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;
- [X] a multiple-employer plan; or
- [ ] a single-employer plan;
- [ ] a DFE (specify) ____

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

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

D Check box if filing under:
- [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
MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1996

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

3300 PHILLIPS HIGHWAY, US #1 SOUTH
JACKSONVILLE, FL 32247

2b Employer Identification Number (EIN) 59-1059698

2c Sponsor's telephone number 904-348-3384

2d Business code (see instructions) 322100

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.	09/15/2011	DARNELL BABBIT
	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")
MAC PAPERS, INC.

3300 PHILLIPS HIGHWAY, US #1 SOUTH
JACKSONVILLE, FL 32247

3b Administrator's EIN
59-1059698

3c Administrator's telephone number
904-348-3384

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**	962
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**	861
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	41
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	902
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f	Total. Add lines **6d** and **6e**	**6f**	903
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	572
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

(1)	X	**H** (Financial Information)
(2)		**I** (Financial Information – Small Plan)
(3)		**A** (Insurance Information)
(4)	X	**C** (Service Provider Information)
(5)	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 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
MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
59-1059698

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

ALGER

13-2665689

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

HARBOR

04-2679462

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

JANUS

43-1804048

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

JP MORGAN

13-2624428

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

PIMCO FUNDS

95-2632339

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

T. ROWE PRICE

52-2264646

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

AMERICAN FUNDS

95-1411037

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

DREYFUS

13-5673135

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

FIDELITY INVESTMENTS

06-1194217

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

FRANKLIN TEMPLETON INVESTMENTS

94-3167260

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

GOLDMAN SACHS

13-5108880

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

INVESCO VAN KAMPEN

58-2287224

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

LAZARD

20-4571006

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

LORD ABBETT

13-5620131

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

NEUBERGER BERMAN

13-5521910

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

THORNBURG

85-0301299

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

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

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

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

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

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

WELLS FARGO BANK, N.A.

94-1347393

(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 21 37 49 50 52 60 61 62 63 64	SERVICE PROVIDER	21652	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
MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MAC PAPERS, INC.

D Employer Identification Number (EIN)
59-1059698

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: ENHANCED STOCK MARKET G2

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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)
56-6288528-001	C	1745562

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE RETURN FUND G4

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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)
41-6202499-001	C	78357

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL RETURN BOND FUND G5

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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)
94-3222878-001	C	291035

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE INVESTMENT FUND 6

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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)
56-6271988-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: DIVERSIFIED BOND GROUP TRUST

b Name of sponsor of entity listed in (a): WACHOVIA BANK, N.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)
54-6113592-001	C	0

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

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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
MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
59-1059698

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		-1
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)	1896887	1892986
(9) Value of interest in common/collective trusts	1c(9)	1903352	2114954
(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)	25319035	29182068
(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	29119274	33190007
	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	29119274	33190007

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)	527700	
	(B) Participants	2a(1)(B)	2128810	
	(C) Others (including rollovers)	2a(1)(C)	57553	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2714063
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)	88597	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		88597
	(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)	189534	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		189534
	(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)		232890
(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)		2948898
c Other income	2c		49300
d Total income. Add all **income** amounts in column (b) and enter total	2d		6223282
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2006549	
(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)		2006549
f Corrective distributions (see instructions)	2f		39511
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)	106489	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		106489
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2152549
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		4070733
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: KPMG (2) EIN: 13-5565207

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
MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
59-1059698

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): 56-1354495

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):

KPMG LLP
Suite 1100
Independent Square
One Independent Drive
Jacksonville, FL 32202

August 19, 2011

401(k) Profit Sharing Plan Committee of
Mac Papers, Inc. and Mac Paper Converters, Inc.
3300 Phillips Highway
Jacksonville, FL 32207

Ladies and Gentlemen:

We have audited the financial statements of Mac Papers, Inc. 401(k) Profit Sharing Plan (the Plan) as of December 31, 2010 and 2009 and for the years then ended, and the supplemental schedule, Schedule H, line 4i – Schedule of Assets (Held at the End of the Year) as of December 31, 2010 and have issued our report thereon under date of August 19, 2011. Under our professional standards, we are providing to you with the accompanying information related to the conduct of our audit.

Our Responsibility under Professional Standards when limited scope audit is performed:

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 information summarized in note 4, which was certified by Wells Fargo Bank, National Association, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the financial statements and supplemental schedule taken as a whole. We are responsible for forming and expressing an opinion that the form and content of the financial statements and supplemental schedule, that have been prepared by the Plan Administrator with the oversight of the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc. committee, 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. We have a responsibility to perform our audit of the information included in the financial statements and supplemental schedule, other than the information certified by the trustee, in accordance with professional standards. In carrying out this responsibility, we planned and performed the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether caused by error or fraud. Because of the nature of audit evidence and the characteristics of fraud, we are to obtain reasonable, not absolute, assurance that material misstatements are detected. We have no responsibility to plan and perform the audit to obtain reasonable assurance that misstatements, whether caused by error or fraud, that are not material to the financial statements are detected. Our audit does not relieve the

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Plan Administrator or the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc. of their responsibilities.

In addition, in planning and performing our audit of the financial statements and supplemental schedule, we considered internal control over financial reporting (internal control) as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we do not express an opinion on the effectiveness of the Plan's internal control.

We also have the responsibility to communicate significant matters related to the financial statement audit that are, in our professional judgment, relevant to the responsibilities of the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc. in overseeing the financial reporting process. We are not required to design procedures for the purpose of identifying other matters to communicate to you.

Other Information in Documents Containing Audited Financial Statements

Our responsibility for other information in documents containing the Plan's financial statements and our auditors' report thereon does not extend beyond the financial information identified in our auditors' report, and we have no obligation to perform any procedures to corroborate other information contained in these documents. We have, however, read the other information included in the Plan's annual report Form 5500 submitted to the Department of Labor, and no matters came to our attention that cause us to believe that such information, or its manner of presentation, is materially inconsistent with the information, or manner of its presentation, appearing in the financial statements.

Accounting Practices and Alternative Treatment

Significant Accounting Policies

The significant accounting policies used by the Plan are described in note 2 to the financial statements.

Unusual Transactions

During 2010, there were no transactions that were both significant and unusual or transactions for which there is a lack of authoritative guidance or consensus.

Alternative Accounting Treatments within U.S. Generally Accepted Accounting Principles

There were no alternative accounting policies related to material items discussed with the Plan's management during the current audit period and through the date of our report.

Qualitative Aspects of Accounting Practices

We have discussed with the Plan's management our judgments about the quality, not just the acceptability, of the Plan's accounting principles as applied in its financial reporting. The discussions generally included such matters as the consistency of the Plan's accounting policies and their application, and the understandability and completeness of the Plan's financial statements, which included related disclosures.

Management Judgments and Accounting Estimates

The preparation of the financial statements and supplemental schedule requires management of the Plan to make a number of estimates and assumptions relating to the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and supplemental schedule and the reported amounts of additions and deductions from net assets during the period.

Uncorrected and Corrected Misstatements

In connection with our audit of the Plan's financial statements and supplemental schedule, we have not identified any significant financial statement misstatements that have not been corrected in the Plan's books and records as of and for the year ended December 31, 2010 and have communicated that finding to management.

Disagreements with Management

There were no disagreements with management on financial accounting, and reporting matters that, if not satisfactorily resolved, would have caused a modification of our auditors' report on the Plan's financial statements.

Management's Consultation with Other Accountants

To the best of our knowledge, the Plan's management has not consulted with or obtained opinions, either written or oral, from other independent accountants during the year ended December 31, 2010.

Significant Issues Discussed, or Subject to Correspondence, with Management

Major Issues Discussed with Management Prior to Retention

We generally discuss a variety of matters with you and management each year prior to our retention by you as the Plan's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

Material Written Communications

Attached to this letter please find copies of the following communications between management and us:

1. Management representation letter; and

2. Engagement letter.

Significant Difficulties Encountered During the Audit

We encountered no significant difficulties in dealing with management in performing our audit.

* * * * * * *

This letter to the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc. is intended solely for the information and use of the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc. and Plan management and is not intended to be and should not be used by anyone other than these specified parties.

Very truly yours,

KPMG LLP

mac papers

August 19, 2011

KPMG LLP
One Independent Drive
Suite 1100
Jacksonville, Florida 32202

Ladies and Gentlemen:

We are providing this letter in connection with your audits of the statements of net assets available for benefits of Mac Papers, Inc. 401(k) Profit Sharing Plan (the Plan) as of December 31, 2010 and 2009, the related statements of changes in net assets available for benefits for the years ended December 31, 2010 and 2009 and the supplemental schedule, Schedule H, line 4i-schedule of assets (held at end of year) as of December 31, 2010. We understand that, at our instruction, you did not perform any procedures with respect to investment information prepared and certified to by Wells Fargo, N.A., the trustee, in accordance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA) (DOL Regulation 2520.103-5), other than comparing such investment information to the financial statements and supplemental schedule. Because of the significance of the information which you did not audit, we understand that you will not express an opinion on the financial statements and supplemental schedule taken as a whole.

Certain representations in this letter are described as being limited to matters that are material. Notwithstanding this, items are considered material, regardless of size, if they involve an omission or misstatement of accounting information that, in the light of surrounding circumstances, makes it probable that the judgment of a reasonable person relying on the information would be changed or influenced by the omission or misstatement.

We confirm, to the best of our knowledge and belief as of August 19, 2011, the following representations made to you during your audit:

1. We are responsible for the fair presentation in the Plan's statements of net assets available for benefits and the changes in net assets available for benefits in conformity with U.S. generally accepted accounting principles and for the fair presentation of the accompanying supplemental schedule in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The financial statements and supplemental schedule referred to above are fairly presented in conformity with U.S.

generally accepted accounting principles and the notes include all disclosures required by laws and regulations to which the Plan is subject.

2. We have made available to you:

   a. All financial records and related data.

   b. All minutes of the meetings of Mac Papers, Inc. 401(k) Profit Sharing Plan Committee, or summaries of actions of recent meetings for which minutes have not yet been prepared.

   c. Amendments made to the plan instrument, the trust agreement, or insurance contracts during the year, including amendments to comply with applicable laws.

3. Except as disclosed to you in writing, there have been no communications from regulatory agencies concerning noncompliance with, or deficiencies in financial reporting practices, operations of the Plan, or other matters that could have a material adverse effect on the financial statements.

4. There are no:

   a. Violations or possible violations of laws or regulations, whose effects should be considered for disclosure in the financial statements or as a basis for recording a loss contingency or a contribution receivable.

   b. Unasserted claims or assessments that our lawyer has advised us are probable of assertion and must be disclosed in accordance with FASB ASC 450, *Contingencies.*

   c. Other liabilities or gain or loss contingencies that are required to be accrued or disclosed by FASB ASC 450, *Contingencies.*

   d. Material transactions that have not been properly recorded in the accounting records underlying the financial statements.

   e. Events that have occurred subsequent to the Plan's year end and through the date of this letter that would require adjustment to or disclosure in the financial statements, except as disclosed.

f. Other matters (e.g., breach of fiduciary responsibilities, non exempt transactions/prohibited party-in-interest transactions, loans or loans in default, or events that may jeopardize the tax status).

5. We acknowledge our responsibility for the design and implementation of programs and controls to prevent, deter and detect fraud. We understand that the term "fraud" includes misstatements arising from fraudulent financial reporting and misstatements arising from misappropriation of assets.

Misstatements arising from fraudulent financial reporting are intentional misstatements, or omissions of amounts or disclosures in financial statements to deceive financial statement users. Misstatements arising from misappropriation of assets involve the theft of an entity's assets where the effect of the theft causes the financial statements not to be presented in conformity with U. S. generally accepted accounting principle.

6. We have no knowledge of any fraud or suspected fraud affecting the Plan involving:

a. Management/Plan Administrator,

b. Employees who have significant roles in the Plan's internal control over financial reporting, or

c. Others (i.e. third party service providers) where the fraud could have a material effect on the financial statements.

7. We have no knowledge of any allegations of fraud or suspected fraud affecting the plan received in communications from employees, former employees, participants, regulators, beneficiaries, service providers, third-party administrators, or others.

8. We have no:

a. Intentions that may materially affect the carrying value or classification of the Plan's assets and liabilities.

b. Intentions to terminate the Plan or merge the Plan into or with another plan(s).

9. We have no knowledge of any officer or director of the Plan or Plan sponsor, or any other person acting under the direction thereof, having taken any action to fraudulently influence, coerce, manipulate or mislead you during your audit.

10. The following have been properly recorded or disclosed in the financial statements:

a. Related party transactions including parties-in-interest, as defined in ERISA section 3(14) and regulations there under, including sales, purchases, loans, transfers, leasing arrangements, guarantees, ongoing contractual commitments and amounts receivable from or payable to related parties.

We understand that Section 3(14) of ERISA defines a "party in interest" to include fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the plan, an employee organization whose members are covered by the plan, a person who owns 50 percent or more of such an employer or employee association, or relatives of such persons just listed. Although not identical, ERISA defines "parties in interest" in much the same way as FASB ASC 850, *Related Party Disclosures* defines the term *related parties.* We understand the term "related party" refers to affiliates of the enterprise; trusts for the benefit of employees, such as pension and profit-sharing trusts that are managed by or under the trusteeship of management; principal owners of the enterprise; its management; members of the immediate families of principal owners of the enterprise and its management; and other parties with which the enterprise may deal if one party controls or can significantly influence the management or operating policies of the other to an extent that one of the transacting parties might by prevented from fully pursuing its own separate interests. Another party also is a related party if it can significantly influence the management or operating policies of the transacting parties or if it has an ownership interest in one of the transacting parties and can significantly influence the other to an extent that one or more of the transacting parties might be prevented from fully pursuing its own separate interests.

b. Non-exempt party-in-interest transactions (as defined in ERISA section 3(1) and regulations under that section) that were not disclosed in the supplemental schedule or notes to the financial statements.

c. Investments in default or considered to be uncollectible that were not disclosed in the supplemental schedules

d. Reportable transactions (as defined in ERISA section 103(b)(3)(H) and regulations under that section) that were not disclosed in the supplemental schedules

e. Guarantees, whether written or oral, under which the Plan is contingently liable, including guarantee contracts and indemnification agreements pursuant to FASB ASC 460, *Guarantees.*

f. Significant estimates and material concentrations known to us that are required to be disclosed in accordance with FASB ASC Section 275, *Risks and Uncertainties.*

We understand that significant estimates are estimates at the statement of net assets available for benefits date that are reasonably possible of changing materially within the next year. Concentrations refer to the nature and type of investments held by the plan, or markets or geographic areas for which it is reasonably possible that events could occur which would significantly disrupt normal plan operations within the next year.

g. Amendments to the plan instrument, if any.

h. Changes in accounting principle affecting consistency.

11. The Plan has satisfactory title to all owned assets, which are recorded at fair value as of the date of the Plan's year-end, and all liens, encumbrances, assets pledged as collateral, or security interests (including securities lending arrangements) requiring disclosure have been properly disclosed in the financial statements.

12. The Plan has complied with all aspects of debt and other contractual agreements that would have a material effect on the financial statements in the event of noncompliance.

13. The Plan has complied with the fidelity bonding requirements of ERISA.

14. All required filings of the Plan and trust documents with the appropriate regulatory agencies have been made.

15. We have disclosed to you all deficiencies in the design or operation of internal control over financial reporting of which we are aware, which could adversely affect the Plan's ability to initiate, authorize, record, process, or report financial data including any operational compliance errors that could have a material effect on the plan's financial statements and the plan's tax status. We have separately disclosed to you all such deficiencies that we believe to be significant deficiencies or material weaknesses in internal control over financial reporting, as those terms are defined in Statement on Auditing Standards No. 115, *Communicating Internal Control Related Matters Identified in an Audit.*

16. The following information about financial instruments with off-balance-sheet risk and financial instruments with concentrations of credit risk has been properly disclosed in the financial statements:

    a. Extent, nature, and terms of financial instruments with off-balance-sheet risk;

    b. The amount of credit risk of financial instruments with off-balance-sheet credit risk, and information about the collateral supporting such financial instruments; and

    c. Significant concentrations of credit risk arising from all financial instruments and information about the collateral supporting such financial instruments.

17. We are responsible for making the fair value measurements and disclosures included in the financial statements in accordance with FASB ASC 820, *Fair Value Measurements and Disclosures*, including determining the fair value of assets and liabilities, for which there has been a significant decrease in the volume and level of activity in relation to the normal market activity for those assets or liabilities (or similar assets or liabilities) or for which transactions are deemed not orderly. As part of fulfilling this responsibility, we have established an accounting and financial reporting process for determining the fair value measurements and disclosures, in accordance with the fair value techniques included in FASB ASC 820, *Fair Value Measurements and Disclosures*, (market approach, income approach and/or cost approach), considered the appropriateness of valuation methods, including circumstances in which a practical expedient may be used to estimate fair value, adequately supported any significant assumptions used, and ensured that the presentation and disclosure of the fair value measurements are in accordance with generally accepted accounting principles including the disclosure requirements of FASB ASC 820. We believe the assumptions and methods used by us, including those used by specialists engaged by us, are in accordance with the definition of fair value in FASB ASC 820 and the disclosures adequately describe the level of the inputs used in the fair value measurement, in accordance with the fair value hierarchy in FASB ASC 820.

18. Uncertain tax positions have been accounted for in accordance with the provisions of FASB ASC 740, *Income Taxes*.

19. The plan (and the trust established under the Plan) is qualified under the appropriate section of the Internal Revenue Code and intends to continue as a qualified plan (and trust). We believe the plan and trust is being operated in a manner that did not jeopardize the continued qualification of the plan (and trust).

20. The Plan has complied with IRS and DOL rules and regulations concerning the timely remittance of participant contributions and loan repayments to the trust containing assets for the Plan.

Very truly yours,

Mac Papers, Inc. 401(k) Profit Sharing Plan and Mac Papers, Inc.

Sutton McGehee

Mr. Sutton McGehee

Chief Executive Officer

Darnell Babbit VPHR

Ms. Darnell Babbit

Plan Administrator and Vice President of Human Resources

Watts Gordon

Mr. Walt Gordon

Controller

KPMG LLP
Suite 1100
Independent Square
One Independent Drive
Jacksonville, FL 32202

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Internet www.us.kpmg.com

June 15, 2011

Mac Papers, Inc. 401(k) Profit Sharing Plan
Mac Papers, Inc.
3300 Phillips Highway
Jacksonville, FL 32207

Attention: Darnell Babbit, *Plan Administrator*, Mac Papers, Inc. 401(k) Profit Sharing Plan
John W. Brent, *Chief Financial Officer*, Mac Papers, Inc., Plan Sponsor

This letter amends our engagement letter dated June 1, 2009, confirming our understanding to provide professional audit services to Mac Papers, Inc. 401(k) Profit Sharing Plan (the Plan) by substituting the attached Appendix I for the Appendix I originally attached to our engagement letter.

The attached Appendix I lists the services to be rendered and related fees to provide each specified service for the identified time period. Except as specified in this letter and in the Appendix I attached to this letter, all provisions of the aforementioned engagement letter remain in effect until either the Plan or we terminate this agreement or mutually agree to the modification of its terms.

While our report may be sent to the Plan or Plan Sponsors electronically for your convenience, only the hard copy report is to be relied upon as our work product.

The Plan agrees to provide prompt notification if the Plan or any of its subsidiaries currently are or become subject to the laws of a foreign jurisdiction that require regulation of any securities issued by the Plan or such subsidiary.

In connection with the performance of services under the Engagement Letter, KPMG may utilize the services of KPMG controlled entities, KPMG member firms and/or third party service providers within and without the United States to complete the services under the Engagement Letter. Moreover, KPMG may utilize third party service providers within and without the United States to provide, at KPMG's direction, administrative and clerical support services to KPMG.

Collaboration Site

KPMG has developed a collaborative, virtual workspace ('Collaboration Site') in a protected, online environment. This Collaboration Site allows for the placement of certain documents into the Collaboration Site to be used by those providing the Services to you. The Collaboration Site will be decommissioned at the end of the Engagement, unless otherwise required by applicable law or professional standards, or other requirements of the engagement team.

In order to maintain the confidentiality of the information contained in the Collaboration Site, KPMG has taken certain steps to provide protection against unauthorized access. Access to the Collaboration Site is limited to KPMG authenticated and authorized users and the Collaboration Site is protected by encryption and a secure network.

KPMG LLP is a Delaware limited liability partnership, the U.S. member firm of KPMG International Cooperative ("KPMG International"), a Swiss entity.

We shall be pleased to discuss this letter with you at any time. For your convenience in confirming these arrangements, we enclose a copy of this letter. Please sign in the space provided and return the copy to us.

Very truly yours,

KPMG LLP

Cindy Rose

Cindy Rose
Partner

Enclosure

ACCEPTED:

Mac Papers, Inc. 401(k) Profit Sharing Plan

Darnell Babbit VPHC

Darnell Babbit
Plan Administrator

6/24/11
Date

John W Brent

John W. Brent
Chief Financial Officer, Mac Papers, Inc.

6/24/11
Date

Appendix I

Fees for Services

Based upon our discussions with and representations of management, our fees for services we will perform are estimated as follows:

Limited scope audit of financial statements and supplemental schedules of the Plan as of December 31, 2010 and 2009, and for the years then ended, all of which are to be included in the Plan's Form 5500 filing with the DOL.	$16,500

The above estimates are based on the level of experience of the individuals who will perform the services. In addition, expenses for items such as travel, telephone, postage, and typing, printing, and reproduction of financial statements are billed for reimbursement as incurred. Circumstances encountered during the performance of these services that warrant additional time or expense could cause us to be unable to deliver them within the above estimates. We will endeavor to notify you of any such circumstances as they are assessed.

Where KPMG is reimbursed for expenses, it is KPMG's policy to bill clients the amount incurred at the time the good or service is purchased. If KPMG subsequently receives a volume rebate or other incentive payment from a vendor relating to such expenses, KPMG does not credit such payment to the client. Instead, KPMG applies such payments to reduce its overhead costs, which costs are taken into account in determining KPMG's standard billing rates and certain transaction charges which may be charged to clients.

MAC PAPERS, INC.
401(k) PROFIT SHARING PLAN

Financial Statements and Supplemental Schedule

December 31, 2010 and 2009

(With Independent Auditors' Report Thereon)

MAC PAPERS, INC.
401(K) PROFIT SHARING PLAN

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KPMG LLP
Suite 1100
Independent Square
One Independent Drive
Jacksonville, FL 32202

Independent Auditors' Report

The Plan Administrator
Mac Papers, Inc. 401(k) Profit Sharing Plan:

We were engaged to audit the accompanying statements of net assets available for benefits of Mac Papers, Inc. 401(k) Profit Sharing Plan (the Plan) as of December 31, 2010 and 2009, and the related statements of changes in net assets available for benefits for the years ended December 31, 2010 and 2009 and the supplemental Schedule H, line 4i–Schedule of Assets Held (At End of Year) as of December 31, 2010. These financial statements and the supplemental schedule 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 4 to the financial statements, which was certified by Wells Fargo Bank, National Association, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications 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 an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

KPMG LLP

August 19, 2011
Certified Public Accountants

KPMG LLP is a Delaware limited liability partnership, the U.S. member firm of KPMG International Cooperative ("KPMG International"), a Swiss entity.

MAC PAPERS, INC.
401(k) PROFIT SHARING PLAN

Statements of Net Assets Available for Benefits

December 31, 2010 and 2009

	2010	2009
Assets:		
Cash	$ —	50,113
Investments, at fair value		
Investments in common collective trusts	2,121,822	1,895,388
Investments in registered investment companies	29,182,068	25,319,035
Total investments, at fair value	31,303,890	27,214,423
Notes receivables from participants	1,892,986	1,896,887
Total assets	33,196,876	29,161,423
Liabilities:		
Bank overdraft	(1)	—
Excess contributions payable	(54,024)	(39,511)
Operating payables	—	(50,113)
Total liabilities	(54,025)	(89,624)
Net assets available for benefits before adjustments	33,142,851	29,071,799
Adjustment from fair value to contract value for interest in collective trust relating to fully benefit-responsive investment contracts	(6,868)	7,964
Net assets available for benefits	$ 33,135,983	29,079,763

See accompanying notes to financial statements.

MAC PAPERS, INC.
401(k) PROFIT SHARING PLAN

Statements of Changes in Net Assets Available for Benefits

Years ended December 31, 2010 and 2009

		2010	2009
Contributions:			
Participants	$	2,074,786	2,160,904
Employer		527,700	523,790
Rollovers		57,553	44,798
Total contributions		2,660,039	2,729,492
Investment income:			
Net appreciation in fair value of investments		3,231,088	4,394,598
Dividends		189,534	245,689
Interest income		88,597	98,300
Total investment income		3,509,219	4,738,587
		6,169,258	7,468,079
Deductions:			
Benefits paid to participants		2,006,549	1,183,674
Administrative expenses		106,489	105,978
Total deductions		2,113,038	1,289,652
Net increase		4,056,220	6,178,427
Net assets available for benefits:			
Beginning of year		29,079,763	22,901,336
End of year	$	33,135,983	29,079,763

See accompanying notes to financial statements.

(1) Plan Description

The following description of the Mac Papers, Inc. 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the summary plan description for Mac Papers, Inc. 401(k) Profit Sharing Plan for a more complete description of the Plan's provisions.

(a) General

The Plan is a defined contribution plan covering all of the employees of Mac Papers, Inc. and Mac Paper Converters, Inc. (collectively, the Company or the Employer). The Plan is subject to the provisions of the Employee Retirement Security Act (ERISA), as amended.

(b) Plan Administration

Under a trust agreement dated January 1, 1996, Wachovia Bank, National Association (Wachovia) was appointed trustee for the Plan. Wachovia also serves as record keeper and asset custodian. In conjunction with the acquisition of Wachovia by Wells Fargo Bank, National Association (Wells Fargo), these services are now performed by Wells Fargo. The Plan is administered by the 401(k) Profit Sharing Plan Committee of Mac Papers, Inc. and Mac Paper Converters, Inc., (the Committee) which is appointed by the board of directors of the Company.

(c) Eligibility

Employees are eligible to participate in the Plan when they have completed three months of service and have attained age 21. Prior to January 1, 2010, employees had to complete one year of service. Employees are able to participate in matching contributions when they have completed one year of service and have attained age 21.

(d) Contributions

Participants can elect to contribute between 1% and 50% of their annual compensation, subject to certain limitations under the Internal Revenue Code of 1986, as amended (IRC). Participants who have attained age 50 before the end of the calendar year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified plans.

Effective July 1, 2011, all eligible employees hired on or after July 1, 2011, will be automatically enrolled in the Plan at a contribution rate of 3% unless the employee elects otherwise prior to their first contribution. Contributions are invested in AdviceTrack funds, until the participant directs investment of the automatic deferrals into another investment option offered by the Plan. Prior to July 1, 2011, eligible employees must elect to enroll in the Plan.

The Company, at its discretion, provides a matching contribution which was equal to 35% of the first 6% of a participant's compensation during 2010 and 2009.

(e) Vesting

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

(f) Participant Accounts

Individual accounts are maintained for each of the Plan's participants to reflect each participant's share of the Plan's income (loss) and administrative expenses, and each participant's contributions and employer matching contributions. Allocations of income (loss) and administrative expenses are made daily based on relative account balances and investment elections, as defined in the Plan document.

(g) Benefits Paid to Participants

Timing of Distribution

Generally, distribution of a participant's account balance will be made or commence to the participant or their beneficiary (as applicable) as soon as administratively practicable after the participant's termination of employment or death.

Form of Benefits

If a terminated participant's account balance does not exceed $1,000, a distribution of the vested account balance will be made regardless of consent. If no distribution election is made, the distribution will be rolled over to an IRA. All distributions are made in single lump–sum payments except for reasons of death or those reaching normal retirement age. The Plan provides other payment options for payment of participant balances in excess of $5,000 upon reaching normal retirement age or participant death.

Death Benefit

Upon the death of the participant prior to the distribution of his/her account, the total amount credited to his/her account shall be payable to such participant's beneficiary.

Hardship Withdrawals

Under conditions of substantial financial hardship, as defined by the Plan, a participant may withdraw all or a portion of his/her salary deferral contributions credited to his/her account, but not the earnings on the contributions.

In-Service Withdrawals

The Plan allows for in-service withdrawals for participants who attain age 59½ and remain an active employee.

(h) Notes Receivable from Participants

A participant may borrow no more than the lesser of $50,000 or 50% of his/her vested account balance with a minimum loan amount of $1,000. No more than one loan may be outstanding at any given time. Loans are secured by the participant's account balance and are repayable through payroll deductions over periods ranging up to 60 months or 120 months for the purchase of a permanent residence. The interest rate is established at the time the loan is granted at a rate of prime plus 1% and remains fixed at this rate over the life of the loan. The interest, which is paid by the participant,

is paid back to the participant's account. Effective January 1, 2010, participants may refinance their loans only once in a 12 month period.

(i) Forfeited Accounts

At December 31, 2010 and 2009, forfeited nonvested accounts arising from excess contributions payable totaled $2,203 and $347, respectively. These accounts will be used to reduce future employer contributions.

(j) Investment Options

Each participant may direct their account balance into one or more of the investment options offered by the Plan. Allocations must be in increments of 1% of each contribution. A participant may change such allocation and may transfer all or a portion of the value of his or her account in increments of 1% among the fund options at any time.

Subsequent to year end, the Committee decided that the Neuberger Berman Partners Asset Fund (NBPBX) and the Fidelity Advisor Value Strategies T Fund (FASPX) would be removed as soon as possible and monies invested therein would be transferred to the Wells Fargo Advantage Core Equity Adm Fund (EVVTX) and the Dreyfus Midcap Index Fund (PESPX), respectively. In addition, one new fund, Fidelity Contra Fund (FCNTX), will be added as an investment option.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

The financial statements of the Plan are prepared using the accrual method of accounting. The preparation of financial statements, in conformity with accounting principles generally accepted in the United States of America, requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

(b) Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See note 8 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year. Brokerage fees are added to the acquisition costs of assets purchased and subtracted from the proceeds of assets sold.

Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is 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 Plan's financial statements.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Plan invests in fully benefit-responsive investment contracts through a collective trust, the Wells Fargo Stable Return Fund G4 (the Fund). Contract value for this collective trust is based on the net asset value of the fund as reported by Wells Fargo. The Statement of Net Assets Available for Benefits presents the fair value of the investment in the collective trust as well as the adjustment of the investment in the collective trust from fair value to contract value relating to the fully benefit-responsive investment contracts. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

The Plan's interest in the Fund is calculated by applying the Plan's ownership percentage in the Fund to the total fair value of the Fund. The underlying assets owned by the Fund consist primarily of readily marketable fixed income securities with quoted market prices.

The interest crediting rate is determined quarterly and is calculated based upon many factors, including current economic and market conditions, the general interest rate environment, and purchases and redemptions by unit-holders. There is no relationship between future crediting rates and the adjustment to contract value reported in the statement of net assets available for benefits.

The average market yield of the Fund for the years ended December 31, 2010 and 2009 was 2.38% and 3.4%, respectively. The crediting rate to participants for the years ending December 31, 2010 and 2009 was 2.90% and 3.32%, respectively.

(c) Administrative Expenses

The Plan pays the administrative costs of mutual funds, collective trust funds, and loan processing fees. The plan sponsor pays any other administrative costs.

(d) Excess Contributions Payable

Excess contributions of the Plan represent the employees' excess deferrals which will be refunded to the employees after plan year-end. These amounts offset participant contributions in the accompanying Statements of Changes in Net Assets Available for Benefits.

(e) Payment of Benefits

Benefits are recorded when paid.

(f) Notes Receivable from Participants

In September 2010, the FASB issued Accounting Standards Update (ASU) No. 2010 – 25, *Plan Accounting – Defined Contribution Pension Plans (Topic 962), Reporting Loans to Participants by Defined Contribution Pension Plans, a consensus of the FASB Emerging Issues Task Force*

(Update). This Update requires that participant loans be classified as notes receivable from participants, which are segregated from plan investments and measured at their unpaid principal balance plus any accrued but unpaid interest. The amendments in the Update are to be applied retrospectively to all prior periods presented, effective for fiscal years ending after December 15, 2010. The Plan has reclassified participant loans from investments to notes receivable from participants for financial statement presentation. The Form 5500 will continue to present notes receivable from participants as an investment.

(3) Income Tax Status

The Plan adopted a nonstandardized Wells Fargo prototype plan for which an opinion letter dated March 31, 2008 was received stating the prototype plan qualifies under the applicable provisions of the Internal Revenue Code (IRC). The Company has not requested a separate determination letter from the IRS, but rather is relying on the letter received by the prototype plan sponsor in accordance with Announcement 2001-77. Management believes the Plan and its underlying trust have operated within the terms of the prototype plan documents and current law and are qualified under applicable provisions of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the applicable taxing authorities. Plan management has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(4) Information Certified by Trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee has certified that the following data included in the accompanying financial statements and schedule is complete and accurate:

- Investments, as shown in the statements of net assets available for benefits, note 7 and note 8 as of December 31, 2010 and 2009, excluding the fair value and related adjustment to contract value of the Wells Fargo Stable Return Fund G4.
- Interest income, dividends and net appreciation in fair value of investments, as shown in the statements of changes in net assets available for benefits and note 7 for the years ended December 31, 2010 and 2009.
- The Schedule H, line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2010.

(5) Plan Termination

Although the Company has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan at any time subject to the provisions of ERISA. In the event of plan termination, participants would receive distributions of their entire account balance.

(6) Parties-in-Interest Transactions

Certain plan investments are units of mutual funds and common collective trust funds managed by Wells Fargo and its affiliates, and therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to $104,374 and $101,928 for the years ended December 31, 2010 and 2009.

(7) Investments

Investments that represent 5% or more of the Plan's net assets are as follows:

	2010	2009
Enhanced Stock Market Fund of Wachovia*	$ —	1,594,942
Wells Fargo Enhanced Stock Market G2 Fund*	1,745,562	—
Wells Fargo Advantage Core Equity Fund*	2,138,507	—
Evergreen Fundamental Large Cap Fund*	—	1,743,410
Growth Fund of America	2,273,686	2,069,917
Templeton World Fund	1,988,969	2,067,991
Van Kampen Equity and Income Fund	2,818,350	2,499,239
Lord Abbett Research-Small Cap Value Series	2,198,791	1,662,807
Evergreen Treasury Money Market Fund*	—	6,132,145
Wells Fargo Advantage Treasury Plus Money Market Fund*	6,110,124	—
PIMCO Total Return Class A Fund	3,173,009	2,926,337

*Although not 5% or more of Plan's net assets for both years, those investments are included for comparative purposes.

The Plan's investments (including gains and losses on investments bought and sold as well as held during the year) appreciated in value as follows during 2010 and 2009, respectively:

	2010	2009
Common/collective trust funds**	$ 253,916	352,499
Registered investment companies	2,977,172	4,042,099
	$ 3,231,088	4,394,598

** Net appreciation is based on contract value.

(Continued)

(8) Fair Value Measurements

Authoritative accounting literature defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles, and expands disclosures about fair value measurements.

The fair value hierarchy prioritizes the inputs to valuation techniques used to measure fair value and 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 three levels of the fair value hierarchy are described below:

- Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 – Inputs to the valuation methodology include:
    - Quoted prices for similar assets or liabilities in active markets;
    - Quoted prices for identical or similar assets or liabilities in inactive markets;
    - Inputs other than quoted prices that are observable for the asset or liability;
    - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

  If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset 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. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value.

Registered investment company funds: Valued using the quoted net asset value (NAV) of shares held by the plan at year end.

Common/Collective trust funds: Valued at the NAV of the fund as reported by the investment advisor. The fund's fair value is based on securities in the portfolio, which typically is the amount which the fund might reasonably expect to receive for the security upon a current sale. These funds are valued on a daily basis.

The investment objectives of the common trust funds are as follows:

- *Wells Fargo Enhanced Stock Market G2 Fund* - The fund seeks to provide incremental return versus the S&P 500 Index while maintaining risk characteristics that are similar to those of the index. The fund typically holds a diversified portfolio of 350–425 common stocks held in the S&P 500. Stocks are selected using a disciplined quantitative approach that identifies stocks considered favorable based on their rank versus their peers on a wide range of characteristics, including valuation measures, earnings growth, operating performance, quality indicators and price momentum. The portfolio construction process uses commercial and proprietary risk models and computer-based tools to explicitly manage risk. The resulting portfolio balances sector/industry, style and market capitalization exposures to reflect the broad large-cap index. The fund's investment objective is nonfundamental and may be changed without a vote of the fund's shareholders.
- *Wells Fargo Stable Return Fund G4* - The fund's principal objective is to protect principal while providing a higher rate of return than shorter maturity investments, such as money market funds or certificates of deposit. To achieve this, the fund invests in instruments which are not expected to experience significant price fluctuations in most economic or interest rate environments. However, there is no assurance that this objective can be achieved.
- *Wells Fargo Total Return Bond Fund G5* – The Fund seeks total return, consisting of income and capital appreciation. The Fund focuses on bottom-up security selection in a universe of high-quality, liquid bonds, uses a bottom-up security selection process that focuses on measuring relative value on a return-to-risk basis, typically keeps duration neutral to that of the benchmark, with a predominant emphasis on issue selection, and uses proprietary risk management systems as the foundation for a highly disciplined decision-making process.

Investments in these funds can be redeemed immediately at the current NAV per share based on the fair value of the underlying assets. There are no unfunded commitments or restrictions on redemptions for any of the investments held by the Plan.

The preceding methods described may produce a fair value calculation 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 following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2010 and 2009:

	Assets at Fair Value as of December 31, 2010			
	Level 1	**Level 2**	**Level 3**	**Total**
Common/collective trust funds				
Principal protection	$ —	85,225	—	85,225
Intermediate term bond	—	291,035	—	291,035
Large cap equity	—	1,745,562	—	1,745,562
Registered investment companies				
Balanced	2,818,350	—	—	2,818,350
Emerging market and real estate	1,504,599	—	—	1,504,599
Fixed income	3,173,009	—	—	3,173,009
Intermediate term bond	249,671	—	—	249,671
International equity	2,957,579	—	—	2,957,579
Large cap equity	6,050,973	—	—	6,050,973
Mid/small cap equity	5,911,369	—	—	5,911,369
Principal protection	6,110,124	—	—	6,110,124
Specialty bond	406,394	—	—	406,394
Total assets at fair value	$ 29,182,068	2,121,822	—	31,303,890

	Assets at Fair Value as of December 31, 2009			
	Level 1	**Level 2**	**Level 3**	**Total**
Common/collective trust funds	$ —	1,895,388	—	1,895,388
Registered investment companies	25,319,035	—	—	25,319,035
Total assets at fair value	$ 25,319,035	1,895,388	—	27,214,423

(9) Reconciliation to Form 5500

The following is a reconciliation of net assets available for benefits per the December 31, 2010 and 2009 statements of net assets available for benefits to net assets per the Form 5500:

	2010	**2009**
Net assets available for benefits per the financial statements	$ 33,135,983	29,079,763
Plus excess contributions payable	54,024	39,511
Net assets per Form 5500	$ 33,190,007	29,119,274

The following is a reconciliation of changes in net assets available for benefit per the December 31, 2010 and 2009 statements of changes in net assets available for benefits to net income per the Form 5500:

		2010	2009
Increase in net assets available for benefits per the financial statements	$	4,056,220	6,178,427
Less prior year excess contributions payable		(39,511)	(100,186)
Plus current year excess contributions payable		54,024	39,511
Net income per Form 5500	$	4,070,733	6,117,752

(10) Subsequent Events

The Company has evaluated subsequent events from the balance sheet date through August 19, 2011, the date at which the financial statements were available to be issued, and determined there are no other items to disclose.

MAC PAPERS, INC.
401(k) PROFIT SHARING PLAN

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

December 31, 2010

	Identity of issuer, borrower, lessor, or similar party	Description of assets	Number of units		Current value
*	Wells Fargo	Wells Fargo Enhanced Stock Market G2 Fund	22,071	$	1,745,562
		Wells Fargo Stable Return Fund G4 **	6,541		78,357
		Wells Fargo Total Return Bond Fund G5	25,460		291,035
		Wells Fargo Advantage International Bond I	9,730		158,248
		Wells Fargo Advantage International Equity Fund	365		6,769
		Wells Fargo Advantage Strategic Large Cap Growth Fund	6,588		102,618
		Wells Fargo Advantage Treasury Plus Money Market Fund	493,330		6,110,124
		Wells Fargo Advantage Core Equity Fund	78,133		2,138,507
		Wells Fargo Advantage Global Opportunities Fund	18,602		669,469
	PIMCO	PIMCO Real Return Fund	12,135		156,151
		PIMCO High Yield Fund	2,081		34,177
		PIMCO Total Return Class A Fund	190,868		3,173,009
		PIMCO Total Return Institutional Fund	19,548		249,671
	Fidelity	Fidelity Advisor Value Strategies Fund	39,007		1,009,894
	Franklin	Franklin Small – Mid Cap Growth Fund	23,662		882,834
	Neuberger & Berman	Neuberger & Berman Partner's Asset Fund	24,314		443,732
	Templeton	Templeton World Fund	134,028		1,988,969
	Dreyfus	Dreyfus Mid Cap Index Fund	46,434		1,294,577
		Dreyfus Premier Small Cap Equity Fund	6,661		71,374
	Harbor Funds	Harbor International Institutional Fund	8,880		96,540
	Janus Funds	Janus Overseas Fund Class I	7,597		81,624
	Lord Abbett & Company	Lord Abbett Research – Small Cap Value Series	69,958		2,198,791
	Van Kampen	Van Kampen Comstock Fund	48,398		761,304
		Van Kampen Equity and Income Fund	328,097		2,818,350
	American Funds	Growth Fund of America	74,694		2,273,686
		American Century Small Company Fund	118		1,349
	Thornburg Investment Management	Thornburg Investment Income Builder R5	10,172		105,298
	T. Rowe Price	T Rowe Price Equity Income Fund	7,095		104,394
		T Rowe Price Real Estate Fund	4,826		44,630
		T Rowe Price Growth Fund	11,108		103,160
	The Boston Company	The Boston Company Small Cap Value Fund	140		1,584
	Alger	Alger Small Cap Growth	5,112		64,742
	Lazard	Lazard Emerging Markets Institutional Fund	196		3,635
		Lazard Emerging Markets Equity Open Fund	65,794		1,459,969
	Goldman Sachs	Goldman Sachs Mid Cap Value Fund	10,758		386,224
		Goldman Sachs Large Value Fund	14,688		123,572
		Goldman Sachs Structured Fund	505		5,275
	JP Morgan	JP Morgan High Yield Fund	4,531		57,818
*	Participant loans	Loans to 242 participants with interest rates ranging from 4.25% to 9.25%			1,892,986
		Total value of investments		$	33,190,008

* Represents a party-in-interest.

** This investment is presented at contract value.

See accompanying independent auditors' report.