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
SNR DENTON US LLP PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1952

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

233 S. WACKER DRIVE
7800 WILLIS TOWER
CHICAGO, IL 60606

2b Employer Identification Number (EIN)
36-1796730

2c Sponsor's telephone number
312-876-3178

2d Business code (see instructions)
541110

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.	10/07/2011	ROBERT WEIGEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/07/2011	ROBERT WEIGEL
	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")
SNR DENTON US LLP

233 S. WACKER DRIVE
7800 WILLIS TOWER
CHICAGO, IL 60606

3b Administrator's EIN
36-1796730

3c Administrator's telephone number
312-876-3178

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
SONNENSCHEIN, NATH & ROSENTHAL LLP

4b EIN
36-1796730

4c PN
001

5	Total number of participants at the beginning of the plan year	**5**	2058
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**	1343
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	628
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1971
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	1971
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1739
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2F 2G 2J 2K 2R 2S 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)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

A Name of plan	**B** Three-digit plan number (PN) ▶	
SNR DENTON US LLP PROFIT SHARING PLAN		001

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
SNR DENTON US LLP	36-1796730

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

CHARLES SCHWAB & CO. INC. AND AFFIL

94-1737782

(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)

RMB CAPITAL MANAGEMENT LLC

59-3792751

(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?
26 50	NONE	117919	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ELLWOOD AND ASSOC.

36-3121777

(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?
27 50	NONE	73333	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

GENEVA INVESTMENT MGMT LLC DBA

04-3689735

(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?
26 50	NONE	59939	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

WILLIAM BLAIR & COMPANY LLC

36-2214610

(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?
26 50 71	NONE	59867	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CHARLES SCHWAB & CO., INC.

94-1737782

(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?
33 50 59 62 71 72	NONE	44083	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

DIMEO SCHNEIDER & ASSOCIATES

36-4001764

(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?
26 50	NONE	40406	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MALCOLM H GISSEN & ASSOCIATES

94-2997595

(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?
26 50	NONE	36973	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MCGLADREY & PULLEN, LLP

42-0714325

(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?
10 50	NONE	31000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

BRANDES INVESTMENT PARTNERS LP

33-0704072

(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?
26 50	NONE	27311	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CITIGROUP GLOBAL MARKETS

11-1111111

(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?
50 71	NONE	24002	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ALLIANCE BERNSTEIN, LP

13-0464930

(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?
27 50	NONE	17238	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SCHWAB RETIREMENT PLAN SERVICES, IN

34-1479833

(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 50 59 64	NONE	11325	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [X] No [ ]

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

MONETA GROUP INVESTMENT ADV LLC

20-1903821

(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?
26 50	NONE	10359	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GOFEN AND GLOSSBERG LLC

36-4143109

(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?
26 50	NONE	9569	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COVINGTON CAPITAL MANAGEMENT

20-1253741

(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?
26 50	NONE	8330	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PNC MANAGED INVESTMENTS INC

51-0391973

(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?
26 50	NONE	7406	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CHARLES SCHWAB BANK

42-1558009

(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?
25 49 50 52 59 62	NONE	0	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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
CHARLES SCHWAB & CO INC AND AFFILIA	59	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
SEE ATTACHMENT 11-1111111	SEE ATTACHMENT	

(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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

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

A Name of plan
SNR DENTON US LLP PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SNR DENTON US LLP

D Employer Identification Number (EIN)
36-1796730

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	170889	430714
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4996750	5184503
(2) Participant contributions	1b(2)	1176838	1173083
(3) Other	1b(3)	88186	139627
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		470367
(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)	2585821	3153869
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	3489691	3868808
(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)	165354104	186687022
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	84944062	90524022

			(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	262806341	291632015
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	262806341	291632015

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)	8523029	
	(B) Participants	2a(1)(B)	10378755	
	(C) Others (including rollovers)	2a(1)(C)	2088796	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		20990580
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	18	
	(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)	200868	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		200886
	(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)	3420135	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3420135
	(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)		18024520
c Other income	2c		9581960
d Total income. Add all **income** amounts in column (b) and enter total	2d		52218081
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	23239636	
(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)		23239636
f Corrective distributions (see instructions)	2f		3796
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	31200	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	92666	
(4) Other	2i(4)	25109	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		148975
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		23392407
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		28825674
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: MCGLADREY & PULLEN, LLP (2) EIN: 42-0714325

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		30000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

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

A Name of plan
SNR DENTON US LLP PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SNR DENTON US LLP

D Employer Identification Number (EIN)
36-1796730

Part I Distributions

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

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

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

EIN(s): 42-1558009

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):

SNR Denton US LLP
Profit Sharing Plan

Financial Report
December 31, 2010

Contents

Independent Auditor's Report	1
Financial Statements	
Statements of net assets available for benefits	2
Statement of changes in net assets available for benefits	3
Notes to financial statements	4 – 14
Supplemental Schedule	
Schedule of assets (held at end of year)	15 – 16

McGladrey

Independent Auditor's Report

To the Plan Committee
SNR Denton US LLP Profit Sharing Plan
Chicago, Illinois

We were engaged to audit the accompanying statements of net assets available for benefits of SNR Denton US LLP Profit Sharing Plan (the 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 at end of year) as of 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified or provided by Charles Schwab Trust Company, the trustee of the Plan, and Union Bank of California, N.A., the former trustee of the Plan, except for comparing this 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/held the Plan's assets and executes/executed transactions. The Plan Administrator has obtained certifications from the trustees regarding the completeness and accuracy of the information summarized in Note 4 that was provided to the Plan Administrator by the current trustee as of December 31, 2010 and 2009, and for the year ended December 31, 2010, and the former trustee for the period from January 1, 2010 to October 31, 2010.

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 or provided by the current and former trustees, 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

As described in Note 2, the Plan adopted Financial Accounting Standards Board Accounting Standards Update 2010-25, *Plan Accounting – Defined Contribution Pension Plans (Topic 962): Reporting Loans to Participants by Defined Contribution Pension Plans*, as of December 31, 2010, which clarified how loans to participants should be classified and measured by defined contribution pension plans. This update was retrospectively applied to December 31, 2009.

McGladrey & Pullen, LLP

Schaumburg, Illinois
September 22, 2011

McGladrey is the brand under which RSM McGladrey, Inc. and McGladrey & Pullen, LLP serve clients' business needs. The two firms operate as separate legal entities in an alternative practice structure.

Member of RSM International network, a network of independent accounting, tax and consulting firms.

SNR Denton US LLP Profit Sharing Plan

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

	2010	2009
Assets		
Investments, at fair value	**$ 280,835,280**	$ 252,883,987
Non-interest bearing cash in self-directed accounts	**430,714**	170,889
Receivables:		
Partnership contribution	**5,184,503**	4,996,750
Participant contributions	**1,173,083**	1,176,838
Notes receivable from participants	**3,868,808**	3,489,691
Dividends	**108,069**	80,526
Interest	**31,558**	7,660
	10,366,021	9,751,465
Net assets available for benefits	**$ 291,632,015**	$ 262,806,341

See Notes to Financial Statements.

SNR Denton US LLP Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2010

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	**$ 24,725,163**
Interest and dividends	**6,301,470**
	31,026,633
Interest income on notes receivable from participants	**200,868**
Contributions:	
Partnership	**8,523,029**
Participants	**10,378,755**
Rollover	**2,088,796**
	20,990,580
Total additions	**52,218,081**
Deductions from net assets attributed to:	
Benefits paid to participants	**23,243,432**
Administrative expenses	**148,975**
Total deductions	**23,392,407**
Net increase	**28,825,674**
Net assets available for benefits:	
Beginning of year	**262,806,341**
End of year	**$ 291,632,015**

See Notes to Financial Statements.

Note 1. Description of Plan

The following description of the SNR Denton US LLP Profit Sharing Plan (formerly known as Sonberk Profit Sharing Plan) (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan sponsored by SNR Denton US LLP (formerly known as Sonnenschein Nath & Rosenthal LLP) (the Partnership) and maintained for the benefit of eligible partners and employees (as defined), such as capital partners, special partners, certain salaried professional staff and salaried general office employees; who have completed at least two months of service. Newly eligible secretarial, non-manager and non-director staff and paralegal employees are automatically enrolled to make elective deferrals at 3 percent of their compensation. Employees have the option to increase, decrease or eliminate their automatic enrollment contribution prior to it becoming effective. The Plan is subject to the provisions of ERISA.

Contributions: Each year, participants may contribute up to 100 percent of their compensation to the Plan, as defined in the Plan. Participants may contribute on a pre-tax basis, in a form of Roth contributions, or as a combination of both. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Discretionary partnership contributions are made to the Plan on behalf of capital partners, special partners and salaried general office employees who have completed two years of service, and are based on a percentage of the participant's compensation (as defined). Eligible participants must be employed on the last day of the year to receive a partnership contribution, if any. Non-equity partners, associate attorneys, other attorneys and certain professional employees are not eligible to receive a partnership contribution. Contributions are subject to certain limitations.

Investment options: The Plan is a participant-directed plan, whereby each participant elects to have their voluntary and partnership contributions, if any, allocated into various investment options offered by the Plan. Participants may also invest their contributions into self-directed accounts which permit the participant to invest their account balance in a broad range of investment options as permitted by law. Participants may change their investment options daily.

Participant accounts: Each participant's account is credited with the participant's contributions, allocations of partnership contributions, if any, plan investment earnings or losses, and charged with an allocation of administrative expenses. Allocations are based on participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately fully vested in their contributions and partnership contributions plus earnings thereon. Partnership contributions are determined as of December 31 of each year.

Notes receivable from participants: Participants may, with the approval of the Plan Administrator, borrow from their fund accounts up to a maximum equal to the lesser of 50 percent of their vested account balance or $50,000. Loan terms are available up to five years, or longer if used to purchase a primary residence. The loans are collateralized by the balance in the participant's account and bear interest at a fixed rate determined as the prime rate plus 1 percent on the date of application. Interest rates on loans outstanding at December 31, 2010, range from 4.25 to 13.65 percent. Principal and interest are paid ratably through semi-monthly payroll deductions.

Note 1. Description of Plan (Continued)

Payment of benefits: Payments of benefits are made to participants or their beneficiaries upon death, retirement, attaining age 59½, termination of service or in the event of financial hardship. Participants may elect to receive their benefits as a lump sum or in installment payments equal to the value of the participant's interest in his or her account.

Note 2. Summary of Significant Accounting Policies

Basis of accounting: The financial statements have been prepared on the accrual basis of accounting.

Use of estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Cash and cash equivalents: Cash and cash equivalents include highly liquid instruments with original maturities of three months or less at the date of acquisition.

The Plan maintains its cash balances in financial institutions located in the United States. These balances are insured by the Federal Deposit Insurance Corporation up to $250,000. The Plan maintains deposits with high-quality financial institutions in amounts that may at times be in excess of federally insured limits; however, the Plan does not believe it is exposed to any significant credit risk.

Investment valuation and income recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for further discussion of fair value measurements.

Purchases and sales of investments are recorded on the trade date. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in the fair value of investments includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Notes receivable from participants: Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent loans are treated as distributions based upon the terms of the plan document.

Payment of benefits: Benefits are recorded when paid.

Subsequent events: The Plan has evaluated subsequent events for potential recognition and/or disclosure through September 22, 2011, the date the financial statements were available to be issued.

Recent accounting pronouncements: In January 2010, the Financial Accounting Standards Board (FASB) issued an amendment on *Fair Value Measurements and Disclosures – Improving Disclosures about Fair Value Measurements*, which requires new disclosures and reasons for transfers of financial assets and liabilities between Levels 1 and 2. This amendment also clarifies that fair value measurement disclosures are required for each class of financial assets and liabilities, and disclosures about inputs and valuation techniques are required for both Level 2 and Level 3 measurements. It further clarifies that the reconciliation of Level 3 investments should separately present purchases, sales, issuances, and settlements instead of netting these changes. With respect to matters other than Level 3 measurements, the amendment was effective and has been adopted for periods beginning on or after December 15, 2009. The guidance related to Level 3 measurements is effective for periods beginning on or after December 15, 2010. See Note 5 for impact of the adoption.

Note 2. Summary of Significant Accounting Policies (Continued)

In September 2010, the FASB issued an amendment, *Plan Accounting—Defined Contribution Pension Plans: Reporting Loans to Participants by Defined Contribution Pension Plans*, which provides guidance on how loans to participants should be classified and measured by defined contribution pension plans. This amendment requires that participant loans be classified as notes receivable from participants, which are segregated from plan investments and measured at their unpaid principal balance plus any accrued but unpaid interest. This amendment is effective for periods ending after December 15, 2010, with early adoption permitted. This amendment requires retrospective application to all periods presented.

This amendment was adopted for the year ended December 31, 2010, and retrospectively applied to December 31, 2009. Prior year amounts and disclosures have been revised to reflect the retrospective application of adopting this new amendment. The adoption resulted in a reclassification of participant loans totaling $3,868,808 and $3,489,691 from investments to notes receivable as of December 31, 2010 and 2009, respectively. There was no impact to the net assets as of December 31, 2010 or 2009, as a result of the adoption.

Note 3. Investments

Investments held at December 31, 2010 and 2009, are summarized below. Investments representing 5 percent or more of the net assets available for benefits are presented individually.

	2010	(Revised) 2009
Investments, at fair value:		
Shares of registered investment companies:		
American Mutual Fund	$ 25,568,133	$ 24,742,567
Janus INTECH Risk-Managed Growth Fund	17,478,065	16,091,972
Pimco Low Duration Fund	30,929,573	29,146,581
Vanguard Primecap Fund, Admiral Shares	22,662,038	20,323,329
Dodge & Cox International Stock Fund	18,199,741	16,108,420
Other*	72,319,839	58,941,235
Self-directed brokerage accounts:		
Interest bearing cash and cash equivalents*	9,190,286	10,904,965
Shares of registered investment companies*	29,709,887	23,935,173
Common stock*	35,411,843	34,425,603
Preferred stock*	219,100	107,397
U.S. Government securities*	4,136,648	4,388,433
Corporate bonds*	6,303,475	6,708,870
Unit investment trusts*	5,552,783	4,473,621
Limited partnerships*	1,643,583	1,078,542
Closely held instruments*	1,510,286	1,507,279
Total investments, at fair value	$ 280,835,280	$ 252,883,987

* No individual investment represents greater than 5 percent of the net assets of the Plan.

Note 3. Investment (Continued)

During 2010, the Plan's investments (including gains and losses on investments bought, sold and held during the year) appreciated/(depreciated) in value as follows:

Registered investment companies	$ 16,992,753
Self-directed brokerage accounts:	
Interest bearing cash and cash equivalents	(11,953)
Shares of registered investment companies	2,924,408
Common stock	3,991,780
Preferred Stock	18,530
U.S. Government securities	155,792
Corporate bonds	35,383
Unit Investment Trusts	409,286
Limited Partnerships	206,177
Closely held investments	3,007
	$ 24,725,163

Note 4. Information Certified and Provided by Charles Schwab Trust Company and Union Bank of California, N.A.

The following is a summary of the Plan's asset information as of December 31, 2010 and 2009, and for the year ended December 31, 2010, included throughout the Plan's financial statements and supplemental schedule, that was prepared by or derived from information provided by Charles Schwab Trust Company, the current trustee, and Union Bank of California, N.A., the former trustee, and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the current and former trustees that information provided to the Plan Administrator by the current and former trustees related to the following assets is complete and accurate to the best of their knowledge. Accordingly, as permitted by 29 CFR 2520.103-8 of the United States Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following assets:

	2010	2009
Certified by Charles Schwab Trust Company:		
Investments, at fair value	$ 280,835,280	$ 252,479,517
Notes receivable from participants	3,868,808	3,489,691
Net appreciation in fair value of investments	24,725,163	
Interest and dividends	6,299,444	
Interest income on notes receivable from participants	176,969	
Certified by Union Bank of California, N.A.:		
Interest and dividends	2,026	

Note 5. Fair Value Measurements

FASB Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2**.** Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3**.** Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used should maximize the use of observable inputs and minimize the use of unobservable inputs.

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

Shares of registered investment companies: Valued at net asset value of shares held by the Plan at year-end.

Common stock, preferred stock, corporate bonds, U.S. Government securities and unit investment trusts: Valued at the closing price reported on the market on which the individual securities are traded.

*Closely held instruments and limited partnerships***:** Valued based on the net asset values specifically calculated and reported in accordance with generally accepted accounting principles (GAAP) and provided by issuers or their agents or as determined and reported by an independent third party valuation firm at the direction of the Plan's management.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Note 5. Fair Value Measurements (Continued)

The following table sets forth, by level within the fair value hierarchy, the Plan's assets measured at fair value as of December 31, 2010 and 2009:

	December 31, 2010			
	Level 1	Level 2	Level 3	Total
Interest bearing cash and cash equivalents	$ -	$ 9,190,286	$ -	$ 9,190,286
Shares of registered investment companies				
Aggressive allocation	125,004	-	-	125,004
All-cap growth	35,387	-	-	35,387
Bank loan	500,320	-	-	500,320
Bear market	8,756	-	-	8,756
Conservative allocation	80,167	-	-	80,167
Closed end	130,328	-	-	130,328
Commodities broad basket	1,147,146	-	-	1,147,146
Communications	9,983	-	-	9,983
Conservative allocation	744,736	-	-	744,736
Diversified emerging markets	2,308,924	-	-	2,308,924
Emerging markets bond	767,287	-	-	767,287
Energy	394,940	-	-	394,940
Equity	245,119	-	-	245,119
Equity energy	173,514	-	-	173,514
Equity precious metals	82,333	-	-	82,333
Financial services	531,607	-	-	531,607
Foreign growth	11,368	-	-	11,368
Foreign large blend	1,002,856	-	-	1,002,856
Foreign large growth	1,034,632	-	-	1,034,632
Foreign large value	18,701,368	-	-	18,701,368
Foreign small/mid growth	52,359	-	-	52,359
Foreign small/mid value	8,496	-	-	8,496
Global real estate	319,570	-	-	319,570
High yield bond	1,681,980	-	-	1,681,980
Inflation-protected bond	1,901,763	-	-	1,901,763
Intermediate government	131,856	-	-	131,856
Intermediate-term bond	15,432,946	-	-	15,432,946
Large blend	24,018,310	-	-	24,018,310
Large growth	41,406,817	-	-	41,406,817
Large value	31,429,001	-	-	31,429,001
Long-short	136,844	-	-	136,844
Long-term bond	42,754	-	-	42,754
Market neutral	198,453	-	-	198,453

Note 5. Fair Value Measurements (Continued)

	December 31, 2010 (continued)			
	Level 1	Level 2	Level 3	Total
Micro cap	21,017	-	-	21,017
Mid-cap blend	147,152	-	-	147,152
Mid-cap growth	448,399	-	-	448,399
Mid-cap value	139,909	-	-	139,909
Moderate allocation	706,616	-	-	706,616
Multisector bond	642,777	-	-	642,777
Natural resources	99,198	-	-	99,198
Pacific/Asia ex-Japan stock	143,141	-	-	143,141
Real estate	613,172	-	-	613,172
Retirement income	333,103	-	-	333,103
Short government	1,003,844	-	-	1,003,844
Short-term bond	31,663,698	-	-	31,663,698
Small blend	272,699	-	-	272,699
Small growth	12,793,010	-	-	12,793,010
Small value	61,895	-	-	61,895
Technology	10,017	-	-	10,017
Target date	20,611,994	-	-	20,611,994
Technology	931	-	-	931
Utilities	44,700	-	-	44,700
World allocation	271,123	-	-	271,123
World bond	1,570,017	-	-	1,570,017
World stock	471,940	-	-	471,940
Common stock				
Auto	7,003	-	-	7,003
Bear market	221,250	-	-	221,250
Business services	1,886,019	-	-	1,886,019
Consumer goods	5,772,849	-	-	5,772,849
Energy	4,772,638	-	-	4,772,638
Hardware	2,720,360	-	-	2,720,360
Financial services	4,836,852	-	-	4,836,852
Healthcare	3,661,695	-	-	3,661,695
Materials	6,596,990	-	-	6,596,990
Latin America	123,840	-	-	123,840
Media	278,204	-	-	278,204
Pacific/Asia ex-Japan	25,884	-	-	25,884
Real estate	160,130	-	-	160,130
Software	1,216,882	-	-	1,216,882
Technology	26,875	-	-	26,875
Telecommunications	2,304,248	-	-	2,304,248
Utilities	800,124	-	-	800,124

Note 5. Fair Value Measurements (Continued)

	December 31, 2010 (continued)			
	Level 1	Level 2	Level 3	Total
Preferred stock	219,100	-	-	219,100
U.S. Government securities	4,136,648	-	-	4,136,648
Corporate bonds	-	6,303,475	-	6,303,475
Unit investment trusts				
A-rated	-	727,663	-	727,663
Bear market	-	22,224	-	22,224
China	-	94,798	-	94,798
Commodities	-	981,021	-	981,021
Diversified emerging markets	-	1,052,736	-	1,052,736
Domestic energy	-	192,951	-	192,951
Domestic financial	-	15,950	-	15,950
Domestic real estate	-	23,002	-	23,002
Foreign large core	-	277,227	-	277,227
High yield bond	-	45,145	-	45,145
Industrials	-	73,799	-	73,799
Inflation-protected bond	-	688,268	-	688,268
Japan	-	40,832	-	40,832
Large core	-	10,623	-	10,623
Large deep value	-	24,930	-	24,930
Large high growth	-	40,419	-	40,419
Latin America	-	80,790	-	80,790
Materials	-	53,774	-	53,774
Micro cap	-	105,682	-	105,682
Pacific/Asia ex-Japan	-	208,763	-	208,763
S&P 500	-	307,081	-	307,081
Small core	-	45,923	-	45,923
Small core growth	-	61,194	-	61,194
Small relative value	-	27,389	-	27,389
Technology	-	248,913	-	248,913
Unclassified	-	16,884	-	16,884
Utilities	-	9,402	-	9,402
World financial	-	46,560	-	46,560
World mid cap	-	28,840	-	28,840
Limited partnerships	-	-	1,643,583	1,643,583
Closely held instruments	-	-	1,510,286	1,510,286
	$ 256,634,867	$ 21,046,544	$ 3,153,869	$ 280,835,280

Note 5. Fair Value Measurements (Continued)

	December 31, 2009 (Revised)			
	Level 1	Level 2	Level 3	Total
Interest bearing cash and cash equivalents	$ -	$ 10,904,965	$ -	$ 10,904,965
Shares of registered investment companies:				
Energy	562,539	-	-	562,539
Fixed income	52,117,131	-	-	52,117,131
Index funds	8,878,947	-	-	8,878,947
International	21,573,899	-	-	21,573,899
Large cap	64,477,282	-	-	64,477,282
Mid cap	21,784,878	-	-	21,784,878
Miscellaneous	3,170,995	-	-	3,170,995
Real estate	416,353	-	-	416,353
Small cap	838,520	-	-	838,520
Target date	15,468,733	-	-	15,468,733
Aerospace	394,097	-	-	394,097
Agriculture	634,328	-	-	634,328
Auto	390,943	-	-	390,943
Beverages	364,878	-	-	364,878
Business services	2,228,848	-	-	2,228,848
Consumer goods	4,586,155	-	-	4,586,155
Construction	1,062,316	-	-	1,062,316
Drugs	2,416,316	-	-	2,416,316
Financial Services	2,998,985	-	-	2,998,985
Healthcare	1,893,800	-	-	1,893,800
Materials	5,941,156	-	-	5,941,156
Miscellaneous	3,214,617	-	-	3,214,617
Shipping	455,759	-	-	455,759
Technology	7,843,405	-	-	7,843,405
Preferred stock	107,397	-	-	107,397
U.S. Government securities	4,271,084	-	-	4,271,084
Municipal obligations	117,349	-	-	117,349
Corporate bonds	-	6,708,870	-	6,708,870
Unit investment trusts				
Bear market	-	52,703	-	52,703
Commodities	-	528,454	-	528,454
Energy	-	399,170	-	399,170
Fixed income	-	1,217,377	-	1,217,377
International	-	1,407,893	-	1,407,893
Large cap	-	217,976	-	217,976
Other	-	487,427	-	487,427
Small cap	-	162,621	-	162,621
Limited partnerships	-	-	1,078,542	1,078,542
Closely held instruments	-	-	1,507,279	1,507,279
	$ 228,210,710	$ 22,087,456	$ 2,585,821	$ 252,883,987

Note 5. Fair Value Measurements (Continued)

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2010:

	Limited Partnerships	Closely Held Instruments
Balance, beginning of year	$ 1,078,542	$ 1,507,279
Change in unrealized gains/(losses) relating to instruments still held at the reporting date	199,310	3,007
Realized gains/(losses) relating to instruments sold	6,867	-
Purchases	469,897	-
Sales	(111,033)	-
Balance, end of year	$ 1,643,583	$ 1,510,286

Note 6. Party-In-Interest

Certain plan investments are shares of a money market fund managed by Charles Schwab & Co., Inc., an affiliate of Charles Schwab Trust Company, the trustee of the Plan, and Schwab Retirement Plan Services, Inc., the recordkeeper of the Plan; therefore, these transactions qualify as party-in-interest transactions.

Certain administrative and record-keeping fees are paid by the Partnership. Other administrative and investment management fees are paid by the Plan and charged to individual participant accounts; for the year ended December 31, 2010, these fees totaled $148,975.

Certain employees of the Partnership provide services to the Plan without reimbursement.

Note 7. Plan Termination

Although it has not expressed any intent to do so, the Partnership has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. All assets remaining in the trust, after deducting all fees, taxes and other expenses, shall be distributed to the participants in accordance with the value of their accounts at the date of Plan termination.

Note 8. Tax Status

The Internal Revenue Service has determined and informed the Plan by a letter dated June 7, 2004, that the Plan and the related trust are designed in accordance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan was designed and is operating in compliance with the applicable requirements of the IRC.

Note 8. Tax Status (Continued)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the local, state and federal taxing authorities. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes it is no longer subject to income tax examinations for years prior to 2007.

Note 9. Risks and Uncertainties

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

Supplemental Schedule

SNR Denton US LLP Profit Sharing Plan

Schedule of Assets (Held at End of Year)
December 31, 2010

Plan Number: 001
EIN: 36-1796730

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost		(e) Fair value
		Shares of registered investment companies:			
	American Funds Distributors, Inc.	American Mutual Fund	**	$	25,568,133
	Dodge & Cox Funds	Dodge & Cox International Stock Fund	**		18,199,741
	Janus Distributors LLC	Janus INTECH Risk-Managed Growth Fund	**		17,478,065
	Longleaf Partners Funds	Longleaf Partners Fund	**		11,458,196
	Allianz Global Investors Distributors LLC	Pimco Low Duration Fund	**		30,929,573
	Allianz Global Investors Distributors LLC	Pimco Total Return Fund	**		10,850,968
	Allianz Global Investors Distributors LLC	Allianz NFJ Dividend Value Fund	**		5,150,952
	Royce Fund Services, Inc.	Royce Value Plus Fund	**		12,199,709
	Vanguard Marketing Corp., Distrib.	Vanguard Primecap Fund Admiral	**		22,662,038
	Vanguard Marketing Corp., Distrib.	Vanguard Total Stock Market Index Fund	**		11,157,505
*	Charles Schwab & Co., Inc.	Schwab Government Money Fund	**		470,367
	T. Rowe Price Investment Services, Inc.	T. Rowe Price Retirement Income Fund	**		333,103
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2005 Retirement Fund	**		54,137
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2010 Retirement Fund	**		284,471
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2015 Retirement Fund	**		1,366,334
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2020 Retirement Fund	**		2,149,088
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2025 Retirement Fund	**		3,907,761
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2030 Retirement Fund	**		5,086,914
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2035 Retirement Fund	**		2,382,825
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2040 Retirement Fund	**		3,048,962
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2045 Retirement Fund	**		2,207,834
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2050 Retirement Fund	**		60,251
	T. Rowe Price Investment Services, Inc.	T. Rowe Price 2055 Retirement Fund	**		63,418
	Bruce Funds	Bruce Fund	**		87,044
					187,157,389

Schedule of Assets (Held at End of Year) (Continued)
December 31, 2010

Plan Number: 001
EIN: 36-1796730

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Fair value
		Self-directed brokerage accounts:		
		Self-directed brokerage accounts	**	$ 89,779,853
		Limited partnerships		
		AllianceBernstein Holding L.P.	**	10,499
		BH Opportunity Fund Partners IV LP	**	21,596
		Diversified Cal Properties LP	**	65,050
		Eastside Capital LP	**	657,523
		Enbridge Energy Partners LP	**	4,679
		Energy Transfer Partners LP	**	161,160
		Enron Capital Monthly Income Preferred Shares 8%	**	3
		Enterprise Products Partners L.P.	**	239,590
		Great Northern Iron Ore Properties	**	17,160
		Kinder Morgan Energy Partners LP	**	28,104
		KKR & Co LP	**	7,100
		Magellan Midstream Partners LP	**	311,880
		Nustar Energy LP	**	15,633
		Sunoco Logistics Partners LP	**	41,795
		Willimas Partners LP	**	61,811
		Diversified Cal Properties LP	**	65,050
		East Side Capital LP	**	657,523
		BH Opportunity Fund Partners IV LP	**	21,596
		Closely held instruments		
		Chicago/Wells Design Center LLC	**	82,875
		FSP Galleria North Corporation PFD	**	75,000
		FSP Phoenix Towers Corp. PFD	**	75,000
		FSP 50 South Tenth Street Corp. PFD	**	75,000
		Jerry's Sandwiches, LLC	**	25,000
		Millenium International Ltd. M-01A	**	425,458
		Millenium International Ltd. O-01A	**	344,573
		Northcoast Asset Allocation	**	262,380
		Peoples Bankcorp Inc. ILL COM	**	30,000
		Porta Bella Lender LLC	**	65,000
		Progressive Beverages Inc.	**	50,000
				93,677,891
*	Participants	Notes receivable from participants, (interest rates from 4.25% to 13.65%, maturing through 4/16/2040)	**	3,868,808
				$ 284,704,088

*Represents a party-in-interest investment.
* - A party in interest as defined by ERISA.
** - Cost omitted for participant directed investments.

SNR Denton US LLP Profit Sharing Plan
Schedule C, Part I, Line 3 - Service Provider Indirect Compensation Information
December 31, 2010

EIN: 36-1796730
Plan Number: 001

Received by Charles Schwab & Co., Inc. (EIN#94-1737782)

Fund Family/Provider	EIN	Formula
Allianz Funds	33-0457728	Range of 0.01 - 0.25% of average daily balance of assets
Dodge & Cox	94-1441976	Rate of 0.09% of average daily balance of asset(s)
Janus	43-1804048	Rate of 0.08% of average daily balance of asset(s)
Royce	52-2343049	Rate of 0.05% of average daily balance of asset(s)
T. Rowe Price	52-2264646	Range of 0.13 - 0.14% of average daily balance of assets

Received by Charles Schwab Bank (EIN#42-1558009)

Fund Family/Provider	EIN	Formula
American Funds	95-1411037	Rate of 0.24% of average daily balance of asset(s)
Schwab Funds	94-3106735	Rate of 0.23% of average daily balance of asset(s)

Received by Schwab Retirement Plan Services, Inc. (EIN#34-1479833)

Fund Family/Provider	EIN	Formula
American Funds	95-1411037	Rate of 0.05% of average daily balance of plan asset(s) in certain funds

Received by Charles Schwab & Co., Inc. (EIN#94-1737782)

Fund Family/Provider	EIN	Formula
AllianceBernstein	13-3191825	Rate of 0.40% of average daily balance of asset(s)
Allianz Funds	33-0457728	Range of 0.01 - 0.40% of average daily balance of assets
American Century Investments	44-6006315	Rate of 0.24% of average daily balance of asset(s)
American Funds	95-1411037	Range of 0.05 - 1.00% of average daily balance of assets
AQR	13-3987414	Rate of 0.10% of average daily balance of asset(s)
Artisan	39-1811840	Rate of 0.40% of average daily balance of asset(s)
Aston	20-4747475	Rate of 0.40% of average daily balance of asset(s)
Baron Capital Group	13-3122938	Rate of 0.40% of average daily balance of asset(s)
BlackRock	51-0318674	Rate of 0.40% of average daily balance of asset(s)
Calamos	36-3316238	Range of 0.40 - 1.00% of average daily balance of assets
Columbia	93-0577450	Range of 0.40 - 0.50% of average daily balance of assets
Credit Suisse	13-3442768	Rate of 0.40% of average daily balance of asset(s)
Davis Funds	52-1346931	Rate of 0.99% of average daily balance of asset(s)
Dreyfus	13-5673135	Range of 0.15 - 0.35% of average daily balance of assets
DWS Investments	13-3241232	Rate of 0.40% of average daily balance of asset(s)

SNR Denton US LLP Profit Sharing Plan
Schedule C, Part I, Line 3 - Service Provider Indirect Compensation Informatior
December 31, 2010

EIN: 36-1796730
Plan Number: 001

Received by Charles Schwab & Co., Inc. (EIN#94-1737782)

Fund Family/Provider	EIN	Formula
Eaton Vance	04-2718215	Range of 0.40 - 1.00% of average daily balance of assets
Fidelity Investments	06-1194217	Rate of 0.15% of average daily balance of asset(s)
First Eagle	13-3392291	Rate of 0.40% of average daily balance of asset(s)
Franklin Templeton Investments	94-3167260	Range of 0.15 - 0.40% of average daily balance of assets
Harbor	04-2679462	Rate of 0.35% of average daily balance of asset(s)
Hartford Mutual Funds	13-3317783	Range of 0.15 - 0.40% of average daily balance of assets
ING Funds	95-4516049	Rate of 0.40% of average daily balance of asset(s)
Invesco Aim	76-0528004	Range of 0.10 - 0.40% of average daily balance of assets
Ivy Funds	04-6006759	Range of 0.10 - 0.40% of average daily balance of assets
Janus	43-1804048	Rate of 0.34% of average daily balance of asset(s)
JPMorgan	13-2624428	Rate of 0.40% of average daily balance of asset(s)
Keeley	36-3160361	Rate of 0.40% of average daily balance of asset(s)
Lazard	20-4571006	Rate of 0.40% of average daily balance of asset(s)
MainStay	52-2206685	Rate of 0.40% of average daily balance of asset(s)
Manning & Napier	16-0995736	Rate of 0.40% of average daily balance of asset(s)
Matthews Asia Funds	94-3250972	Rate of 0.35% of average daily balance of asset(s)
Merger	13-3036274	Rate of 0.40% of average daily balance of asset(s)
MFS	04-2747644	Rate of 0.45% of average daily balance of asset(s)
Natixis Funds	04-3200027	Range of 0.35 - 0.99% of average daily balance of assets
Oakmark	04-3276558	Rate of 0.35% of average daily balance of asset(s)
OppenheimerFunds	13-2527171	Range of 0.50 - 1.00% of average daily balance of assets
Parnassus	94-6579180	Rate of 0.40% of average daily balance of asset(s)
Permanent Portfolio	94-2788165	Rate of 0.40% of average daily balance of asset(s)
Prudential Investments	22-3703799	Rate of 0.40% of average daily balance of asset(s)
Royce	52-2343049	Range of 0.40 - 0.45% of average daily balance of assets
Rydex|SGI	48-0409770	Rate of 0.40% of average daily balance of asset(s)
Schwab Funds	94-3106735	Rate of 0.25% of average daily balance of asset(s)
SteelPath	Not Available	Rate of 0.15% of average daily balance of asset(s)
T. Rowe Price	52-2264646	Rate of 0.01% of average daily balance of asset(s)
The Arbitrage Fund	36-4380398	Rate of 0.40% of average daily balance of asset(s)
Thomas White Funds	36-3831152	Rate of 0.40% of average daily balance of asset(s)
Tocqueville	13-3549887	Rate of 0.40% of average daily balance of asset(s)
Weitz	47-0693748	Rate of 0.40% of average daily balance of asset(s)
Wells Fargo Advantage	41-0449260	Rate of 0.40% of average daily balance of asset(s)
Winslow Green Funds	20-2859985	Rate of 0.40% of average daily balance of asset(s)
Yacktman	36-3831621	Rate of 0.40% of average daily balance of asset(s)

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

NAME OF PLAN SPONSOR: Sonnenschein, Nath & Rosenthal LLP
NAME OF PLAN: SNR Denton US LLP Profit Sharing Plan
EIN: 36-1796730
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
*	PARTICIPANT LOANS	Loans (4.25%-13.65%)		3,868,808
*	SCHWAB GOVT SECURITIES FUND	Money Market		470,367
	CASH	Cash		430,714
	PCRA	Self-Directed Brokerage Account		90,524,023
	ALLIANZ NFJ DIVIDEND VAL INSTL	Registered Investment Company		5,150,952
	AMERICAN MUTUAL FUND	Registered Investment Company		25,568,133
	BRUCE FUND	Registered Investment Company		87,044
	DODGE & COX INTL STOCK	Registered Investment Company		18,199,741
	INTECH RISK-MANAGED GROWTH I	Registered Investment Company		17,478,065
	LONGLEAF PARTNERS FUND	Registered Investment Company		11,458,196
	PIMCO LOW DURATION FUND	Registered Investment Company		30,929,573
	PIMCO TOTAL RETURN FUND	Registered Investment Company		10,850,968
	ROYCE VALUE PLUS INSTL	Registered Investment Company		12,199,709
	T ROWE PRICE RETIREMENT 2005	Registered Investment Company		54,137
	T ROWE PRICE RETIREMENT 2010	Registered Investment Company		284,471
	T ROWE PRICE RETIREMENT 2015	Registered Investment Company		1,366,334
	T ROWE PRICE RETIREMENT 2020	Registered Investment Company		2,149,088
	T ROWE PRICE RETIREMENT 2025	Registered Investment Company		3,907,761
	T ROWE PRICE RETIREMENT 2030	Registered Investment Company		5,086,914
	T ROWE PRICE RETIREMENT 2035	Registered Investment Company		2,382,825
	T ROWE PRICE RETIREMENT 2040	Registered Investment Company		3,048,962
	T ROWE PRICE RETIREMENT 2045	Registered Investment Company		2,207,834
	T ROWE PRICE RETIREMENT 2050	Registered Investment Company		60,251
	T ROWE PRICE RETIREMENT 2055	Registered Investment Company		63,418
	T ROWE PRICE RETIREMENT INCOME	Registered Investment Company		333,103
	VANGUARD PRIMECAP ADMIRAL	Registered Investment Company		22,662,038
	VANGUARD TOTAL STK INDEX INST	Registered Investment Company		11,157,505
	BH OPPORTY FD PARTNERS IV LP	Limited Partnership		21,596
	BROOKWOOD BISCAYNE TOWER LLC	Limited Partnership		1
	CHICAGO WELLS DESIGN CNTR LLC	Limited Partnership		82,875

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

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(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
	DIVERSIFIED CAL PROPERTIES LP	Limited Partnership		65,050
	EAST SIDE CAPITAL LP	Limited Partnership		657,523
	FSP 50 SOUTH 10TH ST CORP PFD	Limited Partnership		75,000
	FSP GALLERIA NORTH CORP PFD	Limited Partnership		75,000
	FSP PHOENIX TOWERS CORP PFD	Limited Partnership		75,000
	JERRYS SANDWICHES LLC	Limited Partnership		25,000
	MILLENNIUM INTL LTD M-01A	Limited Partnership		425,458
	MILLENNIUM INTL LTD O-01A	Limited Partnership		344,572
	NORTHCOAST ASSET ALLOCATION	Limited Partnership		262,380
	PEOPLES BANCORP INC	Limited Partnership		30,000
	PORTA BELLA LENDER LLC	Limited Partnership		65,000
	PROGRESSIVE BEVERAGES INC	Limited Partnership		50,000
	LIMITED PARTNERSHIP	Limited Partnership		899,414