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;
- [X] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

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

D Check box if filing under:
- [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
WOOD RODGERS 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/15/1998

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

3301 C STREET, BUILDING 100-B
SACRAMENTO, CA 95816-3300

2b Employer Identification Number (EIN)
91-1762478

2c Sponsor's telephone number
916-341-7422

2d Business code (see instructions)
541330

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.	09/01/2011	STEVE BALBIERZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/01/2011	STEVE BALBIERZ
	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")
WOOD RODGERS, INC.

3301 C STREET, BUILDING 100-B
SACRAMENTO, CA 95816-3300

3b Administrator's EIN
91-1762478

3c Administrator's telephone number
916-341-7422

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**	246
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**	166
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	62
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	228
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	228
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	214
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

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
WOOD RODGERS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
WOOD RODGERS, INC.

D Employer Identification Number (EIN)
91-1762478

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-1050034	93629	039345	228	01/01/2010	12/31/2010

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	2041

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WS INS SVCS LLC DBA WS CA INS
26135 CARMEL RANCHO BLVD
CARMEL, CA 93923

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	2041	SERVICES TO INSURER OR PLAN	4

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	1368705
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GUARANTEED GENERAL ACCT CONTRACT

b	Balance at the end of the previous year			7b	1478728
c	Additions: (1) Contributions deposited during the year	7c(1)	96103		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	41149		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)	630159		
	▶ LOAN REPAYMENTS, TRANSFERS, MISCELLANEOUS				
	(6) Total additions			7c(6)	767411
d	Total of balance and additions (add **b** and **c(6)**)			7d	2246139
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	320608		
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)	556826		
	▶ LOAN INITIATIONS, TRANSFERS, MISCELLANEOUS, FORFEITURES				
	(5) Total deductions			7e(5)	877434
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	1368705

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**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	**B** Three-digit plan number (PN) ▶	
WOOD RODGERS 401(K) PLAN		001

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
WOOD RODGERS, INC.	91-1762478

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).. . . . . [X] 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

THE PRUDENTIAL INSURANCE COMPANY OF

22-1211670

(b) Enter name and EIN or address of person who provided you disclosure 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 PRUDENTIAL INSURANCE COMPANY OF

22-1211670

(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 60 64	NONE	4391	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	61 72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRUDENTIAL INVESTMENTS, LLC 22-3468527	27.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2010 TO 12/31/2010 PRU JENN SMALL COMPANY A

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	61 72	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRUDENTIAL INVESTMENTS, LLC 22-3468527	27.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2010 TO 12/31/2010 PRU JENN GROWTH A

(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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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
WOOD RODGERS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
WOOD RODGERS, INC.

D Employer Identification Number (EIN)
91-1762478

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)	280391	457384
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	10954048	12324716
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	1478728	1368705
(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	12713167	14150805
	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	12713167	14150805

Part II Income and Expense Statement

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

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
	(B) Participants	2a(1)(B)	818490	
	(C) Others (including rollovers)	2a(1)(C)	249516	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1068006
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)	14685	
	(F) Other	2b(1)(F)	41149	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		55834
	(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)	158085	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		158085
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(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)		1446010
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		2727935
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1282560	
(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)		1282560
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	7737	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		7737
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1290297
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		1437638
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified (2) [ ] Qualified (3) [X] Disclaimer (4) [ ] Adverse

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

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

(1) Name: JOHN WADDELL & CO. CPAS (2) EIN: 94-2329070

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

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

Part IV Compliance Questions

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

During the plan year:

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

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **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
WOOD RODGERS 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
WOOD RODGERS, INC.

D Employer Identification Number (EIN)
91-1762478

Part I Distributions

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

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

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

EIN(s): 22-1211670

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):

WOOD RODGERS 401(K) PLAN

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August 30, 2011

INDEPENDENT AUDITORS' REPORT

Wood Rodgers 401(K) Plan
Sacramento, California

We were engaged to audit the financial statements of Wood Rodgers 401(K) Plan as of December 31, 2010 and 2009, and for the year ended December 31, 2010 and month ended December 31, 2009, and the supplemental schedules as of the years ended December 31, 2010 and 2009 as listed in the accompanying table of contents. 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 Prudential 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 the years ended December 31, 2010 and 2009, and for the year ended December 31, 2010 and month ended December 31, 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 an 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.

John Waddell & Co., CPAs

3416 American River Dr.
Suite A
Sacramento, CA 95864
916/488/2460
Fax/488/2466

WOOD RODGERS 401(K) PLAN

Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

ASSETS

	2010	2009
Investment Contract with Prudential Financial		
Mutual Funds	**$ 12,324,716**	$ 10,954,048
General account - Guaranteed Income Fund	**1,368,705**	1,478,728
	13,693,421	12,432,776
Participant loans receivable	**457,384**	280,391
NET ASSETS AVAILABLE FOR BENEFITS	**$ 14,150,805**	$ 12,713,167

See accompanying notes to financial statements.

WOOD RODGERS 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2010
and Month Ended December 31, 2009

	2010	2009
Additions		
Investment Income:		
Participant loan interest income	$ 14,686	$ -
Interest	41,149	3,679
Mutual fund income		
Dividends	158,085	68,155
Capital gains	97,167	8,876
Net appreciation in fair value of investments	1,348,843	204,564
Total Investment Income	1,659,930	285,274
Contributions:		
Participant	818,489	82,164
Rollovers	249,516	-
Total Contributions	1,068,005	82,164
Total Additions	2,727,935	367,438
Deductions		
Benefits paid to participants	1,282,560	21,465
Administrative expenses	7,737	321
Total Deductions	1,290,297	21,786
Net Increase	1,437,638	345,652
Net Assets Available for Benefits		
Beginning of Year	12,713,167	12,367,515
End of Year	$ 14,150,805	$ 12,713,167

See accompanying notes to financial statements.

WOOD RODGERS 401(K) PLAN

Notes to Financial Statements
December 31, 2010 and 2009

NOTE 1 DESCRIPTION OF PLAN

The following description of the Wood Rodgers 401(K) 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 defined contribution plan covering all non-union employees age 21 and older. The Plan is subject to the provisions of the Employee Retirement Income Security Act (ERISA). The Plan was amended effective January 1, 2007 to allow in-service distributions and to allow Roth elective deferrals. The Plan was amended December 17, 2009 to comply with the Pension Protection Act and the Heart Act. The Plan was amended during 2010 to change the year-end of the Plan to December 31 and to allow participant loans. Therefore, these financial statements have been prepared for the one month ended December 31, 2009 and the year ended December 31, 2010, in accordance with DOL regulations. There are no material differences between the month ended December 31, 2009 audited financial statements and the unaudited information previously filed in the short-period Form 5500.

The Plan sponsor absorbs a significant portion of the administrative costs of the Plan.

Contributions

Each year, participants may contribute the lesser of 100 percent of pretax annual compensation, as defined in the Plan, or the limits imposed by the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company may make an employer match or Profit Sharing contribution to the Plan at the option of the Company's Board of Directors. Company contributions are funded by the due date of the Company's tax return.

Participant Accounts

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

Investment Options

Participants solely choose how their plan assets are invested from a selection of mutual funds and a guaranteed income fund through the Prudential Insurance Company of America.

NOTE 1 DESCRIPTION OF PLAN – CONTINUED

Vesting

Participants are vested immediately in their contributions and employer contributions plus actual earnings thereon.

Participant Loans

Plan loans are available from participant vested account balances, with a minimum loan of $1,000. Loans are limited to 50% of vested account balances. No loans greater than $50,000 are permitted.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a period. For termination of service for other reasons and hard-ship withdrawals, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Subsequent Events

Subsequent events have been evaluated through the date the financial statements were available to be issued, which was August 30, 2011.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the plan are prepared on the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts. There is no adjustment of the fully benefit-responsive investment contracts from fair value to contract value because Prudential Trust has reported to the Plan that the two values are the same. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – CONTINUED

Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value as reported to the Plan by Prudential Trust Company (see Notes 3 and 4).

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date.

Participant Loans

Participant loans are stated at unpaid principal balances. Principal and interest are paid through payroll deductions. The loans bear interest at 4.25%.

Payment of Benefits

Benefits are recorded when paid.

NOTE 3 INVESTMENTS

All amounts reported in the financial statements and supplemental schedule related to investments and investment income were certified as complete and accurate by Prudential Trust Company.

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

	12/31/2010	12/31/2009
Euro Pacific Growth Fund	$ 1,594,906	$ 1,568,101
Vanguard Institutional Index	1,432,648	1,221,825
Prudential Jennison Growth A	1,679,158	1,498,412
Pimco Total Return Bond Admin	1,077,385	849,945
Janus Perkins Mid Cap Val S	1,213,168	1,015,417
Trowe Mid Cap Growth	850,746	686,486
Guaranteed Income Fund	1,368,705	1,478,728
Washington Mutual Investors	1,596,152	1,518,439
Dreyfus Mid Cap Index Fund	n/a	652,736

NOTE 3 INVESTMENTS – CONTINUED

During the fiscal year and one month ended December 31, 2010 and 2009, respectively, the Plan's investments (including gains and losses on investments bought and sold, as well as held, during the year) appreciated in value by $1,348,843 and $204,564, respectively, all attributable to mutual funds.

NOTE 4 FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying Statements of Net Assets Available for Benefits as reported to the Plan by Prudential Trust. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The fair value measurement accounting literature establishes a framework for measuring fair value that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

Mutual funds: Valued at quoted net asset value ('NAV') of shares held by the Plan at year end.

Guaranteed Investment Fund: Valued at fair value, which is the same as contract value, as determined by Prudential Trust Company. The Guaranteed Investment Fund is an insurance company issued general account backed evergreen (no maturity date) group annuity spread product. The contract is not actively traded. The contract does not include a market value adjustment upon discontinuance. There are no specific securities in the general account that back the insurer's obligations under the contract; therefore, there are no other observable inputs available to determine market value.

NOTE 4 FAIR VALUE MEASUREMENTS – CONTINUED

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010.

Assets at Fair Value as of December 31, 2010

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced funds	$ 617,278	$ -	$ -	$ 617,278
Fixed income funds	1,244,606	-	-	1,244,606
International stock	2,348,475	-	-	2,348,475
Large cap stock	4,737,055	-	-	4,737,055
Mid cap stock	2,765,359	-	-	2,765,359
Small cap stock	540,749	-	-	540,749
Specialty funds	71,194	-	-	71,194
Total mutual funds	12,324,716	-	-	12,324,716
Guaranteed investment fund	-	-	1,368,705	1,368,705
Total assets at fair value	$ 12,324,716	$ -	$ 1,368,705	$ 13,693,421

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009.

Assets at Fair Value as of December 31, 2009

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced funds	$ 590,467	$ -	$ -	$ 590,467
Fixed income funds	939,362	-	-	939,362
International stock	1,978,427	-	-	1,978,427
Large cap stock	4,261,655			4,261,655
Mid cap stock	2,354,639			2,354,639
Small cap stock	513,107			513,107
Specialty funds	316,391			316,391
Total mutual funds	10,954,048	-	-	10,954,048
Guaranteed investment fund	-	-	1,478,728	1,478,728
Total assets at fair value	$ 10,954,048	$ -	$ 1,478,728	$ 12,432,776

NOTE 4 FAIR VALUE MEASUREMENTS – CONTINUED

The following table sets forth a summary of changes in fair value of the Plan's Level 3 investments:

	2010	2009
Balance at beginning of year	$ 1,478,728	$ 1,487,968
Interest	41,149	3,679
Purchases, sales, issuances, and settlements, net	(151,172)	(12,919)
Balance at end of year	$ 1,368,705	$ 1,478,728

NOTE 5 INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has a benefit-responsive investment contract with Prudential Insurance Company of America. Prudential maintains contributions in a general account. Interest is credited on contract balances using a single "portfolio rate" approach. Under this methodology, a single interest crediting rate is applied to all contributions made to the product regardless of the timing of those contributions. Interest crediting rates are reviewed on a semi-annual basis for resetting. The rates are established without the use of a specific formula. The minimum crediting rate under the contract is 1.5%.

The contract is included in the financial statements at contract value as reported to the Plan by Prudential Trust Company. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The contract issuer is contractually obligated to repay the principal and the specified interest rate that is guaranteed to the Plan. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

Generally, there are not any events that could limit the ability of the Plan to transact at contract value paid within 90 days, or in rare circumstances, contract value over time. There are not any events that allow the issuer to terminate the contract and which require the Plan sponsor to settle at an amount different than contract value paid either within 90 days or over time.

The average yield based on actual earnings and the average yield credited to participants was 3.00% for the year ended December 31, 2010 and month ended December 31, 2009.

NOTE 6 PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contribution at any time and to terminate the Plan subject to the provisions of ERISA.

NOTE 7 TAX STATUS

The Plan has adopted a prototype plan without alteration through Prudential Life Insurance Company. The Internal Revenue Service has determined and informed the Prudential Insurance Company of American by a letter dated June 30, 2004 that the prototype Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC).

The Plan has been amended since receiving the determination letter. The Plan Administrator believes the Plan is currently being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan's Form 5500 is subject to examination for three years after it is filed.

NOTE 8 RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Prudential Financial, Inc. Prudential Trust Company, an affiliate of Prudential Financial, Inc., is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

NOTE 9 CONTINGENCIES, RISKS AND UNCERTAINTIES

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

The investment in the insurance company general account may be subject to termination fees depending on the amount invested and the liquidity of the account at the time of termination.

WOOD RODGERS 401(K) PLAN

SCHEDULE H, LINE 4I – SCHEDULE OF ASSETS (HELD AT END OF YEAR) December 31, 2010

PLAN SPONSOR EIN: 911762478

IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR OR MATURITY VALUE	COST	CURRENT VALUE
* THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	GUARANTEED INCOME FUND	$1,368,705	$1,368,705
* PRUDENTIAL MUTUAL FUNDS	TEMP GLOB BOND FD A	43,884	45,630
* PRUDENTIAL MUTUAL FUNDS	TROWE MID CAP GROW ADV	642,529	850,746
* PRUDENTIAL MUTUAL FUNDS	JENNISON SMALL CO FD A	99,658	117,351
* PRUDENTIAL MUTUAL FUNDS	AMERICAN BALANCED FUND	589,424	617,278
* PRUDENTIAL MUTUAL FUNDS	CALVERT LG CAP GROWTH A	30,508	29,097
* PRUDENTIAL MUTUAL FUNDS	INVESCO DVLP MARKETS FUND I	396,444	410,338
* PRUDENTIAL MUTUAL FUNDS	PIMCO REAL RETURN BD ADM	120,549	121,591
* PRUDENTIAL MUTUAL FUNDS	EURO PACIFIC GROWTH FUND	1,499,502	1,594,906
* PRUDENTIAL MUTUAL FUNDS	VANGUARD INSTITL INDEX	1,378,970	1,432,648
* PRUDENTIAL MUTUAL FUNDS	WASHINGTON MUT INVEST	1,649,802	1,596,152
* PRUDENTIAL MUTUAL FUNDS	JENNISON GROWTH FUND A	1,347,181	1,679,158
* PRUDENTIAL MUTUAL FUNDS	ALLIANZ NFJ SM CAP ADMIN	151,136	214,064
* PRUDENTIAL MUTUAL FUNDS	INVESCO INTERNA SMALL CO FD A	327,336	343,231
* PRUDENTIAL MUTUAL FUNDS	NUVEEN REAL ESTA SEC	59,231	71,194
* PRUDENTIAL MUTUAL FUNDS	PIMCO TOT RET BOND ADMIN	1,077,202	1,077,385
* PRUDENTIAL MUTUAL FUNDS	JANUS PERKINS MID CAP VAL F	918,188	1,213,168
* PRUDENTIAL MUTUAL FUNDS	COLUMBIA SMALL CP INDEX A	13,218	16,965
* PRUDENTIAL MUTUAL FUNDS	DREYFUS MID CAP INDEX FD	651,766	701,445
* PRUDENTIAL MUTUAL FUNDS	COL SM CAP GR I A	118,885	192,369
PARTICIPANT LOANS	4.25% - 4.25%	0	457,384

WOOD RODGERS 401(K) PLAN

SCHEDULE H, LINE 4I – SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

PLAN SPONSOR EIN: 911762478

IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR OR MATURITY VALUE	COST	CURRENT VALUE
* THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	GUARANTEED INCOME FUND	$1,478,728	$1,478,728
* PRUDENTIAL MUTUAL FUNDS	TEMP GLOB BOND FD A	13,304	13,563
* PRUDENTIAL MUTUAL FUNDS	TROWE MID CAP GROW ADV	611,915	686,486
* PRUDENTIAL MUTUAL FUNDS	JENNISON SMALL CO FD A	120,519	114,166
* PRUDENTIAL MUTUAL FUNDS	AMERICAN BALANCED FUND	625,128	590,467
* PRUDENTIAL MUTUAL FUNDS	CALVERT LG CAP GROWTH A	27,351	22,979
* PRUDENTIAL MUTUAL FUNDS	PIMCO REAL RETURN BD ADM	74,834	75,854
* PRUDENTIAL MUTUAL FUNDS	EURO PACIFIC GROWTH FUND	1,553,571	1,568,101
* PRUDENTIAL MUTUAL FUNDS	VANGUARD INSTITL INDEX	1,340,240	1,221,825
* PRUDENTIAL MUTUAL FUNDS	WASHINGTON MUT INVEST	1,749,000	1,518,439
* PRUDENTIAL MUTUAL FUNDS	JENNISON GROWTH FUND A	1,317,111	1,498,412
* PRUDENTIAL MUTUAL FUNDS	ALLIANZ NFJ SM CAP ADMIN	149,669	192,874
* PRUDENTIAL MUTUAL FUNDS	AIM INTERNA SMALL CO FD A	441,625	410,326
* PRUDENTIAL MUTUAL FUNDS	FIRST AMER REAL ESTATE SEC	274,914	316,391
* PRUDENTIAL MUTUAL FUNDS	PIMCO TOT RET BOND ADMIN	837,045	849,945
* PRUDENTIAL MUTUAL FUNDS	JANUS PERKINS MID CAP VAL F	836,395	1,015,417
* PRUDENTIAL MUTUAL FUNDS	COLUMBIA SMALL CP INDEX A	10,650	11,228
* PRUDENTIAL MUTUAL FUNDS	DREYFUS MID CAP INDEX FD	749,039	652,736
* PRUDENTIAL MUTUAL FUNDS	COL SM CAP GR I A	147,671	194,839
PARTICIPANT LOANS	4.25% - 4.25%	0	280,391

WOOD RODGERS 401(K) PLAN

SCHEDULE H, LINE 4I – SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

PLAN SPONSOR EIN: 911762478

IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR OR MATURITY VALUE	COST	CURRENT VALUE
* THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	GUARANTEED INCOME FUND	$1,478,728	$1,478,728
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* PRUDENTIAL MUTUAL FUNDS	COL SM CAP GR I A	147,671	194,839
PARTICIPANT LOANS	4.25% - 4.25%	0	280,391

WOOD RODGERS 401(K) PLAN

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August 30, 2011

INDEPENDENT AUDITORS' REPORT

Wood Rodgers 401(K) Plan
Sacramento, California

We were engaged to audit the financial statements of Wood Rodgers 401(K) Plan as of December 31, 2010 and 2009, and for the year ended December 31, 2010 and month ended December 31, 2009, and the supplemental schedules as of the years ended December 31, 2010 and 2009 as listed in the accompanying table of contents. 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 Prudential 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 the years ended December 31, 2010 and 2009, and for the year ended December 31, 2010 and month ended December 31, 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 an 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.

John Waddell & Co., CPAs

3416 American River Dr.
Suite A
Sacramento, CA 95864
916/488/2460
Fax/488/2466

WOOD RODGERS 401(K) PLAN

Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

ASSETS

	2010	2009
Investment Contract with Prudential Financial		
Mutual Funds	**$ 12,324,716**	$ 10,954,048
General account - Guaranteed Income Fund	**1,368,705**	1,478,728
	13,693,421	12,432,776
Participant loans receivable	**457,384**	280,391
NET ASSETS AVAILABLE FOR BENEFITS	**$ 14,150,805**	$ 12,713,167

See accompanying notes to financial statements.

WOOD RODGERS 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2010
and Month Ended December 31, 2009

	2010	2009
Additions		
Investment Income:		
Participant loan interest income	$ 14,686	$ -
Interest	41,149	3,679
Mutual fund income		
Dividends	158,085	68,155
Capital gains	97,167	8,876
Net appreciation in fair value of investments	1,348,843	204,564
Total Investment Income	1,659,930	285,274
Contributions:		
Participant	818,489	82,164
Rollovers	249,516	-
Total Contributions	1,068,005	82,164
Total Additions	2,727,935	367,438
Deductions		
Benefits paid to participants	1,282,560	21,465
Administrative expenses	7,737	321
Total Deductions	1,290,297	21,786
Net Increase	1,437,638	345,652
Net Assets Available for Benefits		
Beginning of Year	12,713,167	12,367,515
End of Year	$ 14,150,805	$ 12,713,167

See accompanying notes to financial statements.

WOOD RODGERS 401(K) PLAN

Notes to Financial Statements
December 31, 2010 and 2009

NOTE 1 DESCRIPTION OF PLAN

The following description of the Wood Rodgers 401(K) 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 defined contribution plan covering all non-union employees age 21 and older. The Plan is subject to the provisions of the Employee Retirement Income Security Act (ERISA). The Plan was amended effective January 1, 2007 to allow in-service distributions and to allow Roth elective deferrals. The Plan was amended December 17, 2009 to comply with the Pension Protection Act and the Heart Act. The Plan was amended during 2010 to change the year-end of the Plan to December 31 and to allow participant loans. Therefore, these financial statements have been prepared for the one month ended December 31, 2009 and the year ended December 31, 2010, in accordance with DOL regulations. There are no material differences between the month ended December 31, 2009 audited financial statements and the unaudited information previously filed in the short-period Form 5500.

The Plan sponsor absorbs a significant portion of the administrative costs of the Plan.

Contributions

Each year, participants may contribute the lesser of 100 percent of pretax annual compensation, as defined in the Plan, or the limits imposed by the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company may make an employer match or Profit Sharing contribution to the Plan at the option of the Company's Board of Directors. Company contributions are funded by the due date of the Company's tax return.

Participant Accounts

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

Investment Options

Participants solely choose how their plan assets are invested from a selection of mutual funds and a guaranteed income fund through the Prudential Insurance Company of America.

NOTE 1 DESCRIPTION OF PLAN – CONTINUED

Vesting

Participants are vested immediately in their contributions and employer contributions plus actual earnings thereon.

Participant Loans

Plan loans are available from participant vested account balances, with a minimum loan of $1,000. Loans are limited to 50% of vested account balances. No loans greater than $50,000 are permitted.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a period. For termination of service for other reasons and hard-ship withdrawals, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Subsequent Events

Subsequent events have been evaluated through the date the financial statements were available to be issued, which was August 30, 2011.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the plan are prepared on the accrual basis of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment contracts. There is no adjustment of the fully benefit-responsive investment contracts from fair value to contract value because Prudential Trust has reported to the Plan that the two values are the same. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – CONTINUED

Estimates

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenues and expenses. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value as reported to the Plan by Prudential Trust Company (see Notes 3 and 4).

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date.

Participant Loans

Participant loans are stated at unpaid principal balances. Principal and interest are paid through payroll deductions. The loans bear interest at 4.25%.

Payment of Benefits

Benefits are recorded when paid.

NOTE 3 INVESTMENTS

All amounts reported in the financial statements and supplemental schedule related to investments and investment income were certified as complete and accurate by Prudential Trust Company.

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

	12/31/2010	12/31/2009
Euro Pacific Growth Fund	$ 1,594,906	$ 1,568,101
Vanguard Institutional Index	1,432,648	1,221,825
Prudential Jennison Growth A	1,679,158	1,498,412
Pimco Total Return Bond Admin	1,077,385	849,945
Janus Perkins Mid Cap Val S	1,213,168	1,015,417
Trowe Mid Cap Growth	850,746	686,486
Guaranteed Income Fund	1,368,705	1,478,728
Washington Mutual Investors	1,596,152	1,518,439
Dreyfus Mid Cap Index Fund	n/a	652,736

NOTE 3 INVESTMENTS – CONTINUED

During the fiscal year and one month ended December 31, 2010 and 2009, respectively, the Plan's investments (including gains and losses on investments bought and sold, as well as held, during the year) appreciated in value by $1,348,843 and $204,564, respectively, all attributable to mutual funds.

NOTE 4 FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying Statements of Net Assets Available for Benefits as reported to the Plan by Prudential Trust. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The fair value measurement accounting literature establishes a framework for measuring fair value that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

Mutual funds: Valued at quoted net asset value ('NAV') of shares held by the Plan at year end.

Guaranteed Investment Fund: Valued at fair value, which is the same as contract value, as determined by Prudential Trust Company. The Guaranteed Investment Fund is an insurance company issued general account backed evergreen (no maturity date) group annuity spread product. The contract is not actively traded. The contract does not include a market value adjustment upon discontinuance. There are no specific securities in the general account that back the insurer's obligations under the contract; therefore, there are no other observable inputs available to determine market value.

NOTE 4 FAIR VALUE MEASUREMENTS – CONTINUED

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2010.

Assets at Fair Value as of December 31, 2010

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced funds	$ 617,278	$ -	$ -	$ 617,278
Fixed income funds	1,244,606	-	-	1,244,606
International stock	2,348,475	-	-	2,348,475
Large cap stock	4,737,055	-	-	4,737,055
Mid cap stock	2,765,359	-	-	2,765,359
Small cap stock	540,749	-	-	540,749
Specialty funds	71,194	-	-	71,194
Total mutual funds	12,324,716	-	-	12,324,716
Guaranteed investment fund	-	-	1,368,705	1,368,705
Total assets at fair value	$ 12,324,716	$ -	$ 1,368,705	$ 13,693,421

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009.

Assets at Fair Value as of December 31, 2009

	Level 1	Level 2	Level 3	Total
Mutual funds:				
Balanced funds	$ 590,467	$ -	$ -	$ 590,467
Fixed income funds	939,362	-	-	939,362
International stock	1,978,427	-	-	1,978,427
Large cap stock	4,261,655			4,261,655
Mid cap stock	2,354,639			2,354,639
Small cap stock	513,107			513,107
Specialty funds	316,391			316,391
Total mutual funds	10,954,048	-	-	10,954,048
Guaranteed investment fund	-	-	1,478,728	1,478,728
Total assets at fair value	$ 10,954,048	$ -	$ 1,478,728	$ 12,432,776

NOTE 4 FAIR VALUE MEASUREMENTS – CONTINUED

The following table sets forth a summary of changes in fair value of the Plan's Level 3 investments:

	2010	2009
Balance at beginning of year	$ 1,478,728	$ 1,487,968
Interest	41,149	3,679
Purchases, sales, issuances, and settlements, net	(151,172)	(12,919)
Balance at end of year	$ 1,368,705	$ 1,478,728

NOTE 5 INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has a benefit-responsive investment contract with Prudential Insurance Company of America. Prudential maintains contributions in a general account. Interest is credited on contract balances using a single "portfolio rate" approach. Under this methodology, a single interest crediting rate is applied to all contributions made to the product regardless of the timing of those contributions. Interest crediting rates are reviewed on a semi-annual basis for resetting. The rates are established without the use of a specific formula. The minimum crediting rate under the contract is 1.5%.

The contract is included in the financial statements at contract value as reported to the Plan by Prudential Trust Company. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The contract issuer is contractually obligated to repay the principal and the specified interest rate that is guaranteed to the Plan. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

Generally, there are not any events that could limit the ability of the Plan to transact at contract value paid within 90 days, or in rare circumstances, contract value over time. There are not any events that allow the issuer to terminate the contract and which require the Plan sponsor to settle at an amount different than contract value paid either within 90 days or over time.

The average yield based on actual earnings and the average yield credited to participants was 3.00% for the year ended December 31, 2010 and month ended December 31, 2009.

NOTE 6 PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contribution at any time and to terminate the Plan subject to the provisions of ERISA.

NOTE 7 TAX STATUS

The Plan has adopted a prototype plan without alteration through Prudential Life Insurance Company. The Internal Revenue Service has determined and informed the Prudential Insurance Company of American by a letter dated June 30, 2004 that the prototype Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC).

The Plan has been amended since receiving the determination letter. The Plan Administrator believes the Plan is currently being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Plan's Form 5500 is subject to examination for three years after it is filed.

NOTE 8 RELATED PARTY TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Prudential Financial, Inc. Prudential Trust Company, an affiliate of Prudential Financial, Inc., is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

NOTE 9 CONTINGENCIES, RISKS AND UNCERTAINTIES

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

The investment in the insurance company general account may be subject to termination fees depending on the amount invested and the liquidity of the account at the time of termination.

WOOD RODGERS 401(K) PLAN

SCHEDULE H, LINE 4I – SCHEDULE OF ASSETS (HELD AT END OF YEAR) December 31, 2010

PLAN SPONSOR EIN: 911762478

IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR OR MATURITY VALUE	COST	CURRENT VALUE
* THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	GUARANTEED INCOME FUND	$1,368,705	$1,368,705
* PRUDENTIAL MUTUAL FUNDS	TEMP GLOB BOND FD A	43,884	45,630
* PRUDENTIAL MUTUAL FUNDS	TROWE MID CAP GROW ADV	642,529	850,746
* PRUDENTIAL MUTUAL FUNDS	JENNISON SMALL CO FD A	99,658	117,351
* PRUDENTIAL MUTUAL FUNDS	AMERICAN BALANCED FUND	589,424	617,278
* PRUDENTIAL MUTUAL FUNDS	CALVERT LG CAP GROWTH A	30,508	29,097
* PRUDENTIAL MUTUAL FUNDS	INVESCO DVLP MARKETS FUND I	396,444	410,338
* PRUDENTIAL MUTUAL FUNDS	PIMCO REAL RETURN BD ADM	120,549	121,591
* PRUDENTIAL MUTUAL FUNDS	EURO PACIFIC GROWTH FUND	1,499,502	1,594,906
* PRUDENTIAL MUTUAL FUNDS	VANGUARD INSTITL INDEX	1,378,970	1,432,648
* PRUDENTIAL MUTUAL FUNDS	WASHINGTON MUT INVEST	1,649,802	1,596,152
* PRUDENTIAL MUTUAL FUNDS	JENNISON GROWTH FUND A	1,347,181	1,679,158
* PRUDENTIAL MUTUAL FUNDS	ALLIANZ NFJ SM CAP ADMIN	151,136	214,064
* PRUDENTIAL MUTUAL FUNDS	INVESCO INTERNA SMALL CO FD A	327,336	343,231
* PRUDENTIAL MUTUAL FUNDS	NUVEEN REAL ESTA SEC	59,231	71,194
* PRUDENTIAL MUTUAL FUNDS	PIMCO TOT RET BOND ADMIN	1,077,202	1,077,385
* PRUDENTIAL MUTUAL FUNDS	JANUS PERKINS MID CAP VAL F	918,188	1,213,168
* PRUDENTIAL MUTUAL FUNDS	COLUMBIA SMALL CP INDEX A	13,218	16,965
* PRUDENTIAL MUTUAL FUNDS	DREYFUS MID CAP INDEX FD	651,766	701,445
* PRUDENTIAL MUTUAL FUNDS	COL SM CAP GR I A	118,885	192,369
PARTICIPANT LOANS	4.25% - 4.25%	0	457,384

WOOD RODGERS 401(K) PLAN

SCHEDULE H, LINE 4I – SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

PLAN SPONSOR EIN: 911762478

IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, COLLATERAL, PAR OR MATURITY VALUE	COST	CURRENT VALUE
* THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	GUARANTEED INCOME FUND	$1,478,728	$1,478,728
* PRUDENTIAL MUTUAL FUNDS	TEMP GLOB BOND FD A	13,304	13,563
* PRUDENTIAL MUTUAL FUNDS	TROWE MID CAP GROW ADV	611,915	686,486
* PRUDENTIAL MUTUAL FUNDS	JENNISON SMALL CO FD A	120,519	114,166
* PRUDENTIAL MUTUAL FUNDS	AMERICAN BALANCED FUND	625,128	590,467
* PRUDENTIAL MUTUAL FUNDS	CALVERT LG CAP GROWTH A	27,351	22,979
* PRUDENTIAL MUTUAL FUNDS	PIMCO REAL RETURN BD ADM	74,834	75,854
* PRUDENTIAL MUTUAL FUNDS	EURO PACIFIC GROWTH FUND	1,553,571	1,568,101
* PRUDENTIAL MUTUAL FUNDS	VANGUARD INSTITL INDEX	1,340,240	1,221,825
* PRUDENTIAL MUTUAL FUNDS	WASHINGTON MUT INVEST	1,749,000	1,518,439
* PRUDENTIAL MUTUAL FUNDS	JENNISON GROWTH FUND A	1,317,111	1,498,412
* PRUDENTIAL MUTUAL FUNDS	ALLIANZ NFJ SM CAP ADMIN	149,669	192,874
* PRUDENTIAL MUTUAL FUNDS	AIM INTERNA SMALL CO FD A	441,625	410,326
* PRUDENTIAL MUTUAL FUNDS	FIRST AMER REAL ESTATE SEC	274,914	316,391
* PRUDENTIAL MUTUAL FUNDS	PIMCO TOT RET BOND ADMIN	837,045	849,945
* PRUDENTIAL MUTUAL FUNDS	JANUS PERKINS MID CAP VAL F	836,395	1,015,417
* PRUDENTIAL MUTUAL FUNDS	COLUMBIA SMALL CP INDEX A	10,650	11,228
* PRUDENTIAL MUTUAL FUNDS	DREYFUS MID CAP INDEX FD	749,039	652,736
* PRUDENTIAL MUTUAL FUNDS	COL SM CAP GR I A	147,671	194,839
PARTICIPANT LOANS	4.25% - 4.25%	0	280,391