Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2002

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

965 MIDLAND AVE
YONKERS, NY 10704

2b Employer Identification Number (EIN) 13-3149505

2c Sponsor's telephone number 914-969-0009

2d Business code (see instructions) 561720

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.	01/12/2012	ARMANDO RODRIGUEZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
A & A MAINTENANCE ENTERPRISE,

965 MIDLAND AVE
YONKERS, NY 10704

3b Administrator's EIN
13-3149505

3c Administrator's telephone number
914-969-0009

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:
a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	651
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	758
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	0
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	758
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	758
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	14
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
A & A MAINTENANCE ENTERPRISE,

D Employer Identification Number (EIN)
13-3149505

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

1 Coverage Information:

(a) Name of insurance carrier
HARTFORD LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0974148	88072	GA-807267	14	01/01/2010	12/31/2010

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
400	0

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

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

CADARET GRANT & CO INC
110 W FAYETTE ST 1 LINCOLN CENTER 5
SYRACUSE, NY 13202

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
400			3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	0
5	Current value of plan's interest under this contract in separate accounts at year end	5	258600

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)	0		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	0		
	(4) Transferred from separate account	7c(4)	0		
	(5) Other (specify below)	7c(5)	0		
	▶				
	(6) Total additions			7c(6)	0
d	Total of balance and additions (add **b** and **c(6)**)			7d	0
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	0		
	(2) Administration charge made by carrier	7e(2)	0		
	(3) Transferred to separate account	7e(3)	0		
	(4) Other (specify below)	7e(4)	0		
	▶				
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	0

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

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

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE,

D Employer Identification Number (EIN)
13-3149505

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

HARTFORD LIFE INS. CO.

06-0974148

(b) Enter name and EIN or address of person who provided you disclosure 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

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)

HARTFORD LIFE INS. CO.

06-0974148

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 23 37 38 50 54 56 59 60 62 63 64 65 66 99	NONE	2005	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

MORNINGSTAR ASSOCIATES, LLC

36-4317381

(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?
49	NONE	0	Yes [X] No [ ]	Yes [ ] No [X]	54	Yes [ ] No [X]

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

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

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

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

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

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

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

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

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
HARTFORD LIFE INS. CO.	15 23 37 38 50 54 56 59 60 62 63 64 65 66 99	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SEE ATTACHED 06-0974148	SEE ATTACHED

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MORNINGSTAR ASSOCIATES, LLC	49	54

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HARTFORD LIFE INS. CO. 06-0974148	SEE ATTACHED

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE,

D Employer Identification Number (EIN)
13-3149505

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: HARTFORD ADVANTAGE TK

b Name of sponsor of entity listed in (a): HARTFORD LIFE INSURANCE COMPANY

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)
06-0974148-000	P	238597

a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT K

b Name of sponsor of entity listed in (a): HARTFORD LIFE INSURANCE COMPANY

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)
06-0974148-000	P	20003

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

b Name of sponsor of entity listed in (a):

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

b Name of sponsor of entity listed in (a):

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

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

b Name of sponsor of entity listed in (a):

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

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE,

D Employer Identification Number (EIN)
13-3149505

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	61213	52123
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	189095	258600
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	0
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	250308	310723
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	250308	310723

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	4398	
	(B) Participants	2a(1)(B)	24499	
	(C) Others (including rollovers)	2a(1)(C)	4616	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		33513
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
	(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)	2547	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2547
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		26360
(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)		0
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		62420
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	0	
(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)		0
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	2005	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2005
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2005
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		60415
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: PUGLISIS, MOORE & CO., LTD **(2)** EIN: 13-4157966

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		100000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL INFORMATION

YEARS ENDED DECEMBER 31, 2010 AND 2009

A&A MAINTENANCE ENTERPRISE INC.401(k) PLAN AND TRUST

FINANCIAL STATEMENTS

AND SUPPLEMENTAL INFORMATION

YEARS ENDED DECEMBER 31, 2010 and 2009

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Supplemental Schedule:

Schedule H line 4i - Schedule of Assets Held at December 31, 2010 11

PUGLISI, MOORE & CO., LLP
Certified Public Accountants

Independent Auditors' Report

To the administrative Committee of the
A&A Maintenance Enterprise Inc.

We were engaged to audit the financial statements and supplemental schedules of A&A Maintenance Enterprise Inc. as of December 31, 2010 and for the year then ended, as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2009 were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Hartford Life Insurance Company, the trustee of the Plan. Their report dated August 31, 2010 indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 E, which was certified by Hartford Life Insurance Company, the trustee of the Plan, except for comparing the information with the related information included in the 2010 financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and supplemental schedules, taken as a whole. The form and content of the information included in the 2010 financial statements and supplemental schedules, 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.

Puglisi, Moore & Co. LLP

White Plains, New York
October 17, 2011

11 New King Street
White Plains, N.Y. 10604

Telephone: (914) 682-4929
Fax: (914) 946-4824

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2010	2009
Assets		
Investments at Fair Value		
Investments – Mutual Funds	$ 258,600	$ 189,095
	258,600	189,095
Receivables		
Participants' Loans	52,123	61,213
Total Assets	310,723	250,308
Net assets available for benefits	$ 310,723	$ 250,308

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2010	2009
Additions to net assets attributed to		
Investments Income		
Interest and Dividends	$ 2,547	$ 3,441
Net realized and unrealized Gains On investments	26,360	39,375
Contributions		
Employers	4,398	4,561
Participants'	29,115	21,794
Total Additions	62,420	69,171
Deductions from net assets attributed to		
Fees	2,005	7,154
Total Deductions	2,005	7,154
Net Increase	60,415	62,017
Net assets available for benefits – beginning of year	250,308	188,291
Net assets available for benefits – end of year	$ 310,723	$ 250,308

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS
December 31, 2010 & 2009

A. Description of Plan

The following summary description of A&A Maintenance Enterprise, Inc. ("Company") 401(k) Retirement Savings Plan (The "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. *General* – The plan is a defined contribution plan covering all employees of the company not covered by a collective bargaining agreement who have attained three months of service and are age twenty-one or older. The Plan is intending to meet the requirements of the Small Business Job Protection Act of 1996 and the Taxpayer Relief Act of 1997 and the Employee Retirement Income Security Act ERISA of 1974 and all subsequent tax acts.

2. *Contributions* – Each year participants may contribute up to 75% of pretax annual compensation as defined in the Plan up to a maximum of $16,500 ($22,000 catch-up) as set by federal regulations. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. All employer contributions are invested in funds designated by the employees. Contributions are subject to certain limitations. The company will match up to 4% of the non highly compensated participants first 5% of their contributions to the Plan .

3. *Participant Accounts* – Each participant's account is credited with the participant's contribution and an allocation of 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 participant's vested account.

4. *Vesting* – Participants are immediately vested in their contributions plus accrued earnings thereon.

5. *Investment Options* – Upon enrollment in the Plan, a participant may direct employee contributions in a minimum of 1% increments in any of sixteen investment options. A description of each investment option offered under the plan is as follows:

American Funds Capital Income – The investment seeks a level of current income and a growth stream of income over years. The secondary objective is to provide growth of capital. The fund invests at least 90% of assets in income producing securities (with at least 50% of assets in equity securities.)

Description of Plan (Continued)

Columbia Seligman Communications and Information – The investment seeks capital appreciation. The fund invest at least 80% of net assets in securities of companies operating in the communications, information and related industries. It invests in companies operating in the information technology and telecommunications sectors as well as those in the media industry.

INVESCO Real Estate – The investment seeks total return through growth of capital and current income. The fund normally invests at least 80% of assets in securities of real estate and real estate related issuers, including real estate investment trusts. If primarily invests in equity securities. The fund may invest in equity securities. The fund may invest in equity and debt securities of issuers unrelated to the real estate industry that the portfolio managers believe are undervalued and have potential for growth of capital.

Alger Capital Appreciation Institutional Fund – The investment seeks long-term capital appreciation. The fund normally invests at least 85% of net assets plus any borrowings for investment purposes in equity securities of U.S. companies of any market capitalization demonstrating growth potential. It primarily invests in growth stocks of companies characterized by high unit volume growth or positive life cycle change. Investments in small and medium sized companies involve greater risk not associated with investments in larger, more established companies.

Lord Abbott Small Cap Blend – The investment seeks long-term growth of capital by investing primarily in stocks of small companies. The fund invests at least 80% of net assets in equity securities of small companies. In selecting investments, it may invest in U.S. and foreign companies.

Victory Special Value Fund –The investment seeks long-term growth of capital and dividend income. The fund invests primarily in equity securities of companies with market capitalizations within the range of companies comprising the Russell Mid Cap(R) index. It normally invests at least 80% of net assets in equity securities of companies with market capitalizations within the range of companies comprising the Russell Mid Cap(R) index. The fund may invest up to 20% of its total assets in investment-grade debt securities and preferred stocks; and may, but is not required to, use derivative instruments.

INVESCO Van Kampen Small Cap Growth – The fund seeks capital appreciation. The fund invests primarily in common stocks and other equity securities of small companies that it believes have above-average potential for capital appreciation. It invests at least 80% of net assets in securities of small companies.

Description of Plan (Continued)

MFS Utilities – The investment seeks total return. The fund invests at least 80% of net assets in securities of issuers in the utilities industry. It primarily invests the fund's assets in equity securities, but it may also invest in debt instruments, including lower quality debt instruments.

American Funds The Bond Fund of America – The investment seeks to provide as high a level of current income as is consistent with the preservation of capital. The fund normally invests at least 80% of assets in bonds and other debt securities. It invests a majority of its assets in debt securities rated A3/A – or better, including securities issued and guaranteed by the U.S. and other governments, and securities backed by mortgages and other assets.

Janus Overseas Investment Option – The Investment seeks long-term growth of capital. The fund normally invests in securities of issuers from several different countries, excluding the United States. The fund may have significant exposure to emerging markets.

Davis Financial – The investment seeks long-term growth of capital. The fund invests at least 80% of assets in securities issued by companies principally engaged in the financial services sector. It primarily invests in equity securities.

Hartford Global Health – The investment seeks long-term capital appreciation. The fund normally invests at least 80% of assets in the equity securities of health care-related companies worldwide. It invests in securities of issuers among a number of different countries throughout the world, one of which maybe the United States, however the fund has no limit on the amount of assets that must be invested in each country.

Hartford Growth Opportunities – The investment seeks capital appreciation. The fund invests primarily in a diversified portfolio of common stocks covering a broad range of industries, companies and market capitalizations that the Sub-advisor believes have superior growth potential with a focus on mid to large capitalization stocks.

Hartford Value – The investment seeks long-term total return. The fund normally invests at least 80% of assets in equity securities of companies with market capitalization above 2 billion. The sub-advisor utilizes fundamental analysis to identify securities that provide the potential for above-average total returns and sell at below-average estimated price-to-earnings multiples.

Hartford Money Market – Seeks a high level of current income while keeping investments liquid and preserving capital.

Description of Plan (Continued)

Hartford Value – The investment seeks a competitive total return, with income as a secondary objective. The fund normally invests at least 80% of assets in bonds. It normally invests at least 70% of assets in investment grade debt securities which include asset-backed and mortgage-related securities, and up to 20% of total assets in securities rated below investment grade. The fund invests at least 65% of total assets in debt securities with a maturity date of at least one year and up to 15% in preferred stocks, convertible securities, and other securities.

Participant Notes Receivable. Participant loans are permitted under the Plan. In order to obtain a loan from the Plan, the participant must make application to the Plan Administrator. Loans must be approved by the Plan Administrator and are subject to a strict set of rules established by law.

Payment of Benefits. On termination of service due to death, disability or retirement, a participant or beneficiary may elect to receive a lump-sum amount, installment payments or a joint and survivor annuity. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

B. Summary of Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

The Plan's investments are stated at fair market value. Quoted market prices are used to value investments. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. Participant notes receivable are valued at cost, which approximates fair value.

Description of Plan (Continued)

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 distribution or dividend pay date.

Payment of Benefits

Benefits are recorded when paid.

Forfeitures

Forfeited accounts will be used to reduce future employer contributions. As of December 31, 2010 and 2009, there were no forfeited accounts.

C. 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 will become 100% vested in their accounts.

D. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated September 18, 2001, that the Plan is designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

E. Information Prepared and Certified by Custodian

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

Investments at Fair Value	**2010**	**2009**
American Funds Capital Income.....	$ 150,142	$ 113,245
Columbia Seligman Communications.....	8,941	6,815
Invesco Real Estate.....	13,040	9,549
Alger Capital Appreciation Inst. Fund	2,671	1,966
Lord Abbott Small Cap Blend	11,127	8,640
Victory Special Value Fund	13,377	9,598
Invesco Van Kampen Small Cap Growth	13,993	9,716

Description of Plan (Continued)

MFS Utilities	2,258	1,742
American Funds the Bond Fund of America	3,429	1,963
Janus Overseas Investment Option	2,732	1,930
Davis Financial	16,887	13,059
Hartford Global Health	1,290	1,238
Hartford Growth Opportunities	9,834	7,334
Hartford Growth Opportunities	0	2,300
Hartford Money Market	5,846	0
Hartford Value	3,033	0
	$ 258,600	$ 189,095

F. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefit.

	2010	2009
Mutual Funds (a)	$ 258,600	$ 189,095
Participant Loans (b)	52,123	61,213
Total	$ 310,723	$ 250,308

Fair value measurements using; (a) quoted prices in active markets for identical assets (Level 1), and (b) significant unobservable inputs (Level 3)

ASC Topic 820, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 inputs were available to the Plan, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available.

Level 1 fair value measurements

The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

Note F- Fair value measurements (continued)

Level 3 fair value measurements

The participant loans are not actively traded and significant other observable inputs are not available. Thus, the fair value of participant loans is equal to the amortized cost of the loans because the loans are secured by each respective participant's account balance. The following table provides further details of the Level 3 fair value measurements.

Fair value measurements using significant unobservable inputs (Level 3)

	2010	2009
Beginning balance	$ 61,213	$ 49,285
Purchases, sales, issuances, and settlements (net)	(9,090)	11,928
Ending Balance	$ 52,123	$ 61,213

G. Investments

The following presents investments that represent five percent (5%) or more of the Plan's net assets.

	2010	2009
American Funds Capital Income	$ 150,142	$ 113,245
Davis Financial	16,887	13,059
Participant Loans	52,123	61,213

During 2010, the Plan's mutual fund investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $26,360.

ACCOMPANYING INFORMATION

Supplemental Schedule

A&A MAINTENANCE ENTERPRISE, INC.
401 (k) PLAN AND TRUST
Supplemental Schedule
Year Ended December 31, 2010

Schedule H, line4i – Schedule of Assets (Held at End of Year)

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Hartford Life Insurance Company	American Funds Capital Income	0	150,142
	Hartford Life Insurance Company	Columbia Seligman Communication	0	8,841
	Hartford Life Insurance Company	Invesco Real Estate	0	13,040
	Hartford Life Insurance Company	Alger Capital Appreciation Inst. Fund	0	2,671
	Hartford Life Insurance Company	Lord Abbott Small Cap Blend	0	11,127
	Hartford Life Insurance Company	Victory Special Value Fund	0	13,377
	Hartford Life Insurance Company	Invesco Van Kampen Small Cap Growth	0	13,993
	Hartford Life Insurance Company	MFS Utilites	0	2,258
	Hartford Life Insurance Company	American Funds The Bond Fund of America	0	3,429
	Hartford Life Insurance Company	Janus Overseas Investment Option	0	2,732
	Hartford Life Insurance Company	Davis Financial	0	16,887
	Hartford Life Insurance Company	Hartford Global Health	0	1,290
	Hartford Life Insurance Company	Hartford Growth Opportunities	0	9,834
	Hartford Life Insurance Company	Hartford Growth Opportunities	0	0
	Hartford Life Insurance Company	Hartford Money Market	0	5,846
	Hartford Life Insurance Company	Hartford Value	0	3,033
	Qualified Participant Loans	Interest Rate of 3.25%	0	52,123
			$ 0	$310,723

2010 Fee and Compensation Disclosure Report

This document is intended to assist a plan administrator ("you") in understanding the fees and compensation associated with your plan. If your plan is required to complete a *Form 5500 Schedule C*, this report identifies the different types of reportable compensation paid with respect to the Hartford product utilized by the retirement plan.

As permitted under the Schedule C reporting rules, compensation is disclosed in the attached report as an actual dollar amount, an estimate, or a formula or rate.

- Where it is an actual dollar amount, no further notation is provided.
- Where it is an estimate, we have used a reasonable method to arrive at the estimate and described the method used to arrive at the estimated amount.
- Where a formula or rate is provided, the formula may be disclosed under the Schedule C reporting rules. Alternatively, for purposes of Schedule C or for your fiduciary review of the compensation paid with respect to the plan's product, you may calculate an actual or estimated dollar amount by multiplying the rate by the total assets to which it applies. Thus, much of the compensation information being provided can be expressed in the form of a formula.

Please note that all compensation is being reported for the 2010 calendar year. This report includes compensation actually paid to or by The Hartford within the 2010 calendar year as part of your Hartford product. This report does not include amounts deducted from plan assets and paid to third parties (other than The Hartford). In addition, the report does not include compensation related to investments held by the plan that are not serviced on our recordkeeping system. You should contact your other service providers for reportable compensation information. You may also receive information on the compensation reported here directly from other service providers.

Please note that we have provided suggested service codes with respect to services provided through our Hartford product. These service codes are listed in the 2010 Instructions for Schedule C (Form 5500). Please review with your experienced benefits counsel and other professionals to determine the most appropriate service codes for your plan.

Please contact your Hartford Client Service Team should you require additional information regarding the compensation paid to or by The Hartford with respect to your plan.

Information provided in this document and related materials we provide are not intended to be and shall not be deemed tax advice, tax form preparation services, legal advice or accounting or other professional services. We strongly encourage you to review all Schedule C and other Form 5500 materials with experienced benefits counsel and other professionals.

FORM 5500 SCHEDULE C REPORT
SCHEDULE C, LINE 2(h) AND LINE 3(e) FORMULA DESCRIPTION

A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST (807267)
PLAN YEAR END: 12/31

For use with lines 2(h), 3(c), 3(d), 3(e)

Recipient: Hartford Life Insurance Company EIN: 06-0974148

Service Codes: 15, 23, 37, 38, 54, 55, 59, 60, 62, 63, 64, 65, 66, 99, 50 (if direct compensation amount reflected below)

1. Direct Compensation **$2,005.00**

The total amount identified above reflects all fees deducted from plan assets at the plan administrator's direction. Of this amount, our records indicate that Hartford Life Insurance Company received **$2,005.00** . Please review your records to determine what other service providers (e.g., a reimbursement paid to any plan fiduciary, your employee benefits counsel, plan auditor) received all or any portion of the remaining amount.

Note: Due to system accounting protocols (including 'cash basis' accounting), amounts reported as Direct Compensation and amounts reported as paid to Hartford Life Insurance Company are the net result of aggregating direct compensation after the effects of adjustments processed in 2010, some of which may have pertained to prior years.

2. Indirect Compensation

Program & Administrative Charge
Service Code: 66

Hartford Life Insurance Company Separate Accounts, 200 Hopmeadow Road, Simsbury, CT 06089

[see fund chart below for percentage]% per annum of the daily Sub-Account values (pursuant to the group annuity contract or funding agreement)

Float compensation **$0.89**

Bank accounts and investments associated with short-term investment pool, 200 Hopmeadow Road, Simsbury, CT 06089

This is an estimate based on the annual average rate of float (0.1415% for 2010) earned on the bank accounts and investment associated with the short-term investment pool for the 2010 calendar year multiplied by an estimate of the assets related to uncashed checks. This estimate does not include float earned for any other reason (e.g., if amounts remitted to Hartford cannot be immediately invested because they are not in good order). Please review or request a copy of the current float disclosure for more information about the other circumstances in which float is earned.

Compensation paid with respect to Underlying Funds

Investment Option Name	*EIN*	*Fees Received from investment options on your Plan's Menu (rates as of 12/31/10)*	*Total Annual Expenses[2] (as of 12/31/10)*	*Program & Admin. Charge*
ALGER CAP APP INSTITUTIONAL I	13-2665689	0.55% x assets	1.22%	1.25%
AMERICAN FUNDS BND FD OF AMER R3	95-2884967	0.60% x assets	0.97%	1.25%
AMERICAN FUNDS INC FD OF AMER R3	06-0867264	0.60% x assets	0.99%	1.25%
COL SELIGMN COMMUNICAT AND INF A	NA[1]	0.25% x assets plus $18/ participant, capped at 0.25% x assets	1.61%	1.25%
DAVIS FINANCIAL A	36-2926440	0.35% x assets plus $12/participant	1.05%	1.25%
HARTFORD GLOBAL HEALTH HLS IB	22-2937447	0.50% x assets	1.16%	1.25%

Investment Option Name	*EIN*	*Fees Received from investment options on your Plan's Menu (rates as of 12/31/10)*	*Total Annual Expenses[2] (as of 12/31/10)*	*Program & Admin. Charge*
HARTFORD GROWTH OPPS HLS IB	41-1600027	0.50% x assets	0.91%	1.25%
HARTFORD MONEY MARKET HLS IB	22-2937447		0.73%	1.25%
HARTFORD VALUE HLS IB	22-2937447	0.50% x assets	1.07%	1.25%
HARTFORD VALUE OPPS HLS IB	NA[1]	0.60% x assets	1.09%	1.25%
INVESCO REAL ESTATE A	76-0343427	0.50% x assets	1.33%	1.25%
INVESCO VAN KAMPEN S CP GROWTH A	76-0343427	0.50% x assets	1.39%	1.25%
JANUS OVERSEAS S	84-0592523	0.50% x assets	1.22%	1.25%
LORD ABBETT SMALL CAP BLEND A	22-3805271	0.50% x assets	1.35%	1.25%
MFS UTILITIES R3	04-3158862	0.85% x assets	1.09%	1.25%
VICTORY SPECIAL VALUE A	31-6364605	0.45% x assets plus $16/participant	1.24%	1.25%

[1] At the time this report was generated this information was not available.

Under the variable investment options available through your plan's group annuity contract or funding agreement, contract values are invested in Hartford Life Insurance Company separate accounts that, in turn, invest in underlying registered investment companies (i.e., mutual funds) and collective investment funds.

The list includes any investment option held by the plan during the 2010 calendar year. To arrive at an estimate of the dollar amount that Hartford received from each investment option, multiply the rate of fees received from each investment option by your plan's year-end balance (or if the investment option was liquidated prior to year end, the balance on the liquidation date) and, if applicable, the per participant fee by the number of participants in the investment option at year end (or the liquidation date if earlier). This will be an estimate because your plan's balance and number of participants will vary over the course of the year, so the year-end balance and number of participants may be higher or lower than the daily balance. In addition, these fees are calculated on a daily basis.

[2] This amount is the sum of the fund's distribution, management and other fees, which are also identified in the fund's prospectus. Please note that affiliates of Hartford Life Insurance Company act as advisor to the Hartford funds. Such affiliates are identified in the fund's prospectus' and receive management fees in the following amounts:

Hartford Global Health HLS Inv Opt	0.85% x assets
Hartford Growth Opportunities HLS Inv Opt	0.61% x assets
Hartford Money Market HLS Inv Opt	0.40% x assets
Hartford Value HLS Inv Opt	0.77% x assets

Recipient: Morningstar Associates, LLC EIN: 36-4317381

Service Code: 49

Indirect Compensation

"Managed by You" services fee Payor: Hartford Life Insurance Company EIN: 06-0974148 **$54.00**

This is an estimate determined by dividing a flat annual fee paid to Morningstar by the number of plans to whom this feature is made available.

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL INFORMATION

YEARS ENDED DECEMBER 31, 2010 AND 2009

A&A MAINTENANCE ENTERPRISE INC.401(k) PLAN AND TRUST

FINANCIAL STATEMENTS

AND SUPPLEMENTAL INFORMATION

YEARS ENDED DECEMBER 31, 2010 and 2009

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PUGLISI, MOORE & CO., LLP
Certified Public Accountants

Independent Auditors' Report

To the administrative Committee of the
A&A Maintenance Enterprise Inc.

We were engaged to audit the financial statements and supplemental schedules of A&A Maintenance Enterprise Inc. as of December 31, 2010 and for the year then ended, as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2009 were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Hartford Life Insurance Company, the trustee of the Plan. Their report dated August 31, 2010 indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 E, which was certified by Hartford Life Insurance Company, the trustee of the Plan, except for comparing the information with the related information included in the 2010 financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and supplemental schedules, taken as a whole. The form and content of the information included in the 2010 financial statements and supplemental schedules, 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.

Puglisi, Moore & Co. LLP

White Plains, New York
October 17, 2011

11 New King Street
White Plains, N.Y. 10604

Telephone: (914) 682-4929
Fax: (914) 946-4824

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2010	2009
Assets		
Investments at Fair Value		
Investments – Mutual Funds	$ 258,600	$ 189,095
	258,600	189,095
Receivables		
Participants' Loans	52,123	61,213
Total Assets	310,723	250,308
Net assets available for benefits	$ 310,723	$ 250,308

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	For the Year Ended December 31, 2010	2009
Additions to net assets attributed to		
Investments Income		
Interest and Dividends	$ 2,547	$ 3,441
Net realized and unrealized Gains On investments	26,360	39,375
Contributions		
Employers	4,398	4,561
Participants'	29,115	21,794
Total Additions	62,420	69,171
Deductions from net assets attributed to		
Fees	2,005	7,154
Total Deductions	2,005	7,154
Net Increase	60,415	62,017
Net assets available for benefits – beginning of year	250,308	188,291
Net assets available for benefits – end of year	$ 310,723	$ 250,308

A&A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS
December 31, 2010 & 2009

A. Description of Plan

The following summary description of A&A Maintenance Enterprise, Inc. ("Company") 401(k) Retirement Savings Plan (The "Plan") is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. *General* – The plan is a defined contribution plan covering all employees of the company not covered by a collective bargaining agreement who have attained three months of service and are age twenty-one or older. The Plan is intending to meet the requirements of the Small Business Job Protection Act of 1996 and the Taxpayer Relief Act of 1997 and the Employee Retirement Income Security Act ERISA of 1974 and all subsequent tax acts.

2. *Contributions* – Each year participants may contribute up to 75% of pretax annual compensation as defined in the Plan up to a maximum of $16,500 ($22,000 catch-up) as set by federal regulations. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. All employer contributions are invested in funds designated by the employees. Contributions are subject to certain limitations. The company will match up to 4% of the non highly compensated participants first 5% of their contributions to the Plan .

3. *Participant Accounts* – Each participant's account is credited with the participant's contribution and an allocation of 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 participant's vested account.

4. *Vesting* – Participants are immediately vested in their contributions plus accrued earnings thereon.

5. *Investment Options* – Upon enrollment in the Plan, a participant may direct employee contributions in a minimum of 1% increments in any of sixteen investment options. A description of each investment option offered under the plan is as follows:

American Funds Capital Income – The investment seeks a level of current income and a growth stream of income over years. The secondary objective is to provide growth of capital. The fund invests at least 90% of assets in income producing securities (with at least 50% of assets in equity securities.)

Description of Plan (Continued)

Columbia Seligman Communications and Information – The investment seeks capital appreciation. The fund invest at least 80% of net assets in securities of companies operating in the communications, information and related industries. It invests in companies operating in the information technology and telecommunications sectors as well as those in the media industry.

INVESCO Real Estate – The investment seeks total return through growth of capital and current income. The fund normally invests at least 80% of assets in securities of real estate and real estate related issuers, including real estate investment trusts. If primarily invests in equity securities. The fund may invest in equity securities. The fund may invest in equity and debt securities of issuers unrelated to the real estate industry that the portfolio managers believe are undervalued and have potential for growth of capital.

Alger Capital Appreciation Institutional Fund – The investment seeks long-term capital appreciation. The fund normally invests at least 85% of net assets plus any borrowings for investment purposes in equity securities of U.S. companies of any market capitalization demonstrating growth potential. It primarily invests in growth stocks of companies characterized by high unit volume growth or positive life cycle change. Investments in small and medium sized companies involve greater risk not associated with investments in larger, more established companies.

Lord Abbott Small Cap Blend – The investment seeks long-term growth of capital by investing primarily in stocks of small companies. The fund invests at least 80% of net assets in equity securities of small companies. In selecting investments, it may invest in U.S. and foreign companies.

Victory Special Value Fund –The investment seeks long-term growth of capital and dividend income. The fund invests primarily in equity securities of companies with market capitalizations within the range of companies comprising the Russell Mid Cap(R) index. It normally invests at least 80% of net assets in equity securities of companies with market capitalizations within the range of companies comprising the Russell Mid Cap(R) index. The fund may invest up to 20% of its total assets in investment-grade debt securities and preferred stocks; and may, but is not required to, use derivative instruments.

INVESCO Van Kampen Small Cap Growth – The fund seeks capital appreciation. The fund invests primarily in common stocks and other equity securities of small companies that it believes have above-average potential for capital appreciation. It invests at least 80% of net assets in securities of small companies.

Description of Plan (Continued)

MFS Utilities – The investment seeks total return. The fund invests at least 80% of net assets in securities of issuers in the utilities industry. It primarily invests the fund's assets in equity securities, but it may also invest in debt instruments, including lower quality debt instruments.

American Funds The Bond Fund of America – The investment seeks to provide as high a level of current income as is consistent with the preservation of capital. The fund normally invests at least 80% of assets in bonds and other debt securities. It invests a majority of its assets in debt securities rated A3/A – or better, including securities issued and guaranteed by the U.S. and other governments, and securities backed by mortgages and other assets.

Janus Overseas Investment Option – The Investment seeks long-term growth of capital. The fund normally invests in securities of issuers from several different countries, excluding the United States. The fund may have significant exposure to emerging markets.

Davis Financial – The investment seeks long-term growth of capital. The fund invests at least 80% of assets in securities issued by companies principally engaged in the financial services sector. It primarily invests in equity securities.

Hartford Global Health – The investment seeks long-term capital appreciation. The fund normally invests at least 80% of assets in the equity securities of health care-related companies worldwide. It invests in securities of issuers among a number of different countries throughout the world, one of which maybe the United States, however the fund has no limit on the amount of assets that must be invested in each country.

Hartford Growth Opportunities – The investment seeks capital appreciation. The fund invests primarily in a diversified portfolio of common stocks covering a broad range of industries, companies and market capitalizations that the Sub-advisor believes have superior growth potential with a focus on mid to large capitalization stocks.

Hartford Value – The investment seeks long-term total return. The fund normally invests at least 80% of assets in equity securities of companies with market capitalization above 2 billion. The sub-advisor utilizes fundamental analysis to identify securities that provide the potential for above-average total returns and sell at below-average estimated price-to-earnings multiples.

Hartford Money Market – Seeks a high level of current income while keeping investments liquid and preserving capital.

Description of Plan (Continued)

Hartford Value – The investment seeks a competitive total return, with income as a secondary objective. The fund normally invests at least 80% of assets in bonds. It normally invests at least 70% of assets in investment grade debt securities which include asset-backed and mortgage-related securities, and up to 20% of total assets in securities rated below investment grade. The fund invests at least 65% of total assets in debt securities with a maturity date of at least one year and up to 15% in preferred stocks, convertible securities, and other securities.

Participant Notes Receivable. Participant loans are permitted under the Plan. In order to obtain a loan from the Plan, the participant must make application to the Plan Administrator. Loans must be approved by the Plan Administrator and are subject to a strict set of rules established by law.

Payment of Benefits. On termination of service due to death, disability or retirement, a participant or beneficiary may elect to receive a lump-sum amount, installment payments or a joint and survivor annuity. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

B. Summary of Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

The Plan's investments are stated at fair market value. Quoted market prices are used to value investments. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. Participant notes receivable are valued at cost, which approximates fair value.

Description of Plan (Continued)

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 distribution or dividend pay date.

Payment of Benefits

Benefits are recorded when paid.

Forfeitures

Forfeited accounts will be used to reduce future employer contributions. As of December 31, 2010 and 2009, there were no forfeited accounts.

C. 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 will become 100% vested in their accounts.

D. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated September 18, 2001, that the Plan is designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

E. Information Prepared and Certified by Custodian

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

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The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefit.

	2010	2009
Mutual Funds (a)	$ 258,600	$ 189,095
Participant Loans (b)	52,123	61,213
Total	$ 310,723	$ 250,308

Fair value measurements using; (a) quoted prices in active markets for identical assets (Level 1), and (b) significant unobservable inputs (Level 3)

ASC Topic 820, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 inputs were available to the Plan, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available.

Level 1 fair value measurements

The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

Note F- Fair value measurements (continued)

Level 3 fair value measurements

The participant loans are not actively traded and significant other observable inputs are not available. Thus, the fair value of participant loans is equal to the amortized cost of the loans because the loans are secured by each respective participant's account balance. The following table provides further details of the Level 3 fair value measurements.

Fair value measurements using significant unobservable inputs (Level 3)

	2010	2009
Beginning balance	$ 61,213	$ 49,285
Purchases, sales, issuances, and settlements (net)	(9,090)	11,928
Ending Balance	$ 52,123	$ 61,213

G. Investments

The following presents investments that represent five percent (5%) or more of the Plan's net assets.

	2010	2009
American Funds Capital Income	$ 150,142	$ 113,245
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ACCOMPANYING INFORMATION

Supplemental Schedule

A&A MAINTENANCE ENTERPRISE, INC.
401 (k) PLAN AND TRUST
Supplemental Schedule
Year Ended December 31, 2010

Schedule H, line4i – Schedule of Assets (Held at End of Year)

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Hartford Life Insurance Company	American Funds Capital Income	0	150,142
	Hartford Life Insurance Company	Columbia Seligman Communication	0	8,841
	Hartford Life Insurance Company	Invesco Real Estate	0	13,040
	Hartford Life Insurance Company	Alger Capital Appreciation Inst. Fund	0	2,671
	Hartford Life Insurance Company	Lord Abbott Small Cap Blend	0	11,127
	Hartford Life Insurance Company	Victory Special Value Fund	0	13,377
	Hartford Life Insurance Company	Invesco Van Kampen Small Cap Growth	0	13,993
	Hartford Life Insurance Company	MFS Utilites	0	2,258
	Hartford Life Insurance Company	American Funds The Bond Fund of America	0	3,429
	Hartford Life Insurance Company	Janus Overseas Investment Option	0	2,732
	Hartford Life Insurance Company	Davis Financial	0	16,887
	Hartford Life Insurance Company	Hartford Global Health	0	1,290
	Hartford Life Insurance Company	Hartford Growth Opportunities	0	9,834
	Hartford Life Insurance Company	Hartford Growth Opportunities	0	0
	Hartford Life Insurance Company	Hartford Money Market	0	5,846
	Hartford Life Insurance Company	Hartford Value	0	3,033
	Qualified Participant Loans	Interest Rate of 3.25%	0	52,123
			$ 0	$310,723