Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2009** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2003

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

1789 INDIAN WOOD CIRCLE
SUITE 210
MAUMEE, OH 43537

2b Employer Identification Number (EIN) 04-3710647

2c Sponsor's telephone number 419-891-1516

2d Business code (see instructions) 541990

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.	03/01/2012	TAMARA PAVELEK
	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

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

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") ONE SOURCE MANAGEMENT, LTD. 1789 INDIAN WOOD CIRCLE SUITE 210 MAUMEE, OH 43537	**3b** Administrator's EIN 04-3710647 **3c** Administrator's telephone number 419-891-1516

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:	**4b** EIN
a	Sponsor's name	**4c** PN

5	Total number of participants at the beginning of the plan year	**5**	394
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**	483
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	49
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	532
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	532
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	284
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

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)			**9b** 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)**	☒	Trust
(4)	☐	General assets of the sponsor	**(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			**b General Schedules**		
(1)	☒	**R** (Retirement Plan Information)	**(1)**	☒	**H** (Financial Information)
(2)	☐	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	**(2)**	☐	**I** (Financial Information – Small Plan)
			(3)	☐	___ **A** (Insurance Information)
			(4)	☐	**C** (Service Provider Information)
(3)	☐	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	**(5)**	☒	**D** (DFE/Participating Plan Information)
			(6)	☐	**G** (Financial Transaction Schedules)

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

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: THE PREMIER TRUST FUND OF FMT

b Name of sponsor of entity listed in (a): FIRST MERCANTILE TRUST 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)
62-1549435-001	C	1797800

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):

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

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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)	Financial 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), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

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)	33447	210184
(2) Participant contributions	1b(2)	3154	10094
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	23829	108291
(9) Value of interest in common/collective trusts	1c(9)	768499	1797800
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	828929	2126369
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	828929	2126369

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)	360020	
(B) Participants	2a(1)(B)	379866	
(C) Others (including rollovers)	2a(1)(C)	1301	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		741187
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)	911	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		911
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		201147
(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)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		943245

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	219572	
(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)		219572
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	18040	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		18040
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		237612

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		705633
l Transfers of assets:			
(1) To this plan	2l(1)		1651662
(2) From this plan	2l(2)		1059856

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)** ☒ Disclaimer **(4)** ☐ Adverse

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

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

(1) Name: FENNER MELSTROM & DOOLING **(2)** EIN: 38-1402622

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	X		

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
NATIONWIDE MAGAZINE	75-1695271	002

SCHEDULE R (Form 5500)	Retirement Plan 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 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

Part I Distributions

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

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

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

EIN(s): 62-1549435 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION
Years Ended December 31, 2010, 2009 and 2008

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

TABLE OF CONTENTS

	PAGE NO.
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	2
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	3
NOTES TO FINANCIAL STATEMENTS	4 - 16
SUPPLEMENTARY INFORMATION	
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2010	17
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2009	18
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2008	19

FMD
FENNER, MELSTROM & DOOLING, PLC
Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

TO THE TRUSTEE OF THE
ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN
HOLMES BEACH, FLORIDA

We were engaged to audit the financial statements of One Source Management, Ltd. Retirement and Savings Plan as of December 31, 2010, 2009 and 2008, and for the years then ended, and the December 31, 2010, 2009 and 2008 supplementary information, as listed in the accompanying table of contents. These financial statements and supplementary information 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 4, which was certified by First Mercantile, the investment custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplementary information. We have been informed by the Plan administrator that the investment custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the investment custodian as of and for the years ended December 31, 2010, 2009 and 2008, that the information provided to the Plan administrator by the investment custodian is complete and accurate.

The Plan's records and procedures are not adequate to assure the accuracy and completeness of employee and participants' data on which contributions are determined. Participation agreements were not available for contributions representing 38%, 19% and 50% of the contributions received in the plan for the years 2010, 2009 and 2008, respectively. We could not perform certain auditing procedures related to the accuracy and completeness of the participants' data maintained by the sponsor companies or individual participants for which participation agreements were not available.

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 supplementary information.

Fenner, Melstrom & Dooling, PLC

FENNER, MELSTROM & DOOLING, PLC

FEBRUARY 16, 2012

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ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2010, 2009, 2008 and 2007

	2010	2009	2008	(COMPILED) 2007
ASSETS				
INVESTMENTS (AT FAIR VALUE)				
COLLECTIVE INVESTMENT TRUST	$ 3,076,250	$ 1,777,753	$ 749,431	$ 1,547,259
TOTAL INVESTMENTS (AT FAIR VALUE)	3,076,250	1,777,753	749,431	1,547,259
RECEIVABLES				
PARTICIPANT CONTRIBUTIONS	38,999	10,094	3,155	9,223
EMPLOYER CONTRIBUTIONS	13,845	210,184	33,447	195,132
NOTES RECEIVABLE FROM PARTICIPANTS	93,991	108,291	23,828	30,986
TOTAL RECEIVABLES	146,835	328,569	60,430	235,341
TOTAL ASSETS	3,223,085	2,106,322	809,861	1,782,600
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACT	(3,609)	20,047	19,069	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,219,476	$ 2,126,369	$ 828,930	$ 1,782,600

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2010, 2009 and 2008

	2010	2009	2008
ADDITIONS TO NET ASSETS ATTRIBUTED TO INVESTMENT INCOME (LOSS)			
NET APPRECIATION/ (DEPRECIATION) IN FAIR VALUE OF INVESTMENTS	$ 237,244	$ 201,147	$ (292,072)
INTEREST INCOME FROM NOTES RECEIVABLE FROM PARTICIPANT	3,408	912	420
TOTAL INVESTMENT INCOME (LOSS)	240,652	202,059	(291,652)
CONTRIBUTIONS			
PARTICIPANTS	596,521	379,866	133,537
EMPLOYER	437,903	360,020	253,370
ROLLOVERS	154,937	-	-
OTHER	4,568	1,301	5,821
TOTAL CONTRIBUTIONS	1,193,929	741,187	392,728
TOTAL ADDITIONS	1,434,581	943,246	101,076
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO			
BENEFITS PAID TO PARTICIPANTS	351,188	219,573	742,653
ADMINISTRATIVE FEES	10,419	18,040	19,400
TOTAL DEDUCTIONS	361,607	237,613	762,053
NET INCREASE (DECREASE)	1,072,974	705,633	(660,977)
TRANSFER OF			
ASSETS FROM THIS PLAN	(569,469)	(1,059,856)	(88,338)
ASSETS TO THIS PLAN	589,602	1,651,662	-
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	2,126,369	828,930	1,578,245
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 3,219,476	$ 2,126,369	$ 828,930

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS
December 31, 2010, 2009 and 2008

1. DESCRIPTION OF PLAN

The following description of One Source Management, Ltd. (the "Company") Retirement and Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

GENERAL

One Source Management, Ltd., which is a "Professional Employer Organization" ("PEO"), established this voluntary defined contribution plan on January 1, 2003.

As a PEO, One Source Management, Ltd. assumes the role of employer for other companies who wish to lease their workers (the "Participating Companies"). Therefore, the Plan includes multiple Participating Companies, although the Internal Revenue Code ("IRC") does not consider the Plan to be a "multiple-employer" plan. The IRC requires that Plan discrimination testing be performed separately for each Participating Company as if its workers were not leased. The IRC thus also allows each Participating Company to have differing requirements for eligibility, matching contributions and vesting. One Source Management, Ltd. determines the aggregate matching contribution for all participants based on each Participating Company's matching provisions, and remits such amount to the Plan's investment custodian. Participants should refer to their applicable Participating Company's agreement with the Plan for specific details on eligibility, matching contributions and vesting.

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

PARTICIPANT CONTRIBUTIONS

Each year, participants may contribute up to the maximum percentage allowable of their pre-tax gross compensation, as defined in the Plan, not to exceed limits established by 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 or contribution plans at the discretion of the Plan administrator. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers several mutual funds, a money market fund, and an ABN AMRO guaranteed investment contract in a collective investment trust as investment options for participants. Participants may change their investment options daily.

(continued on next page)

1. DESCRIPTION OF PLAN (continued)

PARTICIPATING COMPANY CONTRIBUTIONS

Aggregate Participating Company contributions of $437,903, $360,020 and $253,370 were made for the years ended December 31, 2010, 2009 and 2008, respectively. Participants direct the investment of such contributions as described above. Contributions are subject to certain limitations.

PARTICIPANTS ACCOUNTS

Each participant's account is credited with the participant's contribution, allocations of (a) the Participating Company's discretionary contribution (when made), and (b) Plan earnings (losses), and charged with an allocation of certain 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.

VESTING

Participants are immediately vested in their contributions plus actual earnings thereon. Contributions made by the Participating Companies, if any, vest at varying rates as noted below. Generally, Participating Company contributions vest under either "safe harbor" provisions of the Internal Revenue Code whereby such contributions are immediately vested to the participant, or under a vesting schedule whereby the participant is 100% vested after six years of eligible service.

NOTES RECEIVABLE FROM PARTICIPANTS

Participants of Participating Companies who have elected to allow loans may borrow from their vested fund accounts a minimum of $1,000 up to a maximum of the lesser of $50,000 or 50% of their account balance. Loan terms range from one to five years and up to fifteen years for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined quarterly by the Plan administrator. Interest rates ranged from 1.4% to 3.25% per annum for the years 2010, 2009 and 2008. Principal and interest are paid ratably through payroll deductions.

(continued on next page)

1. DESCRIPTION OF PLAN (continued)

PAYMENTS OF BENEFITS

Upon normal retirement, termination of employment, death, or disability, the entire vested balance of the participant's account becomes payable to the participant or the participant's beneficiary. Withdrawals are also permitted for financial hardships under certain provisions of the Plan. However, an employee who makes a financial hardship withdrawal is prohibited from making any future voluntary contributions for six months.

FORFEITED ACCOUNTS

Forfeitures are utilized to pay fees and expenses incurred by the Plan. There were no forfeited nonvested accounts at December 31, 2010, 2009 and 2008.

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 risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF ACCOUNTING

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

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 disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

(continued on next page)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

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 3 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.

NOTES RECEIVABLE FROM PARTICIPANTS

Loans to participants are reported at their unpaid principal balances plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document. Total interest income received from participant loans amounted to $3,408, $912 and $420 for the years ended December 31, 2010, 2009 and 2008, respectively.

PAYMENT OF BENEFITS

Benefit payments are recorded when paid.

OPERATING EXPENSES

Fees paid for investment management services, legal, and auditors' services are paid principally by the Plan.

DATE OF MANAGEMENT'S REVIEW

Subsequent events were evaluated through February 16, 2012, which is the date the financial statements were available to be issued.

3. FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount 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.

The fair value measurement accounting literature establishes 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; Level 2 inputs consist of quoted prices for identical or similar assets in active or inactive markets or inputs other than quoted markets are observable, and Level 3 inputs are unobservable and 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. 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.

The following is a description of the valuation methodologies used for assets measured at fair market value. There have been no changes in methodologies used at December 31, 2010, 2009 and 2008.

Level 2 Fair Value Measurements
The fair value of the collective investment trust accounts is based on quoted net asset values of the underlying assets held in a collective investment trust arrangement as reported by First Mercantile.

Level 3 Fair Value Measurement
The fair value of the held in a collective investment trust is determined using an income approach by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

(continued on next page)

3. FAIR VALUE MEASUREMENTS (continued)

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

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY MARKET ACCOUNT	$ 528	$ -	$ -	$ 528
COMMON COLLECTIVE TRUSTS				
GROWTH FUNDS	-	832,380	-	832,380
BOND FUNDS	-	167,194	-	167,194
BLENDED FUNDS	-	924,890	-	924,890
GOVERNMENT FUNDS	-	82,131	-	82,131
VALUE FUNDS	-	142,735	-	142,735
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	926,392	926,392
TOTAL INVESTMENTS AT FAIR VALUE	$ 528	$ 2,149,330	$ 926,392	$ 3,076,250

LEVEL 3 GAINS AND LOSSES

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

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 934,526
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	3,609
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	-
SALES	(11,743)
ENDING BALANCE	$ 926,392

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3. FAIR VALUE MEASUREMENTS (continued)

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

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY MARKET ACCOUNT	$ 1	$ -	$ -	$ 1
COMMON COLLECTIVE TRUSTS				
GROWTH FUNDS	-	338,145	-	338,145
BOND FUNDS	-	47,304	-	47,304
BLENDED FUNDS	-	341,908	-	341,908
GOVERNMENT FUNDS	-	51,282	-	51,282
VALUE FUNDS	-	64,587	-	64,587
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	934,526	934,526
TOTAL INVESTMENTS AT FAIR VALUE	$ 1	$ 843,226	$ 934,526	$ 1,777,753

LEVEL 3 GAINS AND LOSSES

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:

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 220,832
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	(20,047)
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	733,741
SALES	-
ENDING BALANCE	$ 934,526

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3. FAIR VALUE MEASUREMENTS (continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2008:

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY				
MARKET ACCOUNT.....	$ 1	$ -	$ -	$ 1
COMMON				
COLLECTIVE TRUSTS				
GROWTH FUNDS	-	197,621	-	197,621
BOND FUNDS.....	-	28,165	-	28,165
BLENDED FUNDS.....	-	212,546	-	212,546
GOVERNMENT FUNDS.	-	53,226	-	53,226
VALUE FUNDS.....	-	37,040	-	37,040
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	220,832	220,832
TOTAL INVESTMENTS AT FAIR VALUE	$ 1	$ 528,598	$ 220,832	$ 749,431

LEVEL 3 GAINS AND LOSSES

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, 2008:

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 239,901
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	(19,069)
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	-
SALES	-
ENDING BALANCE	$ 220,832

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4. INFORMATION PREPARED AND CERTIFIED BY INVESTMENT CUSTODIAN

The information included in the accompanying financial statements and supplementary information was obtained from data that has been prepared and certified to be as complete and accurate by First Mercantile in accordance with Section 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 (ERISA).

Investments representing 5% or more of the net assets available for benefits:

	2010	2009	2008
VANGUARD 500 INDEX	$ 252,717	$ 127,762	$ 87,863
DODGE AND COX INTERNATIONAL	$ 186,233	$ N/A	$ 51,821
AMERICAN FUNDS GROWTH FUND OF AMERICA	$ 237,856	$ N/A	$ 63,186
VANGUARD GNMA	$ 82,131	$ N/A	$ 53,226
LIFESTYLE MODERATE GROWTH STRATEGY	$ 193,583	$ N/A	$ N/A
COLUMBIA ACORN Z	$ 188,921	$ N/A	$ N/A
PIMCO TOTAL RETURN INSTL	$ 167,194	$ N/A	$ N/A
ABN AMRO GUARANTEED INVESTMENT CONTRACT	$ 922,783	$ 954,573	$ 239,901

5. INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has entered into a guaranteed investment contract held in a collective investment trust with ABN AMRO. ABN AMRO maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at fair value as reported to the Plan by ABN AMRO.

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5. INVESTMENT CONTRACT WITH INSURANCE COMPANY (continued)

As described in Note 2, because the fund is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contract.

Contract value, as reported to the Plan, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on an annual basis for resetting.

Certain events limit the Plan's ability to transact at contract value with ABN AMRO. Such events include the following: (a) amendments to the Plan documents (including complete or partial plan termination or merger with another plan), (b) changes to Plan's prohibition on competing investment options or deletion of equity wash provisions, (c) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (d) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under Employee Retirement Income Security Act of 1974. The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with Plan participants, is probable.

The investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

6. PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are guaranteed investment contracts, a money market account, and mutual fund accounts managed by First Mercantile. First Mercantile is the investment custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest. Fees paid by the Plan for custodial services amounted to $10,419, $18,040 and $19,400 for December 31, 2010, 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 the Employee Retirement Income Security Act of 1974 (ERISA). In the event of Plan termination, participants would become 100% vested in their employer contributions.

8. TAX STATUS

The Internal Revenue Service has determined and informed the Company, by a letter dated February 28, 2011, that the Plan is designed in accordance with the applicable sections of the Internal Revenue Code. The Plan administrator and the Plan's legal counsel believe that certain Plan failures could result in adverse tax consequences to the Plan and its current and past participants. They further believe, however, that each of the failures may be corrected under the Voluntary Compliance Program of the Employee Plans Compliance Resolution System of the Internal Revenue Service and that the Plan will receive a favorable Compliance Statement. At this time, the Plan administration and the Plan's legal counsel are uncertain what requirements the Internal Revenue Service will impose upon the Plan Sponsor and its adopting employers to correct the Plan failures. Also, it should be noted that any favorable Compliance Statement issued by the Internal Revenue Service will only rectify the specific issues outlined within the application and that Compliance Statement.

9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2010 to the accrual basis Schedule H of the Form 5500 at fair value:

	2010
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 3,223,085
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(3,609)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 3,219,476

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2009 to the accrual basis Schedule H of the Form 5500 at fair value:

	2009
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 2,106,322
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(20,047)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 2,126,369

(continued on next page)

9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500 (continued)

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2008 to the accrual basis Schedule H of the Form 5500 at fair value:

	2008
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 809,861
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(19,069)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 828,930

SUPPLEMENTARY INFORMATION

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2010

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 252,717
*	FIRST MERCANTILE	DODGE & COX INTL	*	186,233
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	237,856
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	193,583
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	188,921
*	FIRST MERCANTILE	VANGUARD GNMA	*	82,131
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	90,870
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	167,194
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	102,666
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	129,682
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	67,949
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	65,388
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	43,966
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	74,786
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	94,289
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	67,665
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	50,387
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	53,047
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	528
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	922,783
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	93,991
				$ 3,166,632

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2009

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 127,762
*	FIRST MERCANTILE	DODGE & COX INTL	*	89,278
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	80,803
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	74,069
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	68,365
*	FIRST MERCANTILE	VANGUARD GNMA	*	51,282
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	48,614
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	47,304
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	45,122
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	43,187
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	42,904
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	36,297
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	33,489
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	21,683
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	20,206
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	5,966
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	4,009
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	2,886
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	954,573
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	108,291
				$ 1,906,091

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2008

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 87,863
*	FIRST MERCANTILE	DODGE & COX INTL	*	51,821
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	63,186
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	37,315
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	35,994
*	FIRST MERCANTILE	VANGUARD GNMA	*	53,226
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	25,407
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	28,165
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	20,735
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	30,867
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	24,995
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	18,117
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	12,045
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	9,067
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	4,013
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	2,106
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	1,402
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	DAVIS NY VENTURE	*	22,274
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	239,901
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	23,828
				$ 792,328

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2009

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 127,762
*	FIRST MERCANTILE	DODGE & COX INTL	*	89,278
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	80,803
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	74,069
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	68,365
*	FIRST MERCANTILE	VANGUARD GNMA	*	51,282
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	48,614
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	47,304
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	45,122
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	43,187
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	42,904
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	36,297
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	33,489
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	21,683
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	20,206
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	5,966
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	4,009
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	2,886
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	954,573
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	108,291
				$ 1,906,091

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES

Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2009** **This Form is Open to Public Inspection**

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

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

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

C If the plan is a collectively-bargained plan, check here. . . . . ▸ ☐

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

1b Three-digit plan number (PN) ▸ 001

1c Effective date of plan 01/01/2003

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

1789 INDIAN WOOD CIRCLE
SUITE 210
MAUMEE, OH 43537

2b Employer Identification Number (EIN) 04-3710647

2c Sponsor's telephone number 419-891-1516

2d Business code (see instructions) 541990

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	Robbin Syrek, Member	2/29/12	ROBBIN SYREK, MEMBER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Robbin Syrek, Member	2/29/12	ROBBIN SYREK, MEMBER
	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.

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") ONE SOURCE MANAGEMENT, LTD. 1789 INDIAN WOOD CIRCLE SUITE 210 MAUMEE, OH 43537	**3b** Administrator's EIN 04-3710647 **3c** Administrator's telephone number 419-891-1516

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:		**4b** EIN
a Sponsor's name		**4c** PN

5 Total number of participants at the beginning of the plan year	**5**	394
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**	483
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	49
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	532
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	532
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	284
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

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)			**9b** 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)	X	Trust	**(3)**	X	Trust
(4)	☐	General assets of the sponsor	**(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			**b General Schedules**		
(1)	X	**R** (Retirement Plan Information)	**(1)**	X	**H** (Financial Information)
(2)	☐	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	**(2)**	☐	**I** (Financial Information – Small Plan)
			(3)	☐	___ **A** (Insurance Information)
			(4)	☐	**C** (Service Provider Information)
(3)	☐	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	**(5)**	X	**D** (DFE/Participating Plan Information)
			(6)	☐	**G** (Financial Transaction Schedules)

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

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: THE PREMIER TRUST FUND OF FMT

b Name of sponsor of entity listed in (a): FIRST MERCANTILE TRUST 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)
62-1549435-001	C	1797800

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):

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

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b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

SCHEDULE H (Form 5500)	Financial 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), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

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)	33447	210184
(2) Participant contributions	1b(2)	3154	10094
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	23829	108291
(9) Value of interest in common/collective trusts	1c(9)	768499	1797800
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	828929	2126369
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	828929	2126369

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)	360020	
(B) Participants	2a(1)(B)	379866	
(C) Others (including rollovers)	2a(1)(C)	1301	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		741187
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)	911	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		911
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		201147
(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)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		943245

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	219572	
(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)		219572
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	18040	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		18040
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		237612

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		705633
l Transfers of assets:			
(1) To this plan	2l(1)		1651662
(2) From this plan	2l(2)		1059856

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)** ☒ Disclaimer **(4)** ☐ Adverse

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

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

(1) Name: FENNER MELSTROM & DOOLING **(2)** EIN: 38-1402622

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	X		

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
NATIONWIDE MAGAZINE	75-1695271	002

SCHEDULE R (Form 5500)	Retirement Plan 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 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection.**

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan
ONE SOURCE MANAGEMENT, LTD. RETIREMENT AND SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ONE SOURCE MANAGEMENT, LTD.

D Employer Identification Number (EIN)
04-3710647

Part I Distributions

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

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

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

EIN(s): 62-1549435 _____

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION
Years Ended December 31, 2010, 2009 and 2008

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

TABLE OF CONTENTS

	PAGE NO.
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	2
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	3
NOTES TO FINANCIAL STATEMENTS	4 - 16
SUPPLEMENTARY INFORMATION	
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2010	17
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2009	18
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - 2008	19

FMD
FENNER, MELSTROM & DOOLING, PLC
Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

TO THE TRUSTEE OF THE
ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN
HOLMES BEACH, FLORIDA

We were engaged to audit the financial statements of One Source Management, Ltd. Retirement and Savings Plan as of December 31, 2010, 2009 and 2008, and for the years then ended, and the December 31, 2010, 2009 and 2008 supplementary information, as listed in the accompanying table of contents. These financial statements and supplementary information 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 4, which was certified by First Mercantile, the investment custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplementary information. We have been informed by the Plan administrator that the investment custodian holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the investment custodian as of and for the years ended December 31, 2010, 2009 and 2008, that the information provided to the Plan administrator by the investment custodian is complete and accurate.

The Plan's records and procedures are not adequate to assure the accuracy and completeness of employee and participants' data on which contributions are determined. Participation agreements were not available for contributions representing 38%, 19% and 50% of the contributions received in the plan for the years 2010, 2009 and 2008, respectively. We could not perform certain auditing procedures related to the accuracy and completeness of the participants' data maintained by the sponsor companies or individual participants for which participation agreements were not available.

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 supplementary information.

Fenner, Melstrom & Dooling, PLC

FENNER, MELSTROM & DOOLING, PLC

FEBRUARY 16, 2012

355 S. Old Woodward, Suite 200, Birmingham, MI 48009
T 248-258-8900 F 248-258-2727 www.fmdcpas.com

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2010, 2009, 2008 and 2007

	2010	2009	2008	(COMPILED) 2007
ASSETS				
INVESTMENTS (AT FAIR VALUE)				
COLLECTIVE INVESTMENT TRUST	$ 3,076,250	$ 1,777,753	$ 749,431	$ 1,547,259
TOTAL INVESTMENTS (AT FAIR VALUE)	3,076,250	1,777,753	749,431	1,547,259
RECEIVABLES				
PARTICIPANT CONTRIBUTIONS	38,999	10,094	3,155	9,223
EMPLOYER CONTRIBUTIONS	13,845	210,184	33,447	195,132
NOTES RECEIVABLE FROM PARTICIPANTS	93,991	108,291	23,828	30,986
TOTAL RECEIVABLES	146,835	328,569	60,430	235,341
TOTAL ASSETS	3,223,085	2,106,322	809,861	1,782,600
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACT	(3,609)	20,047	19,069	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,219,476	$ 2,126,369	$ 828,930	$ 1,782,600

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2010, 2009 and 2008

	2010	2009	2008
ADDITIONS TO NET ASSETS ATTRIBUTED TO INVESTMENT INCOME (LOSS)			
NET APPRECIATION/ (DEPRECIATION) IN FAIR VALUE OF INVESTMENTS	$ 237,244	$ 201,147	$ (292,072)
INTEREST INCOME FROM NOTES RECEIVABLE FROM PARTICIPANT	3,408	912	420
TOTAL INVESTMENT INCOME (LOSS)	240,652	202,059	(291,652)
CONTRIBUTIONS			
PARTICIPANTS	596,521	379,866	133,537
EMPLOYER	437,903	360,020	253,370
ROLLOVERS	154,937	-	-
OTHER	4,568	1,301	5,821
TOTAL CONTRIBUTIONS	1,193,929	741,187	392,728
TOTAL ADDITIONS	1,434,581	943,246	101,076
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO			
BENEFITS PAID TO PARTICIPANTS	351,188	219,573	742,653
ADMINISTRATIVE FEES	10,419	18,040	19,400
TOTAL DEDUCTIONS	361,607	237,613	762,053
NET INCREASE (DECREASE)	1,072,974	705,633	(660,977)
TRANSFER OF			
ASSETS FROM THIS PLAN	(569,469)	(1,059,856)	(88,338)
ASSETS TO THIS PLAN	589,602	1,651,662	-
NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF YEAR	2,126,369	828,930	1,578,245
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR	$ 3,219,476	$ 2,126,369	$ 828,930

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS
December 31, 2010, 2009 and 2008

1. DESCRIPTION OF PLAN

The following description of One Source Management, Ltd. (the "Company") Retirement and Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

GENERAL

One Source Management, Ltd., which is a "Professional Employer Organization" ("PEO"), established this voluntary defined contribution plan on January 1, 2003.

As a PEO, One Source Management, Ltd. assumes the role of employer for other companies who wish to lease their workers (the "Participating Companies"). Therefore, the Plan includes multiple Participating Companies, although the Internal Revenue Code ("IRC") does not consider the Plan to be a "multiple-employer" plan. The IRC requires that Plan discrimination testing be performed separately for each Participating Company as if its workers were not leased. The IRC thus also allows each Participating Company to have differing requirements for eligibility, matching contributions and vesting. One Source Management, Ltd. determines the aggregate matching contribution for all participants based on each Participating Company's matching provisions, and remits such amount to the Plan's investment custodian. Participants should refer to their applicable Participating Company's agreement with the Plan for specific details on eligibility, matching contributions and vesting.

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

PARTICIPANT CONTRIBUTIONS

Each year, participants may contribute up to the maximum percentage allowable of their pre-tax gross compensation, as defined in the Plan, not to exceed limits established by 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 or contribution plans at the discretion of the Plan administrator. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers several mutual funds, a money market fund, and an ABN AMRO guaranteed investment contract in a collective investment trust as investment options for participants. Participants may change their investment options daily.

(continued on next page)

1. DESCRIPTION OF PLAN (continued)

PARTICIPATING COMPANY CONTRIBUTIONS

Aggregate Participating Company contributions of $437,903, $360,020 and $253,370 were made for the years ended December 31, 2010, 2009 and 2008, respectively. Participants direct the investment of such contributions as described above. Contributions are subject to certain limitations.

PARTICIPANTS ACCOUNTS

Each participant's account is credited with the participant's contribution, allocations of (a) the Participating Company's discretionary contribution (when made), and (b) Plan earnings (losses), and charged with an allocation of certain 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.

VESTING

Participants are immediately vested in their contributions plus actual earnings thereon. Contributions made by the Participating Companies, if any, vest at varying rates as noted below. Generally, Participating Company contributions vest under either "safe harbor" provisions of the Internal Revenue Code whereby such contributions are immediately vested to the participant, or under a vesting schedule whereby the participant is 100% vested after six years of eligible service.

NOTES RECEIVABLE FROM PARTICIPANTS

Participants of Participating Companies who have elected to allow loans may borrow from their vested fund accounts a minimum of $1,000 up to a maximum of the lesser of $50,000 or 50% of their account balance. Loan terms range from one to five years and up to fifteen years for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined quarterly by the Plan administrator. Interest rates ranged from 1.4% to 3.25% per annum for the years 2010, 2009 and 2008. Principal and interest are paid ratably through payroll deductions.

(continued on next page)

1. DESCRIPTION OF PLAN (continued)

PAYMENTS OF BENEFITS

Upon normal retirement, termination of employment, death, or disability, the entire vested balance of the participant's account becomes payable to the participant or the participant's beneficiary. Withdrawals are also permitted for financial hardships under certain provisions of the Plan. However, an employee who makes a financial hardship withdrawal is prohibited from making any future voluntary contributions for six months.

FORFEITED ACCOUNTS

Forfeitures are utilized to pay fees and expenses incurred by the Plan. There were no forfeited nonvested accounts at December 31, 2010, 2009 and 2008.

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 risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF ACCOUNTING

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

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 disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

(continued on next page)

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

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 3 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.

NOTES RECEIVABLE FROM PARTICIPANTS

Loans to participants are reported at their unpaid principal balances plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document. Total interest income received from participant loans amounted to $3,408, $912 and $420 for the years ended December 31, 2010, 2009 and 2008, respectively.

PAYMENT OF BENEFITS

Benefit payments are recorded when paid.

OPERATING EXPENSES

Fees paid for investment management services, legal, and auditors' services are paid principally by the Plan.

DATE OF MANAGEMENT'S REVIEW

Subsequent events were evaluated through February 16, 2012, which is the date the financial statements were available to be issued.

3. FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount 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.

The fair value measurement accounting literature establishes 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; Level 2 inputs consist of quoted prices for identical or similar assets in active or inactive markets or inputs other than quoted markets are observable, and Level 3 inputs are unobservable and 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. 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.

The following is a description of the valuation methodologies used for assets measured at fair market value. There have been no changes in methodologies used at December 31, 2010, 2009 and 2008.

Level 2 Fair Value Measurements
The fair value of the collective investment trust accounts is based on quoted net asset values of the underlying assets held in a collective investment trust arrangement as reported by First Mercantile.

Level 3 Fair Value Measurement
The fair value of the held in a collective investment trust is determined using an income approach by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

(continued on next page)

3. FAIR VALUE MEASUREMENTS (continued)

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

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY MARKET ACCOUNT	$ 528	$ -	$ -	$ 528
COMMON COLLECTIVE TRUSTS				
GROWTH FUNDS	-	832,380	-	832,380
BOND FUNDS	-	167,194	-	167,194
BLENDED FUNDS	-	924,890	-	924,890
GOVERNMENT FUNDS	-	82,131	-	82,131
VALUE FUNDS	-	142,735	-	142,735
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	926,392	926,392
TOTAL INVESTMENTS AT FAIR VALUE	$ 528	$ 2,149,330	$ 926,392	$ 3,076,250

LEVEL 3 GAINS AND LOSSES

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

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 934,526
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	3,609
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	-
SALES	(11,743)
ENDING BALANCE	$ 926,392

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3. FAIR VALUE MEASUREMENTS (continued)

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

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY MARKET ACCOUNT	$ 1	$ -	$ -	$ 1
COMMON COLLECTIVE TRUSTS				
GROWTH FUNDS	-	338,145	-	338,145
BOND FUNDS	-	47,304	-	47,304
BLENDED FUNDS	-	341,908	-	341,908
GOVERNMENT FUNDS	-	51,282	-	51,282
VALUE FUNDS	-	64,587	-	64,587
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	934,526	934,526
TOTAL INVESTMENTS AT FAIR VALUE	$ 1	$ 843,226	$ 934,526	$ 1,777,753

LEVEL 3 GAINS AND LOSSES

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:

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 220,832
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	(20,047)
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	733,741
SALES	-
ENDING BALANCE	$ 934,526

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3. FAIR VALUE MEASUREMENTS (continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2008:

	LEVEL 1	LEVEL 2	LEVEL 3	TOTAL FAIR VALUE
MONEY				
MARKET ACCOUNT.....	$ 1	$ -	$ -	$ 1
COMMON				
COLLECTIVE TRUSTS				
GROWTH FUNDS	-	197,621	-	197,621
BOND FUNDS.....	-	28,165	-	28,165
BLENDED FUNDS.....	-	212,546	-	212,546
GOVERNMENT FUNDS.	-	53,226	-	53,226
VALUE FUNDS.....	-	37,040	-	37,040
COMMON COLLECTIVE TRUST/STABLE VALUE FUND	-	-	220,832	220,832
TOTAL INVESTMENTS AT FAIR VALUE	$ 1	$ 528,598	$ 220,832	$ 749,431

LEVEL 3 GAINS AND LOSSES

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, 2008:

	COMMON COLLECTIVE TRUST
BEGINNING BALANCE	$ 239,901
TOTAL GAINS OR LOSSES INCLUDED IN NET ASSETS AVAILABLE FOR BENEFITS	(19,069)
PURCHASES, ISSUANCES, SALES, AND SETTLEMENTS:	
PURCHASES	-
SALES	-
ENDING BALANCE	$ 220,832

(continued on next page)

4. INFORMATION PREPARED AND CERTIFIED BY INVESTMENT CUSTODIAN

The information included in the accompanying financial statements and supplementary information was obtained from data that has been prepared and certified to be as complete and accurate by First Mercantile in accordance with Section 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 (ERISA).

Investments representing 5% or more of the net assets available for benefits:

	2010	2009	2008
VANGUARD 500 INDEX	$ 252,717	$ 127,762	$ 87,863
DODGE AND COX INTERNATIONAL	$ 186,233	$ N/A	$ 51,821
AMERICAN FUNDS GROWTH FUND OF AMERICA	$ 237,856	$ N/A	$ 63,186
VANGUARD GNMA	$ 82,131	$ N/A	$ 53,226
LIFESTYLE MODERATE GROWTH STRATEGY	$ 193,583	$ N/A	$ N/A
COLUMBIA ACORN Z	$ 188,921	$ N/A	$ N/A
PIMCO TOTAL RETURN INSTL	$ 167,194	$ N/A	$ N/A
ABN AMRO GUARANTEED INVESTMENT CONTRACT	$ 922,783	$ 954,573	$ 239,901

5. INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has entered into a guaranteed investment contract held in a collective investment trust with ABN AMRO. ABN AMRO maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at fair value as reported to the Plan by ABN AMRO.

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5. INVESTMENT CONTRACT WITH INSURANCE COMPANY (continued)

As described in Note 2, because the fund is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contract.

Contract value, as reported to the Plan, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on an annual basis for resetting.

Certain events limit the Plan's ability to transact at contract value with ABN AMRO. Such events include the following: (a) amendments to the Plan documents (including complete or partial plan termination or merger with another plan), (b) changes to Plan's prohibition on competing investment options or deletion of equity wash provisions, (c) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (d) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under Employee Retirement Income Security Act of 1974. The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with Plan participants, is probable.

The investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

6. PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are guaranteed investment contracts, a money market account, and mutual fund accounts managed by First Mercantile. First Mercantile is the investment custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest. Fees paid by the Plan for custodial services amounted to $10,419, $18,040 and $19,400 for December 31, 2010, 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 the Employee Retirement Income Security Act of 1974 (ERISA). In the event of Plan termination, participants would become 100% vested in their employer contributions.

8. TAX STATUS

The Internal Revenue Service has determined and informed the Company, by a letter dated February 28, 2011, that the Plan is designed in accordance with the applicable sections of the Internal Revenue Code. The Plan administrator and the Plan's legal counsel believe that certain Plan failures could result in adverse tax consequences to the Plan and its current and past participants. They further believe, however, that each of the failures may be corrected under the Voluntary Compliance Program of the Employee Plans Compliance Resolution System of the Internal Revenue Service and that the Plan will receive a favorable Compliance Statement. At this time, the Plan administration and the Plan's legal counsel are uncertain what requirements the Internal Revenue Service will impose upon the Plan Sponsor and its adopting employers to correct the Plan failures. Also, it should be noted that any favorable Compliance Statement issued by the Internal Revenue Service will only rectify the specific issues outlined within the application and that Compliance Statement.

9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2010 to the accrual basis Schedule H of the Form 5500 at fair value:

	2010
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 3,223,085
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(3,609)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 3,219,476

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2009 to the accrual basis Schedule H of the Form 5500 at fair value:

	2009
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 2,106,322
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(20,047)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 2,126,369

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9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500 (continued)

The following is a reconciliation of the accrual basis net assets available for benefits per the financial statements at contract value at December 31, 2008 to the accrual basis Schedule H of the Form 5500 at fair value:

	2008
NET ASSETS AVAILABLE FOR BENEFITS PER THE FINANCIAL STATEMENTS	$ 809,861
ADJUSTMENT FROM CONTRACT VALUE TO FAIR VALUE FOR FULLY-BENEFIT RESPONSIVE INVESTMENT CONTRACT	(19,069)
NET ASSETS AVAILABLE FOR BENEFITS PER SCHEDULE H OF FORM 5500	$ 828,930

SUPPLEMENTARY INFORMATION

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2010

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 252,717
*	FIRST MERCANTILE	DODGE & COX INTL	*	186,233
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	237,856
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	193,583
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	188,921
*	FIRST MERCANTILE	VANGUARD GNMA	*	82,131
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	90,870
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	167,194
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	102,666
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	129,682
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	67,949
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	65,388
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	43,966
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	74,786
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	94,289
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	67,665
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	50,387
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	53,047
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	528
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	922,783
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	93,991
				$ 3,166,632

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES

ONE SOURCE MANAGEMENT, LTD.
RETIREMENT AND SAVINGS PLAN

EIN #04-3710647 - PLAN #001
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
(Schedule H, Line 4 (i))
December 31, 2009

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 127,762
*	FIRST MERCANTILE	DODGE & COX INTL	*	89,278
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	80,803
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	74,069
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	68,365
*	FIRST MERCANTILE	VANGUARD GNMA	*	51,282
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	48,614
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	47,304
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	45,122
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	43,187
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	42,904
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	36,297
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	33,489
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	21,683
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	20,206
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	5,966
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	4,009
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	2,886
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	954,573
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	108,291
				$ 1,906,091

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(Schedule H, Line 4 (i))
December 31, 2008

(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
*	FIRST MERCANTILE	VANGUARD 500 INDEX	*	$ 87,863
*	FIRST MERCANTILE	DODGE & COX INTL	*	51,821
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	63,186
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	37,315
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	35,994
*	FIRST MERCANTILE	VANGUARD GNMA	*	53,226
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	25,407
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	28,165
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	20,735
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	30,867
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	24,995
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	18,117
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	12,045
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	9,067
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	4,013
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	2,106
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	1,402
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	DAVIS NY VENTURE	*	22,274
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	239,901
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	23,828
				$ 792,328

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(Schedule H, Line 4 (i))
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(a)	(b) Identity of issue borrower, lessor, or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
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*	FIRST MERCANTILE	DODGE & COX INTL	*	89,278
*	FIRST MERCANTILE	AMERICAN FUNDS GROWTH FUND	*	80,803
*	FIRST MERCANTILE	LIFESTYLE MODERATE GROWTH STRATEGY	*	74,069
*	FIRST MERCANTILE	COLUMBIA ACORN Z	*	68,365
*	FIRST MERCANTILE	VANGUARD GNMA	*	51,282
*	FIRST MERCANTILE	ROYCE MICRO-CAP INV.	*	48,614
*	FIRST MERCANTILE	PIMCO TOTAL RETURN INSTL.	*	47,304
*	FIRST MERCANTILE	LIFESTYLE AGGRESSIVE GROWTH STRATEGY	*	45,122
*	FIRST MERCANTILE	VANGUARD MIDCAP INDEX	*	43,187
*	FIRST MERCANTILE	LONGLEAF PARTNERS FUND	*	42,904
*	FIRST MERCANTILE	LIFESTYLE CONSERVATIVE GROWTH STRATEGY	*	36,297
*	FIRST MERCANTILE	DAVIS SELECTED ADVISORS	*	33,489
*	FIRST MERCANTILE	HARTLAND VALUE FUND	*	21,683
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2030 STRATEGY	*	20,206
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2020 STRATEGY	*	5,966
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2010 STRATEGY	*	4,009
*	FIRST MERCANTILE	RUSSELL LIFE POINTS 2040 STRATEGY	*	2,886
*	FIRST MERCANTILE	US TREASURY MONEY MARKET	*	1
*	FIRST MERCANTILE	ABN AMRO STABLE VALUE FUND	*	954,573
*	NOTES RECEIVABLE FROM PARTICIPANTS	INTEREST RATES 1.4% TO 3.25%	*	108,291
				$ 1,906,091

(a) An asterisk in this column identifies an entity known to be a party-in-interest

(d) An asterisk in this column indicates cost omitted for participant directed investments

SEE ACCOMPANYING NOTES