc | Registered Investment Company | 1,584.77 | 1,621.07 |

* Party in Interest

FIRST CO. 401(k) RETIREMENT PLAN

Schedule I

Schedule of Assets Held for Investment Purposes at End of Year - Attachment for Schedule H, Line 4i (Continued)
As of December 31, 2010

First Co. 401(k) Retirement Plan

EIN 75-1232784, PN 001

| | Identity of Issue | Investment Type | Cost | Current Value |
|---|---|---|---|---|
| * | Vanguard Total Bd Mkt Indx Inv | Registered Investment Company | 1,198,069.35 | 1,230,751.47 |
| * | Vanguard Windsor II Fund Inv | Registered Investment Company | 170,485.50 | 157,968.12 |
| * | Vanguard Retirement Savings Trust ** | Common/Collective Trust | 5,494,224.01 | 5,494,224.01 |
| * | Loan Fund | 3.25% - 8.25% | 782,794.07 | 782,794.07 |
| Total assets held for investment purposes | | | $ 16,897,656.26 | $ 17,527,770.32 |

* Party in Interest

**Contract Value