Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
AT HOME SOLUTIONS, LLC EMPLOYEES PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2008

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

111-02 JAMAICA AVENUE
SUITE 2B
RICHMOND HILL, NY 11418

2b Employer Identification Number (EIN)
20-1699013

2c Sponsor's telephone number
718-441-6802

2d Business code (see instructions)
621610

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.	10/24/2011	DIMITRY ARONSHTEIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

111-02 JAMAICA AVENUE
SUITE 2B
RICHMOND HILL, NY 11418

3b Administrator's EIN
20-1699013

3c Administrator's telephone number
718-441-6802

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**	382
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**	397
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	85
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	482
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	
f	Total. Add lines **6d** and **6e**	**6f**	482
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	232
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
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

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)		**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)		**C** (Service Provider Information)
(5)		**D** (DFE/Participating Plan Information)
(6)		**G** (Financial Transaction Schedules)

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
AT HOME SOLUTIONS, LLC EMPLOYEES PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AT HOME SOLUTIONS, LLC

D Employer Identification Number (EIN)
20-1699013

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)	41516	53102
(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)		
(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)	29258	82096
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	70774	135198
	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		
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	70774	135198

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)	53102	
	(B) Participants	2a(1)(B)	7655	
	(C) Others (including rollovers)	2a(1)(C)	3142	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		63899
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)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		
	(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)		
	(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)		

		(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)		
(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)		1025
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		64924
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	500	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		500
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		500
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		64424
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: JOSEPH G. GONZAL, CPA (2) EIN: 11-2701202

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	
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)

EMPLOYEES PENSION PLAN

AS ADOPTED BY AT HOME SOLUTIONS, LLC

FINANCIAL STATEMENTS

AND SUPPLEMENTAL SCHEDULE
WITH
ACCOMPANYING INDEPENDENT AUDITOR'S REPORT
AND
NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2010
AND
FOR THE YEAR THEN ENDED

JOSEPH G. GONZAL, CPA

EMPLOYEES PENSION PLAN

AS ADOPTED BY AT HOME SOLUTIONS, LLC

EMPLOYEE PENSION PLAN INCEPTION JANUARY 1, 2008

INDEX TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2010 AND FOR THE YEAR THEN ENDED

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JOSEPH G. GONZAL, CPA

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GARDEN CITY, NY 11530-2016
PHONE: 516-227-1101 FAX: 516-478-6776
E-MAIL: CPAGONZAL@OPTONLINE.NET

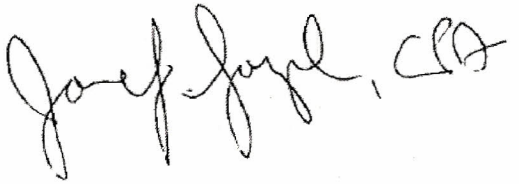
INDEPENDENT AUDITOR'S REPORT

TO THE PLAN ADMINISTRATOR AND PARTICIPANTS OF
THE EMPLOYEE PENSION PLAN AS ADOPTED BY AT HOME SOLUTIONS, LLC
RICHMOND HILL, NEW YORK

I WAS ENGAGED TO AUDIT THE ACCOMPANYING STATEMENTS OF NET ASSETS AVAILABLE FOR HE EMPLOYEE PENSION PLAN AS ADOPTED BY AT HOME SOLUTIONS, LLC (THE "PLAN") AS OF DECEMBER 31, 2010, AND THE RELATED STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2010, AND THE SUPPLEMENTAL SCHEDULE [PAGE 11] OF PLAN'S ASSETS HELD FOR INVESTMENT PURPOSES. THESE FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE ARE THE RESPONSIBILITY OF THE PLAN'S TRUSTEE.

AS PERMITTED BY 29 CFR 2520.103-8 OF THE DEPARTMENT OF LABOR' S [DOL] RULES AND REGULATIONS FOR REPORTING AND DISCLOSURE UNDER THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974 [ERISA], THE PLAN TRUSTEE INSTRUCTED ME NOT TO PERFORM, AND I DID NOT PERFORM, ANY AUDITING PROCEDURES WITH RESPECT TO THE INVESTMENT INFORMATION REPORTED IN THE FINANCIAL STATEMENTS, WHICH WAS INCLUDED IN THE TRUST REPORT BY AMERICAN FUNDS RETIREMENT RESOURCES, THE CUSTODIAN OF THE PLAN'S ASSETS HELD FOR INVESTMENT PURPOSES, EXCEPT FOR COMPARING SUCH INFORMATION WITH THE RELATED INFORMATION INCLUDED IN THE FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE.

BECAUSE OF THE SIGNIFICANCE OF THE INFORMATION THAT I DID NOT AUDIT, I AM 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 CUSTODIAN OF THE PLAN'S ASSETS HELD FOR INVESTMENT, HAVE BEEN AUDITED BY ME IN ACCORDANCE WITH AUDITING STANDARDS GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA AND, IN MY OPINION, ARE PRESENTED IN COMPLIANCE WITH THE DOL'S RULES AND REGULATIONS FOR REPORTING AND DISCLOSURE UNDER ERISA.



GARDEN CITY, NY
OCTOBER 8, 2011

EMPLOYEE PENSION PLAN

AS ADOPTED BY AT HOME SOLUTIONS, LLC

STATEMENT OF NET ASSETS AVAILABLE FOR PLAN BENEFITS

AS OF DECEMBER 31, 2010

ASSETS

ACCOUNTS RECEIVABLE ARISING FROM EMPLOYER CONTRIBUTIONS		$ 53,102
INVESTMENTS, AT FAIR MARKET VALUE	Page 11	82,096
NET ASSETS AVAILABLE FOR PLAN BENEFITS, AT FAIR MARKET VALUE		**$ 135,198**

SEE ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

EMPLOYEE PENSION PLAN

AS ADOPTED BY AT HOME SOLUTIONS, LLC

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2010

INVESTMENT INCOME:		
INCREASE IN NET ASSETS ATTRIBUTED TO CHANGE IN FAIR MARKET VALUE OF INVESTMENTS	$	1,025
OTHER		3,142
		4,167
EMPLOYEE CONTRIBUTIONS		7,655
EMPLOYER CONTRIBUTIONS		53,102
		64,924
DEDUCTIONS FORM NET ASSETS ATTRIBUTED TO:		
BENEFITS PAYMENTS TO PARTICIPANTS OR BENEFICIARIES		-
CONTRACT ADMINISTRATIVE FEES AND OTHER DEDUCTIOND		500
TOTAL DEDUCTIONS		500
NET INCREASE		64,424
NET ASSETS AVAILABLE FOR PLAN BENEFITS:		
BEGINNING OF YEAR, JANUARY 1, 2010		70,774
END OF YEAR, DECEMBER 31, 2010	$	135,198

SEE ACCOMPANYING NOTES TO FINANCIAL STATEMENTS.

EMPLOYEES PENSION PLAN
AS ADOPTED BY AT HOME SOLUTIONS, LLC

NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2010

1. DESCRIPTION OF PLAN

HISTORY AND PURPOSE / THE PLAN, AS ADOPTED BY AT HOME SOLUTIONS, LLC ["THE COMPANY"] BECAME EFFECTIVE JANUARY 1, 2008. THE PLAN'S PRINCIPAL PURPOSE IS TO ENHANCE THE RETIREMENT BENEFITS OF THE COMPANY'S ELIGIBLE EMPLOYEES. SUCH PLAN IS FUNDED BY THE PARTICIPANT'S CONTRIBUTION AND THE EMPLOYER'S CONTRIBUTIONS, IF ANY. IN ADDITION, THE PLAN IS FOR THE EXCLUSIVE BENEFIT OF ELIGIBLE EMPLOYEES OF THE COMPANY AND THEIR BENEFICIARIES.

PARTICIPANTS SHOULD REFER TO THE PLAN AGREEMENT, WITH AMENDEMENTS, IF ANY, FOR MORE COMPLETE DESCRIPTION OF THE PLAN'S PROVISIONS.

GENERAL / THE PLAN IS A DEFINED CONTRIBUTION PLAN COVERING ALL EMPLOYEES OF THE COMPANY WHO ARE QUALIFIED, IN ACCORDANCE WITH PLAN'S REQUIREMENTS, AND HAVE SATISFIED SUCH ELIGIBILITY REQUIREMENTS. NON-RESIDENT ALIENS ARE NOT QUALIFIED. THE ADMINISTRATION OF THE PLAN IS THE RESPONSIBILITY OF THE PLAN'S TRUSTEE.

PLAN ADMINISTRATION / INVESTMENT FEES INCURRED BY THE PLAN ARE REFLECTED AS A REDUCTION OF THE RETURN ON EACH FUND. ADMINISTRATIVE COSTS ARE REFLECTED AS A NET ASSET DEDUCTION.

CONTRIBUTIONS / EACH YEAR, THE PARTICIPANTS AND EMPLOYER MAY CONTRIBUTE A CERTAIN AMOUNT OF PRETAX COMPENSATION, AS DEFINED IN THE PLAN AGREEMENT, AS LIMITED BY THE INTERNAL REVENUE SERVICE. FURTHER, PARTICIPANTS MAY ALSO CONTRIBUTE AMOUNTS REPRESENTING DISTRIBUTIONS FROM OTHER QUALIFIED DEFINED BENEFIT OR CONTRIBUTIONS PLANS [DIRECT ROLLOVER]. CONTRIBUTIONS ARE INVESTED IN THE PLAN FUNDS, FOLLOWING THE RESPECTIVE PARTICIPANTS' INSTRUCTIONS.

VESTING / PARTICIPANTS ARE IMMEDIATELY VESTED IN THEIR PRE-TAX CONTRIBUTIONS PLUS ACTUAL EARNINGS THEREON.

WITHDRAWALS / DURING EMPLOYMENT, A PARTICIPANT MAY WITHDRAW AMOUNTS APPLICABLE TO VESTED COMPANY AND EMPLOYEE CONTRIBUTIONS AND EARNINGS OR LOSSES THEREON, FOR ANY REASON UPON ATTAINING THE AGE OF 59 1/2. CERTAIN WITHDRAWALS PRECLUDE THE PARTICIPANT FROM MAKING FURTHER CONTRIBUTIONS OR FURTHER WITHDRAWALS UNDER THE PLAN FOR VARIOUS PERIODS OF TIME.

PAYMENT OF BENEFITS / PARTICIPANTS ARE ELIGIBLE FOR PAYMENT OF BENEFITS UPON RETIREMENT, DEATH, TERMINATION, OR PERMANENT DISABILITY. PARTICIPANTS ARE ENTITLED TO RECEIVE THEIR VESTED ACCOUNT BALANCE IN A SINGLE PAYMENT OR MAY ELECT TO DEFER PAYMENT OVER A PERIOD NOT TO EXCEED THE PARTICIPANT'S LIFE EXPECTANCY. HOWEVER, PARTICIPANTS WITH A VESTED BALANCE OF LESS THAN $5,000 ARE AUTOMATICALLY PAID A LUMP SUM DISTRIBUTION. THE PLAN ALLOWS FOR IN-SERVICE WITHDRAWALS DUE TO FINANCIAL HARDSHIP, AS DEFINED.

THE BENEFIT TO WHICH A PARTICIPANT IS ENTITLED IS LIMITED TO THE VESTED BALANCE OF THE PARTICIPANT'S ACCOUNT.

LOANS TO PARTICIPANTS / PARTICIPANTS MAY BORROW FROM THEIR ACCOUNTS A MINIMUM OF $1,000 UP TO A MAXIMUM EQUAL TO THE LESSER OF $50,000 OR 50% OF THEIR VESTED ACCOUNT BALANCE. LOAN TRANSACTIONS ARE TREATED AS A TRANSFER FROM THE PARTICIPANT INVESTMENT FUND TO THE PARTICIPANT LOAN RECEIVABLE CATEGORY. LOAN

TERMS RANGE FROM ONE TO FIVE YEARS AND ARE SECURED BY THE BALANCE IN THE PARTICIPANT'S ACCOUNT. INTEREST RATES ARE BASED ON THE PRIME RATE ON THE FIRST BUSINESS DAY OF THE MONTH IN WHICH THE LOAN ORIGINATED. PRINCIPAL AND INTEREST ARE REPAID THROUGH PERIODIC PAYROLL DEDUCTIONS. ALL LOANS ARE REQUIRED TO BE PAID WITHIN (5) YEARS OF THE DATE OF THE LOAN.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF PRESENTATION / THE ACCOMPANYING FINANCIAL STATEMENTS HAVE BEEN PREPARED IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.

INVESTMENTS 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 3 FOR A DISCUSSION OF FAIR VALUE MEASUREMENTS.

PURCHASES AND SALES OF SECURITIES ARE RECORDED ON A TRADE-DATE BASIS. INTEREST INCOME IS RECORDED WHEN RECEIVED. DIVIDENDS ARE RECORDED ON THE EX-DIVIDEND DATE. NET INCREASE OR DECREASE IN NET ASSETS CHANGE IN FAIR MARKET VALUE OF INVESTMENTS INCLUDES THE PLAN'S GAINS AND LOSSES ON INVESTMENTS BOUGHT AND SOLD AS WELL AS HELD DURING THE YEAR.

AS DESCRIBED IN FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 962, *PLAN ACCOUNTING - DEFINED CONTRIBUTION PENSION PLANS*, INVESTMENT CONTRACTS HELD BY A DEFINED CONTRIBUTION PLAN ARE REQUIRED TO BE REPORTED AT FAIR VALUE.

HOWEVER, CONTRACT VALUE IS THE RELEVANT MEASUREMENT ATTRIBUTE FOR THAT PORTION OF THE NET ASSETS AVAILABLE FOR BENEFITS OF A DEFINED CONTRIBUTION PLAN ATTRIBUTABLE TO FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS BECAUSE CONTRACT VALUE IS THE AMOUNT PARTICIPANTS WOULD RECEIVE IF THEY WERE TO INITIATE PERMITTED TRANSACTIONS UNDER THE TERMS OF THE PLAN. AS REQUIRED BY FASB ASC 962, THE STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS PRESENTS THE FAIR VALUE OF THE SEI STABLE ASSET AS WELL AS THE ADJUSTMENT OF THE INVESTMENT IN THE COMMON COLLECTIVE TRUST FROM FAIR VALUE TO CONTRACT VALUE RELATED TO THE FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS. THE STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS IS PREPARED ON A CONTRACT VALUE BASIS.

PAYMENT OF BENEFITS / BENEFITS ARE RECORDED WHEN PAID.

CHANGES IN THOSE NET ASSETS DURING THE REPORTING PERIOD. ACTUAL RESULTS COULD DIFFER FROM THOSE ESTIMATES.

ESTIMATES / THE PREPARATION OF FINANCIAL STATEMENTS IN CONFORMITY WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRES THE PLAN TRUSTEE TO MAKE ESTIMATES AND ASSUMPTIONS THAT AFFECT THE REPORTED AMOUNTS OF NET ASSETS AVAILABLE FOR BENEFITS AND DISCLOSURE OF CONTINGENT ASSETS AND LIABILITIES AT THE DATE OF THE FINANCIAL STATEMENTS AND THE REPORTED AMOUNTS OF

3.SUBSEQUENT EVENTS / THE PLAN HAS EVALUATED EVENTS AND TRANSACTIONS FOR POTENTIAL RECOGNITION OR DISCLOSURE THROUGH OCTOBER 8, 2011, THE DATE THE FINANCIAL STATEMENTS AS OF DECEMBER 31, 2010 AND FOR THE YEAR THEN ENDED WERE AVAILABLE TO BE ISSUED.

4. FAIR MARKET VALUE MEASUREMENTS

FASB ASC 820, *FAIR VALUE MEASUREMENTS AND DISCLOSURES*, ESTABLISHES A 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 MARKET VALUE HIERARCHY UNDER FASB ASC 820-10 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 THE FOLLOWING:

- 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 PRICIPALLY 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 NEED TO MAXIMIZE TO 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. THEREHAVE BEEN NO CHANGES IN THE METHODOLOGIES USED AT DECEMBER 31, 2010.

- COMMON STOCK, CORPORATE BONDS, AND U.S. GOVERNMENT SECURITIES. VALUED ATE THE CLOSING PRICE REPORTED ON THE ACTIVE MARKET ON WHICH THE INDIVIDUAL SECURITIES ARE TRADED.
- MUTUAL FUNDS. VALUED AT THE NET ASSET VALUE OF SHARES HELD BY THE PLAN AT YEAR-END.
- PARTICIPANT LOANS. VALUED AT AMORTIZED COST, WHICH APPROXIMATES FAIR VALUE.
- GUARANTEED INVESTEMENT CONTRACT. VALUED AT FAIR MARKET VALUE BY DISCOUNTING THE RELATED CHAS FLOWS BASED ON CURRENT YIELDS OF SIMILAR INSTRUMENTS WITH COMPARABLE DURATIONS, CONSIDERING THE CREDITWORTHINESS OF THE ISSUER.

THE PRECEDING METHODS DESCRIBED MAY PRODUCE A FAIR MARKET VALUE CALCULATION THAT MAY NOT BE INDICATIVE OF NET REALIZABLE VALUE OR REFLECTIVE OF FUTURE FAIR VALUES. FURTHERMORE, ALTHOUGH THE PLAN BELIEVS 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.

PLEASE REFER TO PAGE 11, "SUPPLEMENTAL SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES" FOR THE PLAN'S ASSETS HIERARCHY AT FAIR VAULE AS OF DECEMBER 31, 2010.

5. FUND MANAGEMENT

PLAN ASSETS HELD FOR INVESTMENT PURPOSES AND MANAGED BY HARTFORD LIFE INSURANCE COMPANY SERVING AS CUSTODIAN; ACCORDINGLY, PLAN CONTRIBUTIONS ARE DEPOSITED WITH HARTFORD LIFE INSURANCE COMPANY AND INVESTED IN ONE OR MORE FUNDS, AS DIRECTED BY EACH PARTICIPANT.

THE CUSTODIAN HAS CERTIFIED THE PLAN'S ASSETS HELD FOR INVESTMENTS PURPOSES AS OF DECEMBER 31, 2010 AND THE INTEREST, DIVIDENDS, AND NET APPRECIATION OR DEPRECIATION IN FAIR MARKET VALUE OF INVESTMENTS AS COMPLETE AND ACCURATE.

THE INVESTMENT OPTIONS, AS OF DECEMBER 31, 2010, WERE AS FOLLOWS:

AMERICAN FUNDS BOND FUND OF AMERICA - R2
AMERICAN FUNDS GROWTH FUND OF AMERICA - R2
AMERICAN FUNDS AMERICAN BALANCED FUND - R2
AMERICAN FUNDS MONEY MARKET FUND - R2

THE PLAN INVESTS IN VARIOUS INVESTMENT SECURITIES. INVESTMENT SECURITIES ARE EXPOSED TO VARIOUS RISKS SUCH AS INTEREST RATE, MARKET, AND CREDIT RISKS. DUE TO THE LEVEL OF RISK ASSOCIATES 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 CHANGESCOULD MATERIALLY AFFECT PATICIPANT'S ACCOUNT BALANCES AND THE AMOUNTS REPORTED IN THE STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS.

6. FORFEITURES

UPON TERMINATION OF A PARTICIPANT'S EMPLOYMENT, THE COMPANY'S NON-VESTED CONTRIBUTIONS ARE PLACED IN A SEPARATE ACCOUNT AND WILL BECOME A FORFEITURE WHEN THE PARTICIPANT INCURS A BREAK-IN-SERVICE, AS DEFINED. ALL FORFEITED AMOUNTS CAN BE USED TO REDUCE THE COMPANY'S DISCRETIONARY CONTRIBUTIONS OR PAY PLANS EXPENSES.

7. PLAN TERMINATION

THE PLAN HAS NO TERMINATION DATE, HOWEVER, THE COMPANY MAY TERMINATE, AMEND, MODIFY OR SUSPEND THE PLAN AT ANY TIME IT MAY DEEM ADVISABLE. UPON ANY FULL OR PARTIAL TERMINATION OF THE PLAN OR UPON COMPLETE DISCONTINUANCE OF CONTRIBUTIONS BY PARTICIPANTS AND THE EMPLOYER, ALL OF THE AMOUNTS CREDITED TO PARTICIPANT'S ACCOUNTS WILL IMMEDIATELY BECOME 100% VESTED.

8. TAX STATUS

THE PLAN ADMINISTRATOR BELIEVES THAT THE PLAN IS DESIGNED AND IS BEING OPERATED IN COMPLIANCE WITH THE APPLICABLE REQUIREMENTS OF ERISA AND THE INTERNAL REVENUE CODE AND THEREFORE FULFILLS THE CRITERIA FOR EXEMPTION FROM FEDERAL AND STATE INCOME TAXES.

9. RECONCILIATION OF FINANCIAL STATEMENTS TO FEDERAL FORM 5500

THERE ARE NO DIFFERENCES BETWEEN THE FINANCIAL STATEMENTS AND FEDERAL FORM 5500 AS OF DECEMBER 31, 2010.

X0XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
X

EMPLOYEE PENSION PLAN

AS ADOPTED BY AT HOME SOLUTIONS, LLC

SUPPLEMENTAL SCHEDULE OF PLAN'S ASSETS HELD FOR INVESTMENT PURPOSES,
HELD BY THE CUSTODIAN,
AMERICAN FUNDS RETIREMENT RESOURCES,
AND INCLUDED IN THEIR TRUST REPORT

AS OF DECEMBER 31, 2010

SEE ACCOMPANYING INDEPENDENT AUDITOR'S REPORT AND NOTES TO FINANCIAL STATEMENTS

DESCRIPTION OF INVESTMENT	FAIR MARKET VALUE	SHARES/UNITS [ROUNDED]
LEVEL 1 [MUTUAL FUNDS]		
AMERICAN FUNDS BOND FUND OF AMERICA - R2	$ 5,394	443
AMERICAN FUNDS GROWTH FUND OF AMERICA - R2	3,729	125
AMERICAN FUNDS AMERICAN BALANCED FUND - R2	4,861	272
AMERICAN FUNDS MONEY MARKET FUND - R2	68,112	68,112
TOTAL LEVEL 1 [MUTUAL FUNDS]	**82,096**	
LEVEL 2 [COLLECTIVE INVESTMENT TRUST]		
	-	
LEVEL 3 [PARTICIPANTS LOANS]		
PARTICIPANTS LOANS	-	N/A
INVESTMENTS, AT FAIR MARKET VALUE	$ 82,096	

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

At Home Solutions, LLC Employees Pension Plan

Employer Identification Number

20-1699013

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
	American Funds	GFA-R2		3,729
	American Funds	BFA-R2		5,395
	American Funds	AMBAL-R2		4,861
	American Funds	MMF-R2		68,112