Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210	0-0110 0-0089	
Department of the Treasury Internal Revenue Service	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).			
Department of Labor Employee Benefits Security Administration	<ul> <li>Complete all entries in accordance with the instructions to the Form 5500.</li> </ul>	2010		
Pension Benefit Guaranty Corporation		This Form is Open to Pub Inspection	lic	
Part I Annual Report Ider	tification Information			
For calendar plan year 2010 or fiscal	plan year beginning 01/01/2010 and ending 12/31/2	2010		
A This return/report is for:	a multiemployer plan; a multiple-employer plan; or			
	a single-employer plan; a DFE (specify)			
<b>B</b> This return/report is:	the first return/report; the final return/report;			
	an amended return/report; a short plan year return/report (less t	amended return/report; a short plan year return/report (less than 12 months).		
<b>C</b> If the plan is a collectively-bargain	ed plan, check here			
<b>D</b> Check box if filing under:	Form 5558; automatic extension;	the DFVC program;		
	special extension (enter description)			
Part II Basic Plan Inform	nation—enter all requested information			
<b>1a</b> Name of plan TESSY PLASTICS 401(K) PROFIT S		1b Three-digit plan number (PN) ▶	001	
		1c Effective date of plan 01/01/1995	1	
2a Plan sponsor's name and addres (Address should include room or s TESSY PLASTICS CORPORATION	s (employer, if for a single-employer plan) suite no.)	2b Employer Identification Number (EIN) 16-1009788	วท	
		<b>2c</b> Sponsor's telephone number 315-689-3924		
488 RTE 5 WEST ELBRIDGE, NY 13060	488 RTE 5 WEST ELBRIDGE, NY 13060	<b>2d</b> Business code (see instructions) 326100		

#### 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.	11/14/2011	ED PIETRUNIAK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

	Plan administrator's name and address (if same as plan sponsor, enter "Same") SSY PLASTICS CORPORATION		ministrator's EIN 1009788
488	B RTE 5 WEST BRIDGE, NY 13060	3c Adr	ministrator's telephone mber 5-689-3924
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 the plan number from the last return/report:	and	4b EIN
а	Sponsor's name		<b>4c</b> PN
5	Total number of participants at the beginning of the plan year	5	810
6	Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		1
а	Active participants	6a	921
b	Retired or separated participants receiving benefits	6b	0
с	Other retired or separated participants entitled to future benefits	6c	54
d	Subtotal. Add lines <b>6a</b> , <b>6b</b> , and <b>6c</b>	6d	975
е	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	3
f	Total. Add lines <b>6d</b> and <b>6e</b>	6f	978
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	385
	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	

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Form 5500 (2010)

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

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

9a	<b>9a</b> Plan funding arrangement (check all that apply)			<b>9b</b> Plan benefit arrangement (check all that apply)			
	(1)		Insurance		(1)		Insurance
	(2)		Code section 412(e)(3) insurance contracts		(2)		Code section 412(e)(3) insurance contracts
	(3)	×	Trust		(3)	Х	Trust
	(4)		General assets of the sponsor		(4)		General assets of the sponsor
10	Check	all ap	pplicable boxes in 10a and 10b to indicate which schedules are a	ttache	ed, and, wh	nere	e indicated, enter the number attached. (See instructions)
	Donaio	n 60	hadulaa	h	Conoral	Sah	adulaa
а	Pensio	n Sc	hedules	b	General	Sch	
а	Pensio (1)	on Sc X	hedules R (Retirement Plan Information)	b	General (1)	Sch X	H (Financial Information)
а		on Sc		b		Sch X	
а	(1)	on Sc	<ul> <li>R (Retirement Plan Information)</li> <li>MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan</li> </ul>	b	(1)	Sch	H (Financial Information)
а	(1)	on Sc	<ul><li>R (Retirement Plan Information)</li><li>MB (Multiemployer Defined Benefit Plan and Certain Money</li></ul>	b	(1) (2)	Sch ×	<ul><li>H (Financial Information)</li><li>I (Financial Information – Small Plan)</li></ul>
а	(1)	n Sc	<ul> <li>R (Retirement Plan Information)</li> <li>MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan</li> </ul>	b	(1) (2) (3)	Sch × ×	<ul> <li>H (Financial Information)</li> <li>I (Financial Information – Small Plan)</li> <li>A (Insurance Information)</li> </ul>

(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed unc Retirement Income Security			2010
Internal Revenue Service Department of Labor				ZUIU
		Act of 1974 (ERISA).		
Pension Benefit Guaranty Corporation	File as an attachment	nt to Form 5500.	This F	orm is Open to Public Inspection.
For calendar plan year 2010 or fiscal plan	n year beginning 01/01/2010	and ending 12/3	1/2010	
A Name of plan TESSY PLASTICS 401(K) PROFIT SHA		B Three-digit plan number (PN)	►	001
C Plan sponsor's name as shown on line TESSY PLASTICS CORPORATION	e 2a of Form 5500	D Employer Identifica 16-1009788	tion Number (	(EIN)
Part I Service Provider Infor	rmation (see instructions)			
or more in total compensation (i.e., mo plan during the plan year. If a person	dance with the instructions, to report the info oney or anything else of monetary value) in received <b>only</b> eligible indirect compensation include that person when completing the rem	connection with services rendered to n for which the plan received the rec	o the plan or	the person's position with the
<ul> <li>a Check "Yes" or "No" to indicate whether indirect compensation for which the planet.</li> <li>b If you answered line 1a "Yes," enter the second se</li></ul>	er you are excluding a person from the remain an received the required disclosures (see in the name and EIN or address of each person sation. Complete as many entries as neede	ainder of this Part because they reconstructions for definitions and condition providing the required disclosures	ons)	Yes No
(b) Enter nam	ne and EIN or address of person who provid	led you disclosures on eligible indire	ct compensa	tion
FID.INV.INST.OPS.CO.				
04-2647786				
(b) Enter nan	ne and EIN or address of person who provid	ded you disclosure on eligible indired	t compensati	ion
(b) Enter nam	e and EIN or address of person who provid	ed you disclosures on eligible indire	ct compensat	tion
(b) Enter nam	e and EIN or address of person who provid	ed you disclosures on eligible indire	ct compensat	tion

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500

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

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

#### Page 3

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)		
FIDELITY	INVESTMENTS INSTI	TUTIONAL				
04-264778	6					
<b>(b)</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?
64 37 65 60	RECORDKEEPER	7551	Yes 🕅 No 🗌	Yes 🕅 No 🗌	0	Yes X No
		(	(a) Enter name and EIN or	address (see instructions)		
<b>(b)</b> Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes 🗌 No 🗍	Yes No		Yes No
		(	(a) Enter name and EIN or	address (see instructions)		

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

(a) Enter name and EIN or address (see instructions)						
	1 .		· · ·			<i>"</i> )
(b) Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes No	Yes No		Yes 🗌 No 🗌
		(	a) Enter name and EIN or	address (see instructions)		
<b>(b)</b> Service Code(s)	(C) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes 🗌 No 🗍	Yes 🗌 No 🗌		Yes 🗌 No 🗍
		(	a) Enter name and EIN or	address (see instructions)		
<b>(b)</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

Page <b>5-</b>	1
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#### 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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine for or the amount of	compensation, including any e the service provider's eligibility the indirect compensation.
ABF LG CAP VAL INV - BOSTON FINANCI	0.40%	
04-2526037		
(a) Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
ALLNZ NFJ SMCPVAL AD - BOSTON FINAN	0.35%	
04-2526037		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
ARTISAN MID CAP VAL - BOSTON FINANC	0.40%	
04-2526037		

Page <b>5-</b> 2	
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#### 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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine for or the amount of	compensation, including any e the service provider's eligibility the indirect compensation.
NB INTL FUND TRUST - STATE STREET B ONE LINCOLN STREET BOSTON, MA 02111	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(C) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
OPPHMR DEV MKTS A - P.O. BOX 5270 OPPENHEIMERFUND COLORADO, CO 80217	0.45%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes	(C) Enter amount of indirect
FIDELITY INVESTMENTS INSTITUTIONAL	(see instructions)	compensation 0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
RAINIER SM/MID CAP - US BANCORP FUN	0.35%	
39-0281260		

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#### 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	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine for or the amount of t	compensation, including any the service provider's eligibility he indirect compensation.	
WFA SM CO VALUE ADM - BOSTON FINANC	0.35%		
04-2526037			
(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, includi formula used to determine the service provider's 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 of	compensation, including any	
		the service provider's eligibility he indirect compensation.	

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Part II Service Providers Who Fail or Refuse to Provide Information						
<b>4</b> Provide, to the extent possible, the following information for ea this Schedule.	ch service provide	r who failed or refused to provide the information necessary to complete				
(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	(C) Describe the information that the service provider failed or refused to provide				
	Code(s)					
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service	(C) Describe the information that the service provider failed or refused to provide				
	Code(s)					
(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	(b) Nature of	(C) Describe the information that the service provider failed or refused to				
instructions)	Code(s)	provide				

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Part III Termination Information on Accountants and Enrolled Actuaries (see instructions) (complete as many entries as needed)						
<b>a</b> Nan		<b>b</b> EIN:				
	sition:					
	dress:	e Telephone:				
Explana	ition:					
<b>a</b> Nan	me:	<b>b</b> EIN:				
<b>c</b> Pos	sition:					
<b>d</b> Add	dress:	e Telephone:				
Explana	ition:					
<b>a</b> Nan	me.	<b>b</b> EIN:				
	sition:					
	dress:	e Telephone:				
Explana	ition:					
a Nan		b EIN;				
	sition:	C Tolophono:				
u Add	dress:	e Telephone:				

Explanation:

а	Name:	<b>b</b> EIN;
С	Position:	
d	Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500)	DFE/P	articipating Plan Info	rmation	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service		s required to be filed under section 10 ement Income Security Act of 1974 (I	2010	
Department of Labor Employee Benefits Security Administration		File as an attachment to Form 55	500.	This Form is Open to Public Inspection.
For calendar plan year 2010 or fiscal p	olan year beginning	01/01/2010	and ending 12/3	31/2010
A Name of plan TESSY PLASTICS 401(K) PROFIT SH	ARING PLAN		B Three-digit plan numb	er (PN)
C Plan or DFE sponsor's name as sho TESSY PLASTICS CORPORATION	own on line 2a of Form	n 5500	D Employer lo 16-100978	dentification Number (EIN) 8
	entries as needed	Ts, PSAs, and 103-12 IEs (to to report all interests in DFEs		ans and DFEs)
<b>b</b> Name of sponsor of entity listed in		NAGEMENT TRUST COMPANY		
<b>C</b> EIN-PN 04-3022712-024	<b>d</b> Entity C code	e Dollar value of interest in MTI/ 103-12 IE at end of year (see		1201162
<b>a</b> Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in				
C EIN-PN	<b>d</b> Entity code	e Dollar value of interest in MTI/ 103-12 IE at end of year (see		
a Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in	(a):	-		
C EIN-PN	<b>d</b> Entity code	e Dollar value of interest in MTI/ 103-12 IE at end of year (see		
a Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in	(a):			
C EIN-PN	<b>d</b> Entity code	Dollar value of interest in MTI/ 103-12 IE at end of year (see		
a Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in	. ,	I		
C EIN-PN	<b>d</b> Entity code	e Dollar value of interest in MTI/ 103-12 IE at end of year (see		
a Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in	(a):			
C EIN-PN	<b>d</b> Entity code	e Dollar value of interest in MTI/ 103-12 IE at end of year (see		
a Name of MTIA, CCT, PSA, or 103-	12 IE:			
<b>b</b> Name of sponsor of entity listed in	(a):			
C EIN-PN	d Entity code	Dollar value of interest in MTI/ 103-12 IE at end of year (see		Schedule D (Form 5500) 2010

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Schedule D (Form 5500) 2	2010	Page <b>2-</b>
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	<ul> <li>Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</li> </ul>
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	<ul> <li>Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</li> </ul>
a Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	<ul> <li>Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</li> </ul>
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	d Entity code	<ul> <li>Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</li> </ul>
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103	-12 IE:	
<b>b</b> Name of sponsor of entity listed in	n (a):	
C EIN-PN	<b>d</b> Entity code	<ul> <li>Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</li> </ul>

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Ρ	Part II	Information on Participating Plans (to be completed by DFEs) (Complete as many entries as needed to report all participating plans)		
а	Plan na	me		
b	Name o plan spo		С	EIN-PN
а	Plan na	me		
b	Name o plan spo		С	EIN-PN
а	Plan na	me		
b	Name o plan spo		C	EIN-PN
а	Plan na	me		
b	Name o plan spo		C	EIN-PN
а	Plan na	me		
b	Name o plan spo		С	EIN-PN
	Plan na			
b	Name o plan spo		С	EIN-PN
	Plan na			
b	Name o plan spo		С	EIN-PN
а	Plan na	me		
b	Name o plan spo		С	EIN-PN
	Plan na			
b	Name o plan spo		С	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
а	Plan na	me		
b	Name o plan spo		С	EIN-PN

SCHEDULE H	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).						OMB No. 121	0-0110
(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor						2010		
Employee Benefits Security Administration Pension Benefit Guaranty Corporation	File as an attachm	ent to Form	5500.			This	Form is Ope Inspecti	
For calendar plan year 2010 or fiscal pl	an year beginning 01/01/2010		and	ending	g 12/31/2	010	mepeen	
A Name of plan TESSY PLASTICS 401(K) PROFIT SHA	ARING PLAN			В	Three-digit plan numb		•	001
							·	
C Plan sponsor's name as shown on li TESSY PLASTICS CORPORATION	ne 2a of Form 5500				-mpioyer id 6-1009788	entificati	ion Number (	EIN)
Part I Asset and Liability S	Statement							
1 Current value of plan assets and lia the value of the plan's interest in a c lines 1c(9) through 1c(14). Do not e benefit at a future date. <b>Round off</b> and 1i. CCTs, PSAs, and 103-12 IE	bilities at the beginning and end of the plan commingled fund containing the assets of m nter the value of that portion of an insuranc <b>amounts to the nearest dollar.</b> MTIAs, Co s also do not complete lines 1d and 1e. See	hore than one e contract wh CTs, PSAs, a	plan on a iich guarar nd 103-12	line-by	/-line basis during this p	unless tl blan yea	he value is re r, to pay a sp	eportable on becific dollar
As	sets		<b>(a)</b> B	eginni	ng of Year		<b>(b)</b> End	d of Year
<b>a</b> Total noninterest-bearing cash		1a						
<b>b</b> Receivables (less allowance for dou	ubtful accounts):							
(1) Employer contributions		1b(1)						
(2) Participant contributions		1b(2)						
(3) Other		1b(3)						
	money market accounts & certificates	1c(1)						
(2) U.S. Government securities		1c(2)						
(3) Corporate debt instruments (of	ther than employer securities):							
		1c(3)(A)						
		1c(3)(B)						
(4) Corporate stocks (other than e								
		1c(4)(A)						
		1c(4)(B)						
	ests	1c(5)						
	ver real property)	1c(6)						
	ts)	1c(7)						
		1c(8)			451	193		451114
	ollective trusts	1c(9)			1107	511		1201162
	arate accounts	1c(10)						
	t investment accounts	1c(11)						
. ,	estment entities	1c(12)						
(13) Value of interest in registered i funds)	nvestment companies (e.g., mutual	1c(13)			11843	618		14806761
	ce company general account (unallocated	1c(14)						
(15) Other		1c(15)						

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500

Schedule H (	Form	5500	) 2010

1d	Employer-related investments:	-	(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	13402322	16459037
	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			
I	Net assets (subtract line 1k from line 1f)	11	13402322	16459037

## 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>(b)</b> Total
а	Contributions:			
	(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	424114	
	(B) Participants	2a(1)(B)	1004157	
	(C) Others (including rollovers)	2a(1)(C)	105616	
	(2) Noncash contributions	_ 2a(2)		
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	. 2a(3)		1533887
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)	27631	
	(F) Other	_ 2b(1)(F)		
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		27631
	(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)	243130	
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		243130
	(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)		44985
	(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)		1626760
С	Other income	2c		
d	Total income. Add all <b>income</b> amounts in column (b) and enter total	2d		3476393
	Expenses			
е	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	367962	
	(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)		367962
f		2f		41522
g	Certain deemed distributions of participant loans (see instructions)	2g		2003
h	Interest expense	2h		
i	Administrative expenses: (1) Professional fees	2i(1)		
	(2) Contract administrator fees	2i(2)		
	<ul><li>(3) Investment advisory and management fees</li></ul>	2i(3)	565	
	(4) Other	2i(4)	7626	
	<ul><li>(5) Total administrative expenses. Add lines 2i(1) through (4)</li></ul>	2i(5)		8191
i	Total expenses. Add all <b>expense</b> amounts in column (b) and enter total	2j		419678
,	Net Income and Reconciliation	-		
k	Net income (loss). Subtract line <b>2j</b> from line <b>2d</b>	2k		3056715
ī	Transfers of assets:			
•	(1) To this plan	21(1)		
	(2) From this plan	21(2)		
		.,		
Pa	art III Accountant's Opinion			
	Complete lines 3a through 3c if the opinion of an independent qualified public ac attached.	ccountant is	attached to this Form 5500. Comp	lete line 3d if an opinion is not
a	The attached opinion of an independent qualified public accountant for this plan	is (see instr	ructions):	
	(1) Unqualified (2) Qualified (3) 🛛 Disclaimer (4)	Adverse		
b	Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-	8 and/or 10	3-12(d)?	X Yes No
C	Enter the name and EIN of the accountant (or accounting firm) below:			
	(1) Name: FUST CHARLES CHAMBERS		(2) EIN: 16-1226221	
d .	The opinion of an independent qualified public accountant is <b>not attached</b> becau (1) This form is filed for a CCT, PSA, or MTIA. (2) It will be attach		ext Form 5500 pursuant to 29 CFR	2520.104-50.

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Ра	t IV Compliance Questions				
4	CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.	4f, 4g,	4h, 4k, 4	m, 4n, or 5.	
	During the plan year:		Yes	No	Amount
а	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	Х		85
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	
С	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		×	
е	Was this plan covered by a fidelity bond?	4e	Х		1000000
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	Х		
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	
I	Has the plan failed to provide any benefit when due under the plan?	41		Х	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		Х	
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	s 🗙 No	Amount:	
5b	If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s) transferred. (See instructions.)	, ident	ify the pla	n(s) to which a	ssets or liabilities were
	5b(1) Name of plan(s)			5b(2) FIN(s)	5b(3) PN(s)

5b(1) Name of plan(s)	<b>5b(2)</b> EIN(s)	5b(3) PN(s)
		1

	SCH	IEDULE R	R	etirement Pla	n Informa	tion			ON	1B No. 12	10-0110	)	
(Form 5500) Department of the Treasury This schedule is required to be filed under section 104 and 4065 of the								2010					
Internal Revenue Service Employee Retirement Income Security Act of 1974 (ERISA) and section													
E	mployee Ben	artment of Labor efits Security Administration		<ul> <li>File as an attachn</li> </ul>	,	,			This Fo	m is Op Inspect		Public	;
For		efit Guaranty Corporation Dan year 2010 or fiscal p	l plan year beginning	01/01/2010		and endir	ng 12/	/31/2(	010				
AN	lame of pla					В	0	•	er •	(	001		
		or's name as shown on I ICS CORPORATION	line 2a of Form 5500	)		D	Employ 16-10		entificatio	on Numb	er (EIN	)	
Ра	rt I D	istributions											
All	reference	s to distributions relate	e only to payments	of benefits during the	e plan year.								
1		ue of distributions paid ir ns						1					0
2		EIN(s) of payor(s) who ho paid the greatest doll			ipants or benefici	aries during t	he year (if	fmor	e than tw	o, enter	EINs o	f the t	iWO
	EIN(s):	04-6568107						_					
	Profit-sh	aring plans, ESOPs, a	nd stock bonus pla	ans, skip line 3.									
3		of participants (living or o	,		•	• •		3					
Pa	art II	Funding Informat ERISA section 302, skip		ot subject to the minim	um funding requi	ements of se	ction of 47	~	the Inter	nal Reve	enue Co	ode o	ſ
4	Is the pla	n administrator making an	n election under Code	e section 412(d)(2) or ER	ISA section 302(d	)(2)?			Yes	1	No		N/A
	If the pla	n is a defined benefit p	plan, go to line 8.										
5		er of the minimum fundin , see instructions and er				e: Month _		Da	У	Y	′ear		
	-	mpleted line 5, completed						is sc	hedule.				
6	-	the minimum required o						6a					
		the amount contributed						6b					
		act the amount in line 6k r a minus sign to the left						6c					
	lf you co	mpleted line 6c, skip li	ines 8 and 9.										
7	Will the r	ninimum funding amount	t reported on line 6c	be met by the funding	deadline?				Yes	1	No		N/A
8	automati	ge in actuarial cost meth c approval for the chang change?	je or a class ruling le	etter, does the plan spor	nsor or plan adm	nistrator agre	e		Yes	1	No		N/A
Pa	art III	Amendments											
9		a defined benefit pensior	n plan, were any ame	endments adopted duri	ng this plan								
-	year that	increased or decreased If no, check the "No" box	the value of benefit	s? If yes, check the app	propriate	Increase		Decre	ase	Botl	n	<b>N</b>	lo
Pa	rt IV	ESOPs (see instr skip this Part.	ructions). If this is no	ot a plan described unde	er Section 409(a)	or 4975(e)(7	) of the Int	terna	Revenu	e Code,			
10	Were un	allocated employer secu	urities or proceeds fro	om the sale of unalloca	ted securities use	ed to repay ar	iy exempt	loan	?	[	Yes		No
11	<b>a</b> Doe	es the ESOP hold any pr	referred stock?								Yes		No
		e ESOP has an outstand e instructions for definition	<b>v</b> ,							<u></u> [	Yes		No
12		ESOP hold any stock th									Yes		No
For	Paperwo	rk Reduction Act Notic	e and OMB Contro	I Numbers, see the in	structions for F	orm 5500.			Sch	edule R	(Form	5500	) 2010

		-	-,		-	-
v	.(	)9	92	3	08	.1

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Pa	rt V	Ad	ditional Inforn	nation for N	lultiemplo	oyer	<b>Defined Benef</b>	it Pe	nsion Pl	ans	
13							nore than 5% of tota o report all applicab			o the plan during the plan year (measured in	
	а	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 ( <i>If more than one rate applies, check this box</i> and see <i>instructions regarding required attachment. Otherwise,</i> <i>complete items 13e(1) and 13e(2).</i> (1) Contribution rate (in dollars and cents) (2) Base unit measure: Hourly Weekly Unit of production Other (specify):									
	_	( )		, L	,		- · · · ·				
	a		tributing employe	r							
	b	EIN					C Dollar amour				
	d		0 0 0	•			tributes under more e, enter the applicat			tive bargaining agreement, check box	
	e	<i>complete ite</i> (1) Contri	ms 13e(1) and 13 oution rate (in dolla	e(2).)	ne rate appli	es, ch	neck this box and	see ii	_	regarding required attachment. Otherwise,	
	а	Name of cor	tributing employe	r							
	b	EIN					C Dollar amour	t cont	tributed by	employer	
	d		0 0 0				tributes under more e, enter the applical			tive bargaining agreement, check box	
	e	<i>complete ite</i> (1) Contri	ms 13e(1) and 13 oution rate (in dolla	e(2).)	ne rate appli	es, ch	neck this box and	see ii	_	regarding required attachment. Otherwise,	
	а	Name of cor	tributing employe	r							
	b	EIN					C Dollar amour	t con	tributed by	employer	
	d		0 0 0	•				than	one collec	tive bargaining agreement, check box	
_	e	<i>complete ite</i> (1) Contri	ms 13e(1) and 13 oution rate (in dolla	e(2).)	ne rate appli	es, ch	neck this box and	see ii	Other (s	regarding required attachment. Otherwise,	
	а	Name of cor	tributing employe	r							
	b	EIN					C Dollar amour	t con	tributed by	employer	
	d		0 0 0	•			tributes under more e, enter the applicat			tive bargaining agreement, check box	
	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):									
	а	Name of cor	tributing employe	r							
	b	EIN	· ·				<b>c</b> Dollar amour	t con	tributed by	employer	
	d						tributes under more e, enter the applical			tive bargaining agreement, check box	
	e	<i>complete ite</i> (1) Contri	ms 13e(1) and 13 oution rate (in dolla	e(2).)	ne rate appli	es, ch	neck this box and	see ii	nstructions	regarding required attachment. Otherwise,	

14	Enter the number of participants on whose behalf no co	ontributions were made by an	employer as an employer of the
----	--	------------------------------	--------------------------------

	participant for:	
	a The current year	14a
	<b>b</b> The plan year immediately preceding the current plan year	14b
	<b>C</b> 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 ma employer contribution during the current plan year to:	ake an
	<b>a</b> The corresponding number for the plan year immediately preceding the current plan year	15a
	<b>b</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>b</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, o supplemental information to be included as an attachment.	
Pa	art VI Additional Information for Single-Employer and Multiemployer Defined Benef	fit 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 and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see i information to be included as an attachment	instructions regarding supplemental
19	If the total number of participants is 1,000 or more, complete items (a) through (c)	
	<ul> <li>a Enter the percentage of plan assets held as: Stock:% Investment-Grade Debt:% High-Yield Debt:% Real Estate:</li> <li>b Provide the average duration of the combined investment-grade and high-yield debt:</li> </ul>	% Other:%
	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):	

Financial Statements and Supplemental Schedule

December 31, 2009 and 2008

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## Index

		Page
Independent Auditor's Report		
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Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2009 and 2008		2
Notes to Financial Statements		3 - 11
	Schedule	
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) December 31, 2009	1	12 - 13

Fust Charles Chambers LLP

## INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator Tessy Plastics 401(k) Profit Sharing Plan:

We were engaged to audit the financial statements of Tessy Plastics 401(k) Profit Sharing Plan as of December 31, 2009 and 2008, and for the years then ended and the supplemental schedule as of December 31, 2009, as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in note 5, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Furt Charles Chambers ##P

Fust Charles Chambers LLP

Syracuse, New York August 2, 2010

## Statements of Net Assets Available for Benefits

December 31, 2009 and 2008

		<u>2009</u>	2008
Assets: Investments, at fair value	\$	13,402,322	9,979,601
	-		
Receivables: Participant contributions		34,688	2,039
Employer contribution		10,487	868
Total receivables	-	45,175	2,907
Net assets available for benefits at fair value		13,447,497	9,982,508
Adjustment from fair value to contract value for interest in common/collective trust relating to fully benefit-responsive			
investment contract		20,594	73,047
Net assets available for benefits	\$	13,468,091	10,055,555

See accompanying notes to financial statements.

## Statements of Changes in Net Assets Available for Benefits

## Years ended December 31, 2009 and 2008

Additions:	2009	2008
Additions to net assets attributed to: Investment income:		
Net appreciation in fair value of investments Interest and dividends	\$ 2,517,277 217,449	276,824
interest and dividends		
	2,734,726	276,824
Contributions: Participant Employer Participant rollovers	918,121 390,399 4,080	949,629 410,978 341
	1,312,600	1,360,948
Total additions	4,047,326	1,637,772
Deductions:		
Deductions from net assets attributed to: Net depreciation in fair value of investments Benefits paid to participants Administrative expenses	627,019 7,771	5,292,102 633,039 6,365
Total deductions	634,790	5,931,506
Net increase (decrease)	3,412,536	(4,293,734)
Net assets available for benefits: Beginning of year	10,055,555	14,349,289
End of year	\$	10,055,555

See accompanying notes to financial statements.

#### Notes to Financial Statements

December 31, 2009 and 2008

### (1) Description of the Plan

The following description of the Tessy Plastics 401(k) Profit Sharing Plan (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's Provisions.

## (a) General

The Plan is a defined contribution plan covering all full-time employees of Tessy Plastics Corp. and Tessy Plastics LLC (collectively, the Company). There are no age or service requirements to participate in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

## (b) Contributions

Each year, participants may contribute a percentage of their pre-tax annual compensation as defined by the Plan, up to the maximum allowable under the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit and defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers a common/collective trust and twenty-three mutual funds as investment options for participants. The Company may elect to make a discretionary matching contribution to the Plan on behalf of each participant equal to the percent declared for the contribution period as determined by the board of directors of the Company. Contributions are subject to certain limitations.

#### (c) Participant Accounts

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

## Notes to Financial Statements

## (1) Description of the Plan, Continued

## (d) Vesting

Participants are vested immediately in their contributions plus actual earnings thereon and in the Company's matching and discretionary contributions plus actual earnings thereon.

## (e) Participant Loans

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 the value of their vested balance. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 8.75% which are commensurate with local prevailing rates as determined by the Plan Administrator. Participant loans are repayable over one to five years unless for the purchase of a primary residence, in which case, the maximum duration of the loan may be up to ten years. Loan repayments are generally made through after-tax payroll deductions on at least a quarterly basis.

## (f) Payment of Benefits

Upon termination of service, a participant will receive a lump-sum distribution equal to the value of the participant's vested balance. A participant may, however, upon the attainment of age 59 ½, elect to receive a pre-retirement distribution while remaining in the service of the Company. Participants with balances that exceed \$5,000 may defer receiving lump sum payments upon termination until a distribution is required to be made.

## (2) Summary of Significant Accounting Policies

## (a) Basis of Accounting

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

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statement of net assets available for benefits presents the fair value of the investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

#### Notes to Financial Statements

#### (2) Summary of Significant Accounting Policies, Continued

#### (b) Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Actual results could differ from those estimates. The current economic environment has increased the degree of uncertainty inherent in those estimates and assumptions.

#### (c) 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 4 for discussion of fair value measurements.

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

#### (d) Payment of Benefits

Benefits are recorded when paid.

#### (e) Plan Expenses

Certain investment management fees are netted with investment income. Participants who take a loan from the Plan incur a one-time fee for establishing the loan as well as an annual loan maintenance fee. Participants who withdraw from the Plan incur a processing fee for each distribution taken. These fees are charged directly to the individual participant's accounts. All other administrative expenses are paid by the Company.

#### (f) Reclassifications

Certain amounts in the 2008 financial statements have been reclassified to conform to the 2009 presentation.

#### (g) Subsequent Events

The Plan has evaluated subsequent events through August 2, 2010, the date the financial statements were available to be issued.

#### Notes to Financial Statements

#### (3) Investments

The following presents investments that represent 5% or more of the Plan's net assets, at December 31:

	2009		20	08
	Number of	Fair	Number of	Fair
	shares/units	value	shares/units	value
Fidelity Managed Income Portfolio				
Common/Collective Trust	1,128,105	\$ 1,107,511	1,427,231	\$ 1,354,183
Fidelity Balanced Fund	58,773	961,520	62,541	820,543
Fidelity International Discovery Fund	85,026	2,580,536	76,495	1,807,574
Fidelity Capital Appreciation Fund	70,016	1,500,446	62,603	984,745
Spartan US Equity Index Fund	57,135	2,252,844	60,045	1,915,424
Fidelity Freedom Fund 2020	50,191	629,894	55,835	561,146
Fidelity Emerging Markets	30,684	693,771		

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

	2009	2008
Mutual funds Common/collective trust	\$ 2,494,897 22,380	(5,334,333) 42,231
	\$ 2,517,277	(5,292,102)

#### (4) Fair Value Measurements

Financial Accounting Standards Board (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.

#### Notes to Financial Statements

## (4) Fair Value Measurements, Continued

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2008.

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

*Common/collective trust:* Indexed to major securities indices. Pricing is performed daily based on changes in the related index. The trust is not exchange-traded and therefore they have been classified as level 2 investments.

Participant loans: Valued at amortized cost which approximates fair value.

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

### Notes to Financial Statements

## (4) Fair Value Measurements, Continued

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2009 and 2008:

		Assets at fair value as of December 31, 2009						
		Level 1	Total					
Mutual funds Common/collective	\$	11,843,618	-	-	11,843,618			
trust		-	1,107,511		1,107,511			
Participant loans			-	451,193	451,193			
Total assets at fair value	\$ _	11,843,618	1,107,511	451,193	13,402,322			
		Assets at fair value as of December 31, 2008						
		Level 1	Level 2	Level 3	Total			
Mutual funds Common/collective	\$	8,279,199	-	-	8,279,199			
trust		-	1,354,183	-	1,354,183			
Participant loans		7 <b></b> .	-	346,219	346,219			
•								

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, 2009:

	Participan <u>loans</u>		
Balance, beginning of year	\$	346,219	
Interest income		27,736	
Purchases, sales, issuances and settlements (net)		77,238	
Balance, end of year	\$	451,193	

#### Notes to Financial Statements

#### (5) Information Certified by the Plan's Trustee

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

	December 31,		
		2009	2008
Investments: Mutual funds	\$	11,843,618	8,279,199
Participant loans	8	451,193	346,219
Fidelity Managed Income Portfolio Common/Collective Trust at fair value Adjustment from fair value to contract value		1,107,511 20,594	1,354,183 73,047
Fidelity Managed Income Portfolio Common/Collective Trust at contract value		1,128,105	1,427,230
	\$	13,422,916	10,052,648
			ended <u>ber 31,</u> <u>2008</u>
Investment income:			
Net appreciation (depreciation) in fair value of investments Interest and dividends	\$	2,517,277 217,449	(5,292,102) 276,824
	\$	2,734,726	(5,015,278)

All information in the supplemental schedule is presented solely upon those certifications.

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

#### Notes to Financial Statements

#### (6) Related-Party Transactions

Certain Plan investments were managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to \$7,771 and \$6,365 for the years ended December 31, 2009 and 2008, respectively.

#### (7) Plan Termination

Although it has not expressed any intent to do so, the Company has the right, under the Plan, to discontinue its contributions at any time, and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their account balance.

#### (8) Tax Status

The Internal Revenue Service has determined that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan utilizes a non-standardized prototype document. The IRS has issued an opinion letter to the prototype sponsor on August 7, 2001. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

## (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 statement of net assets available for benefits.

## Notes to Financial Statements

## (10) Reconciliation to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31 to Form 5500:

	<u>2009</u>	2008
Net assets available for benefits per the financial statements \$	13,468,091	10,055,555
Less: adjustment from fair value to contract value for fully benefit-responsive investment contracts Less: contributions receivable:	20,594	73,047
Employer	10,487	868
Participant	34,688	2,039
Net assets available for benefits per the Form 5500	3 13,402,322	9,979,601
The following is a reconciliation of investment income per the finended December 31, 2009 to Form 5500:	nancial staten	nents for the year
Investment income per the financial statements	\$	2,734,726

Investment income per the financial statements	2	2,134,126
Plus: change in adjustment from fair value to contract value for fully benefit-responsive investment contract	_	52,453
Total investment income per the Form 5500	\$	2,787,179

The following is a reconciliation of contributions made to the plan per the financial statements for the year ended December 31, 2009, to Form 5500:

	Participant	Employer	Participant rollovers	Total
Contributions per the financial statements	\$ 918,121	390,399	4,080	1,312,600
Plus: contributions receivable at December 31, 2008	2,039	868	-	2,907
Less: contributions receivable at December 31, 2009	(34,688)	(10,487)		(45,175)
Contributions per Form 5500	\$ 885,472	380,780	4,080	1,270,332

## Schedule 1

.

# **TESSY PLASTICS 401(k) PROFIT SHARING PLAN**

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

## Plan No. 001

## Employer Identification No. 15-0589628

## December 31, 2009

	(b)	(c)		(e)
	Identity of issue, borrower	Description of investment including maturity date,	(d)	Current
(a)	lessor or similar party	rate of interest, collateral, par or maturity value	Cost	value
1-1				
*	Fidelity Management Trust Company	American Beacon Large Cap Value Plan Ahead Class,	194119-01	
		20,643 shares	**	\$ 338,953
*	Fidelity Management Trust Company	Rainer Small/Mid Cap Portfolio, 16,017 shares	**	419,003
*	Fidelity Management Trust Company	Artisan Mid Cap Value, 22,251 shares	**	400,070
*	Fidelity Management Trust Company	Fidelity Emerging Markets, 30,684 shares	**	693,771
*	Fidelity Management Trust Company	Allianz NFJ Small Cap Value Adminstrative Class,		
	ridentij trianagement ridet company	10,830 shares	**	250,713
*	Fidelity Management Trust Company	Fidelity Balanced Fund, 58,773 shares	**	961,520
*	Fidelity Management Trust Company	Fidelity International Discovery Fund, 85,026 shares	**	2,580,536
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund, 70,016 shares	**	1,500,446
*	Fidelity Management Trust Company	Fidelity Small Cap Indep. Fund, 18,589 shares	**	258,765
*	Fidelity Management Trust Company	Fidelity Freedom 2010 Fund, 4,006 shares	**	50,120
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund, 50,191 shares	**	629,894
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund, 18,205 shares	**	225,554
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio Common/Collective		
25	Fluenty Management Trust Company	Trust, 1,128,105 units	**	1,107,511
*	Fidelity Management Trust Company	Spartan US Equity Index Fund, 57,135 shares	**	2,252,844
*	Fidelity Management Trust Company	Fidelity US Bond Index Fund, 43,143 shares	**	477,159
*		Fidelity Freedom 2040 Fund, 6,775 shares	**	48,509
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund, 5,762 shares	**	60,038
т +	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund, 45,576 shares	**	473,533
т +	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund, 13,831 shares	* *	141,905
不	Fidelity Management Trust Company	Fluenty Fleedon 2055 Fund, 15,651 shares		

### Schedule 1

# **TESSY PLASTICS 401(k) PROFIT SHARING PLAN**

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

### Plan No. 001

### Employer Identification No. 15-0589628

### December 31, 2009

<u>(a)</u>	(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) <u>Cost</u>	(e) Current <u>value</u>
*	Fidelity Management Trust Company	Fidelity Freedom 2000 Fund, 64 shares	**	724
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund, 2,826 shares	**	23,938
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund, 3,473 shares	**	28,998
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund, 2,479 shares	**	26,625
*	Participant loans	One to five year loans, bearing interest at 4.25% through 8.75%	**	451,193
	r articipait ioans			\$ 13,402,322

\* Party-in-interest as defined by ERISA
\*\* Costs are omitted for participant directed investments

See accompanying independent auditor's report.

Financial Statements and Supplemental Schedule

December 31, 2009 and 2008

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Fust Charles Chambers LLP

### INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator Tessy Plastics 401(k) Profit Sharing Plan:

We were engaged to audit the financial statements of Tessy Plastics 401(k) Profit Sharing Plan as of December 31, 2009 and 2008, and for the years then ended and the supplemental schedule as of December 31, 2009, as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in note 5, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Furt Charles Chambers ##P

Fust Charles Chambers LLP

Syracuse, New York August 2, 2010

### Statements of Net Assets Available for Benefits

December 31, 2009 and 2008

		<u>2009</u>	2008
Assets: Investments, at fair value	\$	13,402,322	9,979,601
	-		
Receivables: Participant contributions		34,688	2,039
Employer contribution		10,487	868
Total receivables	-	45,175	2,907
Net assets available for benefits at fair value		13,447,497	9,982,508
Adjustment from fair value to contract value for interest in common/collective trust relating to fully benefit-responsive			
investment contract		20,594	73,047
Net assets available for benefits	\$	13,468,091	10,055,555

See accompanying notes to financial statements.

## Statements of Changes in Net Assets Available for Benefits

## Years ended December 31, 2009 and 2008

Additions:	2009	2008
Additions to net assets attributed to: Investment income:		
Net appreciation in fair value of investments Interest and dividends	\$ 2,517,277 217,449	276,824
Interest and dividends		
	2,734,726	276,824
Contributions: Participant Employer Participant rollovers	918,121 390,399 4,080	949,629 410,978 341
	1,312,600	1,360,948
Total additions	4,047,326	1,637,772
Deductions:		
Deductions from net assets attributed to: Net depreciation in fair value of investments Benefits paid to participants Administrative expenses	627,019 7,771	5,292,102 633,039 6,365
Total deductions	634,790	5,931,506
Net increase (decrease)	3,412,536	(4,293,734)
Net assets available for benefits: Beginning of year	10,055,555	14,349,289
End of year	\$	10,055,555

See accompanying notes to financial statements.

#### Notes to Financial Statements

December 31, 2009 and 2008

### (1) Description of the Plan

The following description of the Tessy Plastics 401(k) Profit Sharing Plan (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's Provisions.

### (a) General

The Plan is a defined contribution plan covering all full-time employees of Tessy Plastics Corp. and Tessy Plastics LLC (collectively, the Company). There are no age or service requirements to participate in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

### (b) Contributions

Each year, participants may contribute a percentage of their pre-tax annual compensation as defined by the Plan, up to the maximum allowable under the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit and defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers a common/collective trust and twenty-three mutual funds as investment options for participants. The Company may elect to make a discretionary matching contribution to the Plan on behalf of each participant equal to the percent declared for the contribution period as determined by the board of directors of the Company. Contributions are subject to certain limitations.

#### (c) Participant Accounts

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

### Notes to Financial Statements

### (1) Description of the Plan, Continued

### (d) Vesting

Participants are vested immediately in their contributions plus actual earnings thereon and in the Company's matching and discretionary contributions plus actual earnings thereon.

### (e) Participant Loans

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 the value of their vested balance. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% to 8.75% which are commensurate with local prevailing rates as determined by the Plan Administrator. Participant loans are repayable over one to five years unless for the purchase of a primary residence, in which case, the maximum duration of the loan may be up to ten years. Loan repayments are generally made through after-tax payroll deductions on at least a quarterly basis.

### (f) Payment of Benefits

Upon termination of service, a participant will receive a lump-sum distribution equal to the value of the participant's vested balance. A participant may, however, upon the attainment of age 59 ½, elect to receive a pre-retirement distribution while remaining in the service of the Company. Participants with balances that exceed \$5,000 may defer receiving lump sum payments upon termination until a distribution is required to be made.

### (2) Summary of Significant Accounting Policies

### (a) Basis of Accounting

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

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statement of net assets available for benefits presents the fair value of the investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

#### Notes to Financial Statements

#### (2) Summary of Significant Accounting Policies, Continued

#### (b) Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Actual results could differ from those estimates. The current economic environment has increased the degree of uncertainty inherent in those estimates and assumptions.

#### (c) 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 4 for discussion of fair value measurements.

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

#### (d) Payment of Benefits

Benefits are recorded when paid.

#### (e) Plan Expenses

Certain investment management fees are netted with investment income. Participants who take a loan from the Plan incur a one-time fee for establishing the loan as well as an annual loan maintenance fee. Participants who withdraw from the Plan incur a processing fee for each distribution taken. These fees are charged directly to the individual participant's accounts. All other administrative expenses are paid by the Company.

#### (f) Reclassifications

Certain amounts in the 2008 financial statements have been reclassified to conform to the 2009 presentation.

#### (g) Subsequent Events

The Plan has evaluated subsequent events through August 2, 2010, the date the financial statements were available to be issued.

#### Notes to Financial Statements

#### (3) Investments

The following presents investments that represent 5% or more of the Plan's net assets, at December 31:

	2009		20	08
	Number of	Fair	Number of	Fair
	shares/units	value	shares/units	value
Fidelity Managed Income Portfolio				
Common/Collective Trust	1,128,105	\$ 1,107,511	1,427,231	\$ 1,354,183
Fidelity Balanced Fund	58,773	961,520	62,541	820,543
Fidelity International Discovery Fund	85,026	2,580,536	76,495	1,807,574
Fidelity Capital Appreciation Fund	70,016	1,500,446	62,603	984,745
Spartan US Equity Index Fund	57,135	2,252,844	60,045	1,915,424
Fidelity Freedom Fund 2020	50,191	629,894	55,835	561,146
Fidelity Emerging Markets	30,684	693,771		

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

	2009	2008
Mutual funds Common/collective trust	\$ 2,494,897 22,380	(5,334,333) 42,231
	\$ 2,517,277	(5,292,102)

#### (4) Fair Value Measurements

Financial Accounting Standards Board (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.

#### Notes to Financial Statements

### (4) Fair Value Measurements, Continued

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2009 and 2008.

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

*Common/collective trust:* Indexed to major securities indices. Pricing is performed daily based on changes in the related index. The trust is not exchange-traded and therefore they have been classified as level 2 investments.

Participant loans: Valued at amortized cost which approximates fair value.

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

### Notes to Financial Statements

### (4) Fair Value Measurements, Continued

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2009 and 2008:

		Assets at fair value as of December 31, 2009				
		Level 1	Level 2	Level 3	Total	
Mutual funds Common/collective	\$	11,843,618	-	-	11,843,618	
trust		-	1,107,511	-	1,107,511	
Participant loans		-	-	451,193	451,193	
	-					
Total assets at fair value	\$ =	11,843,618	1,107,511	451,193	13,402,322	
		Assets	at fair value as o	f December 31,	2008	
		Level 1	Level 2	Level 3	Total	
Mutual funds Common/collective	\$	8,279,199	-	-	8,279,199	
trust		-	1,354,183	-	1,354,183	
Participant loans		-	-	346,219	346,219	
Total assets at fair	-					
value	\$	8,279,199	1,354,183	346,219	9,979,601	

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, 2009:

	Participant loans
Balance, beginning of year	\$ 346,219
Interest income	27,736
Purchases, sales, issuances and settlements (net)	 77,238
Balance, end of year	\$ 451,193

#### Notes to Financial Statements

#### (5) Information Certified by the Plan's Trustee

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

	December 31,		
		2009	2008
Investments: Mutual funds	\$	11,843,618	8,279,199
Participant loans	8	451,193	346,219
Fidelity Managed Income Portfolio Common/Collective Trust at fair value Adjustment from fair value to contract value		1,107,511 20,594	1,354,183 73,047
Fidelity Managed Income Portfolio Common/Collective Trust at contract value		1,128,105	1,427,230
	\$	13,422,916	10,052,648
			ended <u>ber 31,</u> <u>2008</u>
Investment income:			
Net appreciation (depreciation) in fair value of investments Interest and dividends	\$	2,517,277 217,449	(5,292,102) 276,824
	\$	2,734,726	(5,015,278)

All information in the supplemental schedule is presented solely upon those certifications.

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

#### Notes to Financial Statements

#### (6) Related-Party Transactions

Certain Plan investments were managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee as defined by the plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services amounted to \$7,771 and \$6,365 for the years ended December 31, 2009 and 2008, respectively.

#### (7) Plan Termination

Although it has not expressed any intent to do so, the Company has the right, under the Plan, to discontinue its contributions at any time, and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their account balance.

#### (8) Tax Status

The Internal Revenue Service has determined that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan utilizes a non-standardized prototype document. The IRS has issued an opinion letter to the prototype sponsor on August 7, 2001. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

### (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 statement of net assets available for benefits.

### Notes to Financial Statements

### (10) Reconciliation to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31 to Form 5500:

	<u>2009</u>	2008
statements	5 13,468,091	10,055,555
Less: adjustment from fair value to contract value for fully benefit-responsive investment contracts Less: contributions receivable:	20,594	73,047
Employer	10,487	7 868
Participant	34,688	3 2,039
Net assets available for benefits per the Form 5500	\$ 13,402,322	9,979,601
The following is a reconciliation of investment income per the fi ended December 31, 2009 to Form 5500:	nancial staten	nents for the year
Investment income per the financial statements	\$	2,734,726

Investment income per the financial statements	\$	2,734,726
Plus: change in adjustment from fair value to contract value for fully benefit-responsive investment contract	_	52,453
Total investment income per the Form 5500	\$	2,787,179

The following is a reconciliation of contributions made to the plan per the financial statements for the year ended December 31, 2009, to Form 5500:

	Participant	Employer	Participant rollovers	Total
Contributions per the financial statements	\$ 918,121	390,399	4,080	1,312,600
Plus: contributions receivable at December 31, 2008	2,039	868	-	2,907
Less: contributions receivable at December 31, 2009	(34,688)	(10,487)		(45,175)
Contributions per Form 5500	\$ 885,472	380,780	4,080	1,270,332

### Schedule 1

.

# **TESSY PLASTICS 401(k) PROFIT SHARING PLAN**

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

### Plan No. 001

### Employer Identification No. 15-0589628

### December 31, 2009

	(b)	(c)		(e)
	Identity of issue, borrower	Description of investment including maturity date,	(d)	Current
(a)	lessor or similar party	rate of interest, collateral, par or maturity value	Cost	value
1-1				
*	Fidelity Management Trust Company	American Beacon Large Cap Value Plan Ahead Class,		
		20,643 shares	**	\$ 338,953
*	Fidelity Management Trust Company	Rainer Small/Mid Cap Portfolio, 16,017 shares	**	419,003
*	Fidelity Management Trust Company	Artisan Mid Cap Value, 22,251 shares	**	400,070
*	Fidelity Management Trust Company	Fidelity Emerging Markets, 30,684 shares	**	693,771
*	Fidelity Management Trust Company	Allianz NFJ Small Cap Value Adminstrative Class,		
	r denty tranagement r abt company	10,830 shares	**	250,713
*	Fidelity Management Trust Company	Fidelity Balanced Fund, 58,773 shares	**	961,520
*	Fidelity Management Trust Company	Fidelity International Discovery Fund, 85,026 shares	**	2,580,536
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund, 70,016 shares	**	1,500,446
*	Fidelity Management Trust Company	Fidelity Small Cap Indep. Fund, 18,589 shares	**	258,765
*	Fidelity Management Trust Company	Fidelity Freedom 2010 Fund, 4,006 shares	**	50,120
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund, 50,191 shares	**	629,894
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund, 18,205 shares	**	225,554
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio Common/Collective		
25	Fluenty Management Trust Company	Trust, 1,128,105 units	**	1,107,511
*	Fidelity Management Trust Company	Spartan US Equity Index Fund, 57,135 shares	**	2,252,844
*	Fidelity Management Trust Company	Fidelity US Bond Index Fund, 43,143 shares	**	477,159
*		Fidelity Freedom 2040 Fund, 6,775 shares	**	48,509
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund, 5,762 shares	**	60,038
Ť *	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund, 45,576 shares	**	473,533
т +	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund, 13,831 shares	* *	141,905
不	Fidelity Management Trust Company	Fluenty Fleedon 2055 Fund, 15,651 shares		

### Schedule 1

# **TESSY PLASTICS 401(k) PROFIT SHARING PLAN**

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

### Plan No. 001

### Employer Identification No. 15-0589628

### December 31, 2009

<u>(a)</u>	(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) <u>Cost</u>	(e) Current <u>value</u>
*	Fidelity Management Trust Company	Fidelity Freedom 2000 Fund, 64 shares	**	724
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund, 2,826 shares	**	23,938
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund, 3,473 shares	**	28,998
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund, 2,479 shares	**	26,625
*	Participant loans	One to five year loans, bearing interest at 4.25% through 8.75%	**	451,193
	Tarticipant Ioans			\$ 13,402,322

\* Party-in-interest as defined by ERISA
\*\* Costs are omitted for participant directed investments

See accompanying independent auditor's report.

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 3.

File With IRS Only

Α	Name of filer, plan administrator, or plan sponsor (see instructions) Tessy Plastics Corporation Number, street, and room or suite no. (If a P.O. box, see instructions)		B       Filer's identifying number (see instructions).         Image: Second system       Employer identification number (EIN).         16       1009788					
	488 Rte 5 West City or town, state, and ZIP code Elbridge, NY 13060		Socia	i	y number (SSN)			
С	Plan name		Plan			Plan year ending—		
		r	humb	er	MM	DD	ΥΥΥΥ	
	1 Tessy Plastics 401(k) Profit Sharing Plan	0	0	1	12	31	2010	
	2							
	3							

#### Part II Extension of Time to File Form 5500 or Form 5500-EZ (see instructions)

1 I request an extension of time until <u>10 / 15 / 2011</u> to file Form 5500 or Form 5500-EZ.

The application **is automatically approved** to the date shown on line 1 (above) if: (a) the Form 5558 is filed on or before the normal due date of Form 5500 or 5500-EZ for which this extension is requested, and (b) the date on line 1 is no more than  $2\frac{1}{2}$  months after the normal due date.

You must attach a copy of this Form 5558 to each Form 5500 and 5500-EZ filed after the due date for the plans listed in C above.

Note. A signature is not required if you are requesting an extension to file Form 5500 or Form 5500-EZ.

#### Part III Extension of Time to File Form 5330 (see instructions)

2	I request an extension of time until/ / to file Form 5330. You may be approved for up to a six (6) month extension to file Form 5330, after the normal due date of Form 5330.
а	Enter the Code section(s) imposing the tax
b	Enter the payment amount attached
с 3	For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Date >