Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
VANGUARD INDUSTRIES EAST 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1997

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

1172 AZALEA GARDEN ROAD
NORFOLK, VA 23502

2b Employer Identification Number (EIN) 54-1817115

2c Sponsor's telephone number 757-857-3600

2d Business code (see instructions) 315990

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.	10/04/2011	MICHAEL HARRISON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/04/2011	MICHAEL HARRISON
	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")
VANGUARD INDUSTRIES EAST, INC.

1172 AZALEA GARDEN ROAD
NORFOLK, VA 23502

3b Administrator's EIN
54-1817115

3c Administrator's telephone number
757-857-3600

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**	163
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**	138
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	16
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	154
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	154
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	127
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

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

A Name of plan
VANGUARD INDUSTRIES EAST 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
VANGUARD INDUSTRIES EAST, INC.

D Employer Identification Number (EIN)
54-1817115

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

1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY U.S.A.

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	23783	144	01/01/2010	12/31/2010

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
10105	7122

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
PICKERING INSURANCE SERVICES
1365 WEST VISTA WAY
SUITE 200
VISTA, CA 92083

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10105			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
CAMPBELL ALBRECHT
250 N. WESTLAKE BLVD
SUITE 100
WESTLAKE VILLAGE, CA 91362

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	7122	TPA FEES	5

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	11575
5	Current value of plan's interest under this contract in separate accounts at year end	5	2161375

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	11605
c	Additions: (1) Contributions deposited during the year	7c(1)	2128		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	357		
	(4) Transferred from separate account	7c(4)	0		
	(5) Other (specify below)	7c(5)	37		
	▶ POSITIVE MKT VAL ADJ, LOAN REPAYMENTS				
	(6) Total additions			7c(6)	2522
d	Total of balance and additions (add **b** and **c(6)**)			7d	14127
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	486		
	(2) Administration charge made by carrier	7e(2)	95		
	(3) Transferred to separate account	7e(3)	1969		
	(4) Other (specify below)	7e(4)	2		
	▶ NEGATIVE MARKET VALUE ADJUSTMENT				
	(5) Total deductions			7e(5)	2552
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	11575

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

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

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

A Name of plan	**B** Three-digit plan number (PN) ▶	
VANGUARD INDUSTRIES EAST 401(K) PLAN		001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
VANGUARD INDUSTRIES EAST, INC.	54-1817115	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

JOHN HANCOCK USA

01-0233346

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

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

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

JOHN HANCOCK LIFE INSURANCE COMPANY

01-0233346

(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	RECORDKEEPER	1742	Yes [ ] No [X]	Yes [ ] No [X]	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
VANGUARD INDUSTRIES EAST 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
54-1817115

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: RETIREMENT LIVING AT 2045

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	1223

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2040

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	1707

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2030

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	1021

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2025

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	12183

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2020

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	65347

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2010

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	1124

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

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)
01-0233346-000	P	281011

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	280042
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE BALANCED			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	568364
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE MODERATE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	101874
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONSERVATIVE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	74628
a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	9099
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA EMERGING MARKETS VALUE			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1017
a Name of MTIA, CCT, PSA, or 103-12 IE: INTL SMALL CAP FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	9603
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL OPPS FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2230
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER DEVELOPING MKT			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	10848
a Name of MTIA, CCT, PSA, or 103-12 IE: ENERGY			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	16865

a Name of MTIA, CCT, PSA, or 103-12 IE: JPM MIDCAP VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14307

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6349

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LARGE VALUE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1818

a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12875

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE CAP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 196

a Name of MTIA, CCT, PSA, or 103-12 IE: OPTIMIZED VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13551

a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NEW YORK VENTURE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18660

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE EQUITY INC

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3487

a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3835

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 35587

a Name of MTIA, CCT, PSA, or 103-12 IE: SHORT-TERM FEDERAL			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	14532
a Name of MTIA, CCT, PSA, or 103-12 IE: MONEY MARKET FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	20082
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7910
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN CENTURY VISTA			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	3526
a Name of MTIA, CCT, PSA, or 103-12 IE: EXPLORER			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	4904
a Name of MTIA, CCT, PSA, or 103-12 IE: INV SMALL CAP GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	7219
a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	15180
a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN SMALL-MID GROWTH			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	8987
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE HEALTH SCI			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	13604
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE INDEX			
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA			
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	4394

a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA MID CAP VALUE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3066

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17557

a Name of MTIA, CCT, PSA, or 103-12 IE: BLUE CHIP GROWTH FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16132

a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN BALANCE SHEET

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14157

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43703

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16597

a Name of MTIA, CCT, PSA, or 103-12 IE: OPTIMIZED ALL CAP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2234

a Name of MTIA, CCT, PSA, or 103-12 IE: MID VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1972

a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL APPRECIATION FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26359

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2619

a Name of MTIA, CCT, PSA, or 103-12 IE: DOMINI SOCIAL EQUITY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12806
a Name of MTIA, CCT, PSA, or 103-12 IE: ALL CAP VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31543
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA INTERNATIONAL VALUE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3703
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4630
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1852
a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA VALUE & RESTRUCTURING		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13874
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SCI & TECH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11431
a Name of MTIA, CCT, PSA, or 103-12 IE: DFA U.S. SMALL CAP FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2493
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2154
a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3864

a Name of MTIA, CCT, PSA, or 103-12 IE: SCIENCE & TECHNOLOGY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2796
a Name of MTIA, CCT, PSA, or 103-12 IE: FINANCIAL SERVICES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 138
a Name of MTIA, CCT, PSA, or 103-12 IE: WASHINGTON MUTUAL INVESTORS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6992
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESTMENT COMPANY OF AMERICA		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2496
a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN BALANCED FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 117469
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK GLOBAL ALLOCATION		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 227
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8835
a Name of MTIA, CCT, PSA, or 103-12 IE: LM WESTRN ASSET GLB HIGH YIELD		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19712
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO GLOBAL BOND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20642
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO REAL RETURN		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19435

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SPECTRUM INC

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11816

a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO TOTAL RETURN

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 68883

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

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
VANGUARD INDUSTRIES EAST 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VANGUARD INDUSTRIES EAST, INC.

D Employer Identification Number (EIN)
54-1817115

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	137339	145761
(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)	168487	184610
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1648357	2161375
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	11605	11575
(15) Other	1c(15)	1040	319

		(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	1966828	2503640
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	921	
k Total liabilities (add all amounts in lines 1g through1j)	1k	921	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1965907	2503640

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)	145761	
(B) Participants	2a(1)(B)	243359	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		389120
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)	12301	
(F) Other	2b(1)(F)	148	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		12449
(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)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

			(a) Amount	(b) Total
2b	**(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
	(6) Net investment gain (loss) from common/collective trusts	2b(6)		
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
	(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
	(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		265491
c	Other income	2c		
d	Total income. Add all **income** amounts in column (b) and enter total	2d		667060
	Expenses			
e	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	99734	
	(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)		99734
f	Corrective distributions (see instructions)	2f		
g	Certain deemed distributions of participant loans (see instructions)	2g		4241
h	Interest expense	2h		
i	Administrative expenses: **(1)** Professional fees	2i(1)		
	(2) Contract administrator fees	2i(2)	5275	
	(3) Investment advisory and management fees	2i(3)	20077	
	(4) Other	2i(4)		
	(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		25352
j	Total expenses. Add all **expense** amounts in column (b) and enter total	2j		129327
	Net Income and Reconciliation			
k	Net income (loss). Subtract line **2j** from line **2d**	2k		537733
l	Transfers of assets:			
	(1) To this plan	2l(1)		
	(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: JOHN, JACOB & VAYALUMKAL, LLP **(2)** EIN: 45-0499810

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
VANGUARD INDUSTRIES EAST 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VANGUARD INDUSTRIES EAST, INC.

D Employer Identification Number (EIN)
54-1817115

Part I Distributions

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

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

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

EIN(s): 01-0233346

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):

VANGUARD INDUSTRIES EAST 401 (K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2010

VANGUARD INDUSTRIES EAST 401 (K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2010

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Statement of Changes in Net Assets Available for Benefits	3
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Supplemental Schedule of Assets Held	8

JOHN, JACOB & VAYALUMKAL, LLP

CERTIFIED PUBLIC ACCOUNTANTS

11 Broadway, Suite 1166
New York, NY 10004
Tel: 212-635-4155 Fax: 212-635-4156

INDEPENDENT AUDITOR'S REPORT

To the Trustees
Vanguard Industries East 401 (K) Plan
Norfolk, Virginia 23502

We were engaged to audit the accompanying statements of net assets available for benefits of Vanguard Industries East 401 (K) Plan as of December 31, 2010 and 2009 and the related statement of changes in net assets available for benefits for the year ended December 31, 2010 and the supplemental schedule of assets held as of and for the year ended December 31, 2010. These financial statements and 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 5, which was certified by John Hancock Life Insurance Company (USA), 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 a certification from the trustee as of December 31, 2010 and 2009, and for the year ended December 31, 2010 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.

John, Jacob & Vayalumkal, LLP
JOHN, JACOB & VAYALUMKAL, LLP
Certified Public Accountants

New York, NY 10004
September 16, 2011

VANGUARD INDUSTRIES EAST 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	DECEMBER 31, 2010	DECEMBER 31, 2009
ASSETS		
Investments at Fair Market Value:		
Shares of Registered Investment Companies	$ 2,161,375	$ 1,648,357
Guarenteed Interest Accounts	11,575	11,605
Loan Receivable	184,610	168,487
Cash	319	1,040
	2,357,879	1,829,489
Employer Contributions Receivable	145,761	137,339
Total Assets	2,503,640	1,966,828
LIABILITIES		
Other Liabilities	-	921
Total Liabilities	-	921
Net Assets Available for Benefits	$ 2,503,640	$ 1,965,907

See accompanying notes to the financial statements.

VANGUARD INDUSTRIES EAST 401(K) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2010

Additions:		
Additions to Net Assets Attributed to:		
Investment Income :		
Net Increase in Fair Value of Investments	$	265,491
Interest and Dividends		12,658
Market Value Adjustment		(209)
		277,940
Contributions:		
Employer's Contributions		145,761
Employees' Contributions		243,359
		389,120
Total Additions		667,060
Deductions:		
Deductions from Net Assets Attributed to:		
Withdrawals and Contributions Returned to Separated Participants		99,734
Deemed Distributions of Loans		4,241
Administration Expenses		25,352
Total Deductions		129,327
Net Increase		537,733
Net Assets Available for Benefits		
Beginning of Year		1,965,907
End of Year	$	2,503,640

See accompanying notes to the financial statements.

VANGUARD INDUSTRIES EAST 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2010

1. DESCRIPTION OF PLAN

The following description of the Vanguard Industries East 401 (K) Plan ("the Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

GENERAL

The Plan is a retirement plan under Internal Revenue Service Code Section 401(k) effective January 1, 1997.

The Plan covers substantially all employees of the Vanguard Industries East, Inc. ("Company") who have attained the age of 18 and completed one year of service. The effective date of participation is the first day of each calendar month of the Plan Year, coincident with or next following satisfaction of the eligibility requirements.

The Plan is subject to the provisions of the Employees Retirement Income Security Act of 1974 (ERISA).

Participant Contributions

Participants may elect to contribute to the Plan from his or her salary an amount not exceeding the limit specified under Code Section 402 (g) in effect at the beginning of the taxable year ($16,500 for 2010, plus "catch-up" contribution of $5500 for eligible employees).

Employer Contributions

The Company matches the employee's contribution up to 4% of salary.

Participants Accounts

Each Participant's individual account is credited with his or her accounts earnings and contributions.

The Plan benefit to which a Participant is entitled is the benefit that can be provided from the Participant's account.

VANGUARD INDUSTRIES EAST 401 (K) PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2010

1. DESCRIPTION OF PLAN (continued)

Vesting

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

Investment Options

Upon enrollment in the Plan, a participant must direct his or her contributions in any investments listed in Schedule 1or in guaranteed interest accounts.

Participants Loans

Participants may borrow from their fund accounts.

Payments of Benefits

On termination of service for any reason, the participant's entire account balance will be paid in one lump sum at the evaluation date

Operating Expenses

Substantially all expenses of the Plan are paid by the Company.

2. SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared under accrual method of accounting.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Quoted market prices are used to value investments. Purchases and sales of securities are recorded on a trade date basis and dividends are recorded on the ex-dividend date. Cash accounts are valued at cost, which equals current value.

Group annuity contracts held by a defined contribution plan are required to be reported at fair market value. However contract value, is the relevant measurement 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 investment contracts held by the plan in guaranteed interest accounts are not fully benefit- responsive and accordingly no adjustment from fair value to contract value has been made in the accompanying financial statements.

Use of Estimates

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

3. INVESTMENTS

The plan's investments are held by an administered trust fund and are stated at fair value. All of the Plan's investments are separately identified and listed on Supplemental Schedule of Assets Held.

4. PLAN TERMINATION

Although it has not expressed any intent to do so, Vanguard Industries East, Inc. has the right under the plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

VANGUARD INDUSTRIES EAST 401 (K) PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2010

5. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

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

Investments at fair value:

Mutual funds	$2,161,375
Net Appreciation in fair Value of Investments	265,491

6. TAX STATUS

The trust established under the Plan to hold the Plan's assets is qualified in accordance with the appropriate section of the Internal Revenue Code and, accordingly, the Plan's net investment income is exempt from income taxes.

The Plan obtained a favorable tax determination letter from the Internal Revenue Service, and the Plan Sponsor believes that the plan continues to qualify and to operate as designed.

VANGUARD INDUSTRIES EAST 401 (K) PLAN

SUPPLEMENTAL SCHEDULE OF ASSETS HELD

DECEMBER 31, 2010

Investments at Fair Value (Schedule 1)	$ 2,161,375
Guaranteed Interest Accounts	11,575
Loans Receivable	184,610
Cash	319
Total Assets Held	$ 2,357,879

SCHEDULE 1

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
Retirement Living at 2045	$ 387848230.99	113.104444	$ 1222.64
Retirement Living at 2040	$ 379060596.47	157.935740	$ 1707.41
Retirement Living at 2035	$ 508746198.38	.000000	$ 0.00
Retirement Living at 2030	$ 655624152.99	95.116746	$ 1021.30
Retirement Living at 2025	$ 758810122.25	1123.875916	$ 12183.37
Retirement Living at 2020	$ 730953098.42	5906.859639	$ 65346.70
Retirement Living at 2015	$ 501416512.19	.000000	$ 0.00
Retirement Living at 2010	$ 468112604.39	98.874890	$ 1124.12
Retirement Choices at 2045	$ 2292212.41	.000000	$ 0.00
Lifecycle Retirement	$ 0.00	.000000	$ 0.00
Retirement Choices at 2040	$ 2536180.19	.000000	$ 0.00
Retirement Choices at 2035	$ 5793413.80	.000000	$ 0.00
Retirement Choices at 2030	$ 6285570.90	.000000	$ 0.00
Retirement Choices at 2025	$ 10106121.72	.000000	$ 0.00
Retirement Choices at 2020	$ 8404454.01	.000000	$ 0.00
Retirement Choices at 2015	$ 6823035.69	.000000	$ 0.00
Retirement Choices at 2010	$ 4594848.53	.000000	$ 0.00
Internet Technolog. Fund (VS)	$ 0.00	.000000	$ 0.00
Lifestyle Aggressive	$ 3389213520.53	846.744462	$ 281010.77
Lifestyle Growth	$ 9949748136.82	866.789082	$ 280041.52
JH Munder NetNet	$ 0.00	.000000	$ 0.00
Lifestyle Balanced	$ 9612250411.07	2478.083697	$ 568364.26
Lifestyle Moderate	$ 2905971911.36	564.505637	$ 101874.31
Telecommunications Fund (VS)	$ 0.00	.000000	$ 0.00
Lifestyle Conservative	$ 2300416762.24	373.311690	$ 74627.95
JH INVESCO Telecom	$ 0.00	.000000	$ 0.00

*Assets = Liabilities

Note: this report does not reflect transactions processed after December 31, 2010
Cash Basis

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
Russell Equity Growth	$ 52743172.72	.000000	$ 0.00
Russell Growth	$ 154174642.84	.000000	$ 0.00
Russell Balanced	$ 182515098.32	.000000	$ 0.00
Russell Moderate	$ 38798426.01	.000000	$ 0.00
Russell Conservative	$ 21756481.99	.000000	$ 0.00
Fidelity Advisor Gold Fund	$ 97938318.87	.000000	$ 0.00
Real Est. Securities Fund	$ 390076202.38	182.836527	$ 9098.60
Natural Resources Fund	$ 197722775.62	.000000	$ 0.00
DFA Emerging Markets Value	$ 321862555.21	20.392226	$ 1017.29
Royce Opportunity	$ 172991793.73	.000000	$ 0.00
Emerging Growth Fund	$ 0.00	.000000	$ 0.00
Manulife Emerging Growth Stock	$ 0.00	.000000	$ 0.00
Intl Small Cap Fund	$ 143264679.68	296.059593	$ 9602.70
Fidelity Adv Leveraged Co Stk	$ 17530183.21	.000000	$ 0.00
Aggressive Growth Fund (VS)	$ 0.00	.000000	$ 0.00
International Opps Fund	$ 90555238.84	124.336814	$ 2230.40
Oppenheimer Developing Mkt	$ 983534924.62	159.250277	$ 10847.50
JH Calamos Growth	$ 0.00	.000000	$ 0.00
JH AmCent Mason Small Growth	$ 0.00	.000000	$ 0.00
Energy	$ 574318660.30	182.008195	$ 16864.67
Keeley Small Cap Value	$ 29743404.02	.000000	$ 0.00
DFA International Value	$ 91584752.75	175.681257	$ 3703.40
Mid-Cap Growth Index Fund	$ 28982880.29	.000000	$ 0.00
SSgA Mid Growth Index Fund	$ 1106712.91	.000000	$ 0.00
Small Cap Fund	$ 0.00	.000000	$ 0.00
International Value Fund	$ 277080688.71	219.181928	$ 4629.93

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
JH John Hancock Small Cap	$ 0.00	.000000	$ 0.00
DFA US Targeted Value Fund	$ 23930743.55	.000000	$ 0.00
Mid Cap Stock Fund	$ 346004585.63	91.203454	$ 1851.70
JH John Hancock Growth Opps	$ 0.00	.000000	$ 0.00
Small Company Blend Fund (VS)	$ 0.00	.000000	$ 0.00
Columbia Value & Restructuring	$ 371492855.42	245.760310	$ 13873.94
American Century Small Co	$ 0.00	.000000	$ 0.00
JH AmCent Mason Mid Growth	$ 0.00	.000000	$ 0.00
T. Rowe Price Sci & Tech	$ 360856070.97	246.895205	$ 11430.79
DFA U.S. Small Cap Fund	$ 93100060.08	101.738401	$ 2493.02
Mid Cap Growth Fund (VS)	$ 0.00	.000000	$ 0.00
Small Cap Growth Index	$ 197736992.13	98.062312	$ 2153.92
Intl Equity Index Fund	$ 228087029.68	233.909156	$ 3864.07
International Core Fund	$ 42662142.72	.000000	$ 0.00
SMALLCAP World Fund	$ 24865553.01	.000000	$ 0.00
JH INVESCO Dynamics	$ 0.00	.000000	$ 0.00
Dynamic Growth Fund	$ 0.00	.000000	$ 0.00
Small Company Fund	$ 0.00	.000000	$ 0.00
New World Fund	$ 33335771.62	.000000	$ 0.00
Mid Cap Opps Fund (VS)	$ 0.00	.000000	$ 0.00
JH DWS Mid Cap Growth	$ 0.00	.000000	$ 0.00
JH Putnam Vista	$ 0.00	.000000	$ 0.00
Science & Technology Fund	$ 214894305.40	138.045676	$ 2795.78
Financial Services Fund	$ 98492042.09	8.826213	$ 137.54
Davis Financial	$ 0.00	.000000	$ 0.00
Small Cap Index Fund	$ 178952186.07	390.661548	$ 7910.15

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
American Century Heritage	$ 677563.52	.000000	$ 0.00
Bridgeway Ultra-Small Co	$ 12436882.66	.000000	$ 0.00
American Century Vista	$ 259611374.06	92.626432	$ 3526.45
John Hancock Intl Growth	$ 6771103.13	.000000	$ 0.00
JH Scudder Intl Select Equity	$ 0.00	.000000	$ 0.00
Explorer	$ 51208163.28	52.146750	$ 4904.33
Pacific Rim Fund	$ 0.00	.000000	$ 0.00
Strategic Opps Fund (VS)	$ 0.00	.000000	$ 0.00
Small Cap Growth Fund	$ 71930504.01	.000000	$ 0.00
Inv Small Cap Growth	$ 138216640.86	289.097129	$ 7218.66
Oppenheimer Intl Growth Fund	$ 37658643.56	.000000	$ 0.00
EuroPacific Growth Fund	$ 861278305.98	269.184438	$ 15179.58
JH AIM Constellation	$ 0.00	.000000	$ 0.00
Franklin Small-Mid Growth	$ 181688820.31	183.308101	$ 8986.68
Pru Jennison 20/20 Focus Fund	$ 32775185.24	.000000	$ 0.00
Legg Mason ClearBr Agg Growth	$ 145229493.16	.000000	$ 0.00
Turner Core Growth Fund	$ 1542818.98	.000000	$ 0.00
Thornburg International Value	$ 20173777.29	.000000	$ 0.00
Brandywine Blue Fund	$ 1996125.44	.000000	$ 0.00
Overseas Fund (VS)	$ 0.00	.000000	$ 0.00
T. Rowe Price Health Sci	$ 242009729.62	372.433906	$ 13604.16
JH Fidelity Advisor Overseas	$ 0.00	.000000	$ 0.00
All Cap Growth Fund	$ 0.00	.000000	$ 0.00
Small Cap Opportunities Fund	$ 62606833.52	.000000	$ 0.00
JH Templeton Foreign Small Co	$ 0.00	.000000	$ 0.00
Mid-Cap Value Index Fund	$ 24518520.05	.000000	$ 0.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
JH Am Century Intl Value	$ 0.00	.000000	$ 0.00
SSgA Mid Value Index Fund	$ 1394110.66	.000000	$ 0.00
JH Templeton Foreign	$ 0.00	.000000	$ 0.00
Aston/Optimum Mid Cap Fund	$ 534373.82	.000000	$ 0.00
Small Company Value Fund	$ 115813095.15	.000000	$ 0.00
Small Cap Value Index	$ 34022067.23	251.765037	$ 4394.44
Overseas Equity Fund	$ 0.00	.000000	$ 0.00
RiverSource Mid Cap Value	$ 96351147.30	295.226477	$ 3065.75
Small Cap Value Fund	$ 205356145.75	599.686683	$ 17557.07
Quantitative Mid Cap Fund	$ 0.00	.000000	$ 0.00
Blue Chip Growth Fund	$ 478931326.73	637.999043	$ 16132.23
Mid Cap Core Fund (VS)	$ 0.00	.000000	$ 0.00
Franklin Balance Sheet	$ 257537476.27	143.058303	$ 14156.74
JH AIM Mid Cap Core Equity	$ 0.00	.000000	$ 0.00
Value Fund	$ 81866427.96	.000000	$ 0.00
Mid Cap Index Fund	$ 349369794.54	1735.037779	$ 43703.18
T. Rowe Price Sml Cap Val	$ 176547296.52	.000000	$ 0.00
Oppenheimer Global	$ 229857235.87	391.584874	$ 16596.56
Lord Abbett Value Opps Fund	$ 90065.20	.000000	$ 0.00
Large Cap Growth Fund (VS)	$ 0.00	.000000	$ 0.00
Large Cap Value Fund	$ 82546970.69	.000000	$ 0.00
Strategic Growth Fund (VS)	$ 0.00	.000000	$ 0.00
JH Fidelity Advisor Large Cap	$ 0.00	.000000	$ 0.00
Optimized All Cap Fund	$ 141505064.66	107.350290	$ 2234.46
Global Fund	$ 2662073.57	.000000	$ 0.00
Mid Value Fund	$ 188309523.50	117.254288	$ 1972.38

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
U.S. Global Leaders Fund	$ 0.00	.000000	$ 0.00
Capital World Growth & Income	$ 79103428.53	.000000	$ 0.00
JH John Hancock U.S. Gbl Lead	$ 0.00	.000000	$ 0.00
Capital Appreciation Fund	$ 362798634.03	2311.716552	$ 26359.15
Templeton World	$ 147589409.98	72.467042	$ 2619.42
Domini Social Equity	$ 63435421.92	337.761595	$ 12805.61
Manulife Growth Plus Stock	$ 0.00	.000000	$ 0.00
All Cap Core Fund	$ 19560135.35	.000000	$ 0.00
John Hancock Rainier Grow	$ 2613587.23	.000000	$ 0.00
All Cap Value Fund	$ 94729185.11	1571.141948	$ 31543.46
JPM MidCap Value Fund	$ 215472845.22	510.288990	$ 14306.63
U.S. Large Cap Fund	$ 0.00	.000000	$ 0.00
New Perspective Fund	$ 29072459.34	.000000	$ 0.00
Core Equity Fund	$ 0.00	.000000	$ 0.00
Pru Jennison Mid Growth Fund	$ 8549129.15	.000000	$ 0.00
Legg Mason Value	$ 0.00	.000000	$ 0.00
Fundamental Investors	$ 104009522.48	.000000	$ 0.00
JH AmCent Select Fund	$ 0.00	.000000	$ 0.00
Quantitative Equity Fund (VS)	$ 0.00	.000000	$ 0.00
Utilities Fund	$ 78189104.36	.000000	$ 0.00
Manulife Capital Growth Stock	$ 0.00	.000000	$ 0.00
Strategic Value Fund (VS)	$ 0.00	.000000	$ 0.00
MFS Utilities	$ 214602164.90	294.211962	$ 6349.42
JH MFS Strategic Value	$ 0.00	.000000	$ 0.00
Total Stock Market Index Fund	$ 234132858.64	.000000	$ 0.00
Victory Diversified Stock	$ 14397037.37	.000000	$ 0.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
Classic Value Fund	$ 0.00	.000000	$ 0.00
John Hancock Disciplined Value	$ 423531.45	.000000	$ 0.00
John Hancock Classic Value	$ 0.00	.000000	$ 0.00
BlackRock Large Value	$ 124411560.87	100.296978	$ 1817.92
Growth Index Fund	$ 33947494.81	.000000	$ 0.00
The Growth Fund of America	$ 980588125.30	371.437147	$ 12875.02
Eaton Vance Large-Cap Value	$ 55252798.19	.000000	$ 0.00
Jennison Growth	$ 0.00	.000000	$ 0.00
Fidelity ContraFund	$ 328865437.63	.000000	$ 0.00
Fidelity Adv New Insights	$ 52959162.02	.000000	$ 0.00
Mass Investors Fund	$ 13540264.64	.000000	$ 0.00
Large Cap Fund	$ 42072671.09	13.487929	$ 196.02
Equity Income Fund	$ 161287850.98	.000000	$ 0.00
Special Value Fund	$ 0.00	.000000	$ 0.00
Optimized Value Fund	$ 47048655.85	150.610459	$ 13550.96
JH Legg Part Small Cap Value	$ 0.00	.000000	$ 0.00
Davis New York Venture	$ 734109784.34	643.564165	$ 18659.98
T. Rowe Price Equity Inc	$ 320851472.98	91.548321	$ 3487.46
RiverSource Equity Value	$ 9657024.75	.000000	$ 0.00
Value Index Fund	$ 28705549.32	.000000	$ 0.00
Mid Cap Value Fund	$ 0.00	.000000	$ 0.00
BlackRock Basic Value	$ 41085.85	.000000	$ 0.00
500 Index Fund	$ 953194264.04	5.319995	$ 3834.69
JH Munder Small-Cap Value	$ 0.00	.000000	$ 0.00
Mutual Beacon	$ 437763349.83	326.527124	$ 35586.70
Fundamental Value Fund	$ 9765039.77	.000000	$ 0.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
FT Founding Allocation	$ 21399859.80	.000000	$ 0.00
Washington Mutual Investors	$ 177169854.14	193.590534	$ 6992.47
Investment Company of America	$ 211751669.55	65.530412	$ 2496.08
Parnassus Equity Income	$ 18993530.16	.000000	$ 0.00
JH John Hancock Value Opps	$ 0.00	.000000	$ 0.00
Ivy Asset Strategy Fund	$ 92179955.44	.000000	$ 0.00
JH T. Rowe Price Mid-Cap Val	$ 0.00	.000000	$ 0.00
T. Rowe Price Cap Appreciation	$ 307687.78	.000000	$ 0.00
Capital Income Builder	$ 28542032.35	.000000	$ 0.00
Pax World Balanced Fund	$ 409935.80	.000000	$ 0.00
JH Fidelity Advisor Div Grwth	$ 0.00	.000000	$ 0.00
Income Fund of America	$ 24733749.49	.000000	$ 0.00
Core Global Diversification	$ 26891560.59	.000000	$ 0.00
American Balanced Fund	$ 513896503.48	5009.053835	$ 117469.21
JH Lord Abbett All Value	$ 0.00	.000000	$ 0.00
JH AmCent Equity Index Fund	$ 0.00	.000000	$ 0.00
BlackRock Global Allocation	$ 241327232.94	10.800397	$ 226.55
PIMCO All Asset	$ 140100325.96	.000000	$ 0.00
Mutual Global Discovery	$ 405472850.65	127.288723	$ 8835.35
Core Diversified Grwth & Inc	$ 23944267.63	.000000	$ 0.00
JH Weitz Partners Value	$ 0.00	.000000	$ 0.00
Core Fundamental Holdings	$ 10895712.24	.000000	$ 0.00
Income & Value Fund	$ 0.00	.000000	$ 0.00
Managers AMG FQ Global Alt	$ 5055611.43	.000000	$ 0.00
High Yield Fund	$ 87269508.60	.000000	$ 0.00
LM Westrn Asset Glb High Yield	$ 231951524.98	607.627223	$ 19712.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
US Core Fund	$ 0.00	.000000	$ 0.00
U.S. High Yield Bond Fund	$ 57373717.61	.000000	$ 0.00
American High-Income Fund	$ 32615429.99	.000000	$ 0.00
JH AmCent Strat Alloc Moder	$ 0.00	.000000	$ 0.00
Federated High Yield Bond	$ 11814.39	.000000	$ 0.00
WAMCO U.S. Government Sec Fund	$ 0.00	.000000	$ 0.00
Global Bond Fund	$ 70160610.20	.000000	$ 0.00
Real Return Bond Fund	$ 89291616.28	.000000	$ 0.00
PIMCO Global Bond	$ 170062596.85	1243.980786	$ 20641.84
Absolute Return Fund	$ 0.00	.000000	$ 0.00
Oppenheimer Intl Bond	$ 92774383.11	.000000	$ 0.00
Manulife Balanced	$ 0.00	.000000	$ 0.00
DFA Inflation-Protected Sec	$ 519029.49	.000000	$ 0.00
Balanced Fund (VS)	$ 0.00	.000000	$ 0.00
PIMCO Real Return	$ 279565987.65	1117.590956	$ 19434.77
Templeton Global Bond Fund	$ 535341.41	.000000	$ 0.00
Capital World Bond Fund	$ 13225405.85	.000000	$ 0.00
T. Rowe Price Spectrum Inc	$ 243687944.12	369.476282	$ 11815.58
Strategic Income Opp Fund	$ 196849929.95	.000000	$ 0.00
Active Bond Fund	$ 38387522.83	.000000	$ 0.00
Investment Qual Bond Fund	$ 59328367.82	.000000	$ 0.00
The Bond Fund of America	$ 18601013.29	.000000	$ 0.00
Total Return Fund	$ 329200011.23	.000000	$ 0.00
Core Bond Fund	$ 11683935.79	.000000	$ 0.00
Allianz RCM Tech Fund	$ 0.00	.000000	$ 0.00
John Hancock Strategic Inc	$ 0.00	.000000	$ 0.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
PIMCO Total Return	$ 1411258605.79	3154.582401	$ 68882.54
Health Sciences Fund	$ 5180446.83	.000000	$ 0.00
Total Bond Market Fund	$ 69850706.08	.000000	$ 0.00
JH Dreyfus Premier Core Bond	$ 0.00	.000000	$ 0.00
Emerging Small Co Fund	$ 0.00	.000000	$ 0.00
US Government Securities	$ 52152583.40	.000000	$ 0.00
T. Rowe Price Short Term Bond	$ 11522923.56	.000000	$ 0.00
Legg Mason Growth	$ 0.00	.000000	$ 0.00
Short-Term Federal	$ 492651597.52	711.381297	$ 14531.77
Columbia Marsico Intl Opps	$ 0.00	.000000	$ 0.00
Money Market Fund	$ 2487708563.50	1539.474445	$ 20082.38
JH Stable Value	$ 0.00	.000000	$ 0.00
John Hancock Stable Val	$ 1414276846.53	.000000	$ 0.00
Dreyfus Structured Mid Cap	$ 0.00	.000000	$ 0.00
BlackRock Mid-Cap Value Opps	$ 0.00	.000000	$ 0.00
Strategic Bond Fund	$ 0.00	.000000	$ 0.00
T. Rowe Price Blue Chip	$ 0.00	.000000	$ 0.00
Lifestyle Aggressive 1000 (VS)	$ 0.00	.000000	$ 0.00
T. Rowe Price Real Estate	$ 0.00	.000000	$ 0.00
JH AmCent Mason High Yield Bnd	$ 0.00	.000000	$ 0.00
Lifestyle Growth 820 (VS)	$ 0.00	.000000	$ 0.00
JH Money Market	$ 0.00	.000000	$ 0.00
DWS RREEF Real Estate	$ 0.00	.000000	$ 0.00
Lifestyle Balanced 640 (VS)	$ 0.00	.000000	$ 0.00
Lifestyle Moderate 460 (VS)	$ 0.00	.000000	$ 0.00
UBS U.S. Large Cap Equity	$ 0.00	.000000	$ 0.00

*Assets = Liabilities

John Hancock

STATEMENT OF ASSETS AND LIABILITIES OF
THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
FOR CONTRACT # 23783 THE TRUSTEES OF VANGUARD INDUSTRIES
EAST 401(K) PLAN
MONEY INVESTED AS OF DECEMBER 31, 2010

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF VANGUARD INDUSTRIES EAST 401(K) PLAN Total No of Units	Total Value
Lifestyle Conservative 280(VS)	$ 0.00	.000000	$ 0.00
Global Allocation Fund	$ 0.00	.000000	$ 0.00
UBS Global Allocation	$ 0.00	.000000	$ 0.00
JH AmCent Mason Select Bnd	$ 0.00	.000000	$ 0.00
		Total	$2,161,375.40

*Assets = Liabilities

I hereby certify that this statement, given pursuant to 29 CFR 2520.103-5(c), is complete and accurate.

Katherine MacMillan
President, Retirement Plan Services

Production Date(R): DEC/31/2010

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

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

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

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

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

Part II Basic Plan Information --- enter all requested information.

1a Name of plan
Vanguard Industries East 401(K) Plan

1b Three-digit plan number (PN) ► 001

1c Effective date of plan 01/01/1997

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

Vanguard Industries East, Inc.

1172 Azalea Garden Road

US Norfolk VA 23502

2b Employer Identification Number (EIN)
54-1817115

2c Sponsor's telephone number
(757) 857-3600

2d Business code (see instructions)
315990

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		10/3/11	Michael Harrison
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/3/11	Michael Harrison
	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

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

For the plan year beginning 01/01/2010 and ending 12/31/2010

Name of plan

Vanguard Industries East 401(K) Plan

Employer Identification Number

54-1817115

Three-digit plan number ► 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	John Hancock Life Insurance Co	JH Lifestyle 2025		0
	John Hancock Life Insurance Co	JH Jennison Growth		0
	John Hancock Life Insurance Co	JH Lifestyle Conservative		74,628
	John Hancock Life Insurance Co	JH Templeton World		2,619
	John Hancock Life Insurance Co	JH Lifestyle Moderate		101,874
	John Hancock Life Insurance Co	JH Oppenheimer Global		16,597
	John Hancock Life Insurance Co	JH Energy		16,865
	John Hancock Life Insurance Co	Explorer		4,904
	John Hancock Life Insurance Co	JH Lifestyle Balanced		568,364
	John Hancock Life Insurance Co	JH Lifestyle Growth		280,042
	John Hancock Life Insurance Co	JH Lifestyle Aggressive		281,011
	John Hancock Life Insurance Co	Inv Small Cap Growth		7,219
	John Hancock Life Insurance Co	Intl Opps Fund		2,230
	John Hancock Life Insurance Co	JH Allianz RCM Tech Fund		0
	John Hancock Life Insurance Co	JH American Century Vista		3,526
	John Hancock Life Insurance Co	JH American Century Small Co.		0
	John Hancock Life Insurance Co	The Growth Fund of America		12,875
	John Hancock Life Insurance Co	Short-Term Federal		14,532
	John Hancock Life Insurance Co	Columbia Value & Restructuring		13,874
	John Hancock Life Insurance Co	JH Europacific Growth Fund		15,180
	John Hancock Life Insurance Co	JH DFA International Value		3,703
	John Hancock Life Insurance Co	PIMCO Real Return		19,435
	John Hancock Life Insurance Co	PIMCO Total Return		68,883
	John Hancock Life Insurance Co	Financial Services Fund		138
	John Hancock Life Insurance Co	JH Davis New York Venture		18,660
	John Hancock Life Insurance Co	Mutual Beacon		35,587
	John Hancock Life Insurance Co	Investment Company of America		2,496
	John Hancock Life Insurance Co	Washington Mutual Investors		6,992
	John Hancock Life Insurance Co	JH Franklin Balance Sheet		14,157
	John Hancock Life Insurance Co	Mutual Global Discovery		8,835
	John Hancock Life Insurance Co	Small Cap Growth Index		2,154
	John Hancock Life Insurance Co	Mid Value Fund		1,972
	John Hancock Life Insurance Co	Intl Small Cap Fund		9,603
	John Hancock Life Insurance Co	Small Cap Index Fund		7,910
	John Hancock Life Insurance Co	LM Western AssetGlb High Yield		19,712
	John Hancock Life Insurance Co	Blackrock Global Allocation		227
	John Hancock Life Insurance Co	JH Riversource Mid Cap Value		3,066
	John Hancock Life Insurance Co	JH Lord Abbett Mid Cap Value		0
	John Hancock Life Insurance Co	JH PIMCO Global Bond		20,642

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	John Hancock Life Insurance Co	JH Jennison Growth		0
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	John Hancock Life Insurance Co	Intl Opps Fund		2,230
	John Hancock Life Insurance Co	JH Allianz RCM Tech Fund		0
	John Hancock Life Insurance Co	JH American Century Vista		3,526
	John Hancock Life Insurance Co	JH American Century Small Co.		0
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	John Hancock Life Insurance Co	PIMCO Real Return		19,435
	John Hancock Life Insurance Co	PIMCO Total Return		68,883
	John Hancock Life Insurance Co	Financial Services Fund		138
	John Hancock Life Insurance Co	JH Davis New York Venture		18,660
	John Hancock Life Insurance Co	Mutual Beacon		35,587
	John Hancock Life Insurance Co	Investment Company of America		2,496
	John Hancock Life Insurance Co	Washington Mutual Investors		6,992
	John Hancock Life Insurance Co	JH Franklin Balance Sheet		14,157
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	John Hancock Life Insurance Co	Optimized Value Fund		13,551
	John Hancock Life Insurance Co	MFS Utilities		6,349
	John Hancock Life Insurance Co	Domini Social Equity		12,806
	John Hancock Life Insurance Co	JH T. Rowe Price Spectrum		11,816
	John Hancock Life Insurance Co	Blackrock Large Value		1,818
	John Hancock Life Insurance Co	American Balanced Fund		117,469
	John Hancock Life Insurance Co	Mid Cap Stock Fund		1,852
	John Hancock Life Insurance Co	Large Cap Fund		196
	John Hancock Life Insurance Co	All Cap Growth Fund		0
	John Hancock Life Insurance Co	Optimized All Cap Fund		2,234
	John Hancock Life Insurance Co	JH DWS RREEF Real Estate		0
	John Hancock Life Insurance Co	JH T. Rowe Price Blue Chip		0
	John Hancock Life Insurance Co	JH T. Rowe Equity Inc.		3,487
	John Hancock Life Insurance Co	Mid Cap Index Fund		43,703
	John Hancock Life Insurance Co	All Cap Value Fund		31,543
	John Hancock Life Insurance Co	JH T. Rowe Price Health Sci		13,604
	John Hancock Life Insurance Co	Oppenheimer Developing Mkt		10,848
	John Hancock Life Insurance Co	JH T. Rowe Price Sci & Tech		11,431
	John Hancock Life Insurance Co	JH Franklin Small-Mid Growth		8,987
	John Hancock Life Insurance Co	Money Market Fund		20,082
	John Hancock Life Insurance Co	500 Index Fund		3,835
	John Hancock Life Insurance Co	DFA Emerging Markets Value		1,017
	John Hancock Life Insurance Co	JH International Value Fund		4,630
	John Hancock Life Insurance Co	International Equity Index Fun		3,864
	John Hancock Life Insurance Co	Small Cap Value Fund		17,557
	John Hancock Life Insurance Co	Lifecycle 2040		0
	John Hancock Life Insurance Co	Retirement Living at 2030		1,021
	John Hancock Life Insurance Co	Retirement Living at 2025		12,183
	John Hancock Life Insurance Co	Retirement Living at 2020		65,347
	John Hancock Life Insurance Co	Retirement Living at 2010		1,124
	John Hancock Life Insurance Co	JPM Midcap Value Fund		14,307
	John Hancock Life Insurance Co	Science & Technology Fund		2,796
	John Hancock Life Insurance Co	DFA US Small Cap Fund		2,493
	John Hancock Life Insurance Co	Retirement Living at 2045		1,223
	John Hancock Life Insurance Co	Retirement Living at 2040		1,707
	John Hancock Life Insurance Co	Real Est Securities Fund		9,099
	John Hancock Life Insurance Co	Small Cap Value Index		4,394
	John Hancock Life Insurance Co	Blue Chip Growth Fund		16,132
	John Hancock Life Insurance Co	Capital Appreciation Fund		26,359

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