

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2010 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2010 or fiscal plan year beginning <u>07/01/2010</u> and ending <u>06/30/2011</u>	
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 <u>THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY EMPLOYEES' RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶	<u>001</u>
	1c Effective date of plan <u>07/01/1974</u>	
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY</u> <u>2000 BROOKPARK ROAD</u> <u>CLEVELAND, OH 44109-5812</u>	2b Employer Identification Number (EIN) <u>34-0766171</u>	
	2c Sponsor's telephone number <u>216-749-1428</u>	
	2d Business code (see instructions) <u>451211</u>	

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.	04/11/2012	MARK AKERS
	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.

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY 2000 BROOKPARK ROAD CLEVELAND, OH 44109-5812	3b Administrator's EIN 34-0766171 3c Administrator's telephone number 216-749-1428
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	116
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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	55
b Retired or separated participants receiving benefits.....	6b	31
c Other retired or separated participants entitled to future benefits.....	6c	25
d Subtotal. Add lines 6a , 6b , and 6c	6d	111
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	4
f Total. Add lines 6d and 6e	6f	115
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	2
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:
 1A 1G

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2010 This Form is Open to Public Inspection
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For calendar plan year 2010 or fiscal plan year beginning 07/01/2010 and ending 06/30/2011

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY EMPLOYEES' RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY</u>	D Employer Identification Number (EIN) <u>34-0766171</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information
1	Enter the valuation date: Month <u>07</u> Day <u>01</u> Year <u>2010</u>
2	Assets:
a	Market value 2a <u>13319531</u>
b	Actuarial value 2b <u>13319531</u>
3	Funding target/participant count breakdown
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>35</u> <u>4060313</u>
b	For terminated vested participants 3b <u>26</u> <u>935973</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>314681</u>
(2)	Vested benefits 3c(2) <u>5544578</u>
(3)	Total active 3c(3) <u>55</u> <u>5859259</u>
d	Total 3d <u>116</u> <u>10855545</u>
4	If the plan is at-risk, check the box and complete items (a) and (b) ☐
a	Funding target disregarding prescribed at-risk assumptions 4a
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor 4b
5	Effective interest rate 5 <u>6.55</u> %
6	Target normal cost 6 <u>342822</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	
Signature of actuary	Date
<u>AUDREY A. CERVAS</u>	<u>11-06430</u>
Type or print name of actuary	Most recent enrollment number
<u>TOWERS WATSON DELAWARE INC.</u>	<u>216-937-4000</u>
Firm name	Telephone number (including area code)
<u>1001 LAKESIDE AVENUE, SUITE 1900</u> <u>CLEVELAND, OH 44114-1172</u>	
Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2010
v.092308.1

Part II	Beginning of year carryover and prefunding balances	(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	1470016	662942
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9	Amount remaining (Item 7 minus item 8).....	1470016	662942
10	Interest on item 9 using prior year's actual return of <u>12.27</u> %	180371	81343
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		780140
b	Interest on (a) using prior year's effective rate of <u>7.51</u> %		58589
c	Total available at beginning of current plan year to add to prefunding balance		838729
d	Portion of (c) to be added to prefunding balance.....		0
12	Reduction in balances due to elections or deemed elections.....	0	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	1650387	744285

Part III	Funding percentages		
14	Funding target attainment percentage.....	14	100.63 %
15	Adjusted funding target attainment percentage.....	15	122.69 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	118.93 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV	Contributions and liquidity shortfalls		
18	Contributions made to the plan for the plan year by employer(s) and employees:		
	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
	04/26/2011	100000	
	06/20/2011	100000	
	08/24/2011	150000	
	12/16/2011	175000	
	01/30/2012	150000	
	02/16/2012	100000	
	Totals ▶	18(b)	875000
		18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a	Contributions allocated toward unpaid minimum required contribution from prior years.....	19a
b	Contributions made to avoid restrictions adjusted to valuation date	19b
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c 803721
20	Quarterly contributions and liquidity shortfalls:	
a	Did the plan have a "funding shortfall" for the prior year?	☐ Yes ☒ No
b	If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☐ Yes ☐ No
c	If 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: 4.44 %	2nd segment: 6.62 %	3rd segment: 6.74 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....	29	
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	273508
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	273508
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	0
36 Additional cash requirement (item 34 minus item 35).....	36	273508
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	803721
38 Interest-adjusted excess contributions for current year (see instructions).....	38	530213
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

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

For calendar plan year 2010 or fiscal plan year beginning **07/01/2010** and ending **06/30/2011**

A Name of plan THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY EMPLOYEES' RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY	D Employer Identification Number (EIN) 34-0766171	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation PNC INSTITUTIONAL INVESTMENTS 25-1211909
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(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2010
		This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 07/01/2010 and ending 06/30/2011		
A Name of plan THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY EMPLOYEES' RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY	D Employer Identification Number (EIN) 34-0766171	

Part I	Asset and Liability Statement
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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)	450000	675000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	27341	25040
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	317711	365812
(2) U.S. Government securities.....	1c(2)	37221	29754
(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)	2502181	3149481
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	10000036	11151228
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(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	13334490	15396315

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 through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	13334490	15396315
---	-----------	----------	----------

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)	875000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		875000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	316	
(B) U.S. Government securities	2b(1)(B)	1998	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2314
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	59744	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	335292	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		395036
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	1590534	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	1376818	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		213716

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	597294	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		597294
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		589204
c Other income.....	2c		-1744
d Total income. Add all income amounts in column (b) and enter total.....	2d		2670820

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	608995	
(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)		608995
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)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		608995

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2061825
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ 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: **BLANDA BECKER & COMPANY**

(2) EIN: **34-1601475**

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.).....		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.).....		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.)		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.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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?		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?		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.).....	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.).....		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?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....			
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.			

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2010 This Form is Open to Public Inspection.
For calendar plan year 2010 or fiscal plan year beginning 07/01/2010 and ending 06/30/2011		
A Name of plan THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY EMPLOYEES' RETIREMENT PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY		D Employer Identification Number (EIN) 34-0766171
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 25-1211909		
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 0
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 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		
For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.		
Schedule R (Form 5500) 2010 v.092308.1		

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): _____

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEE'S RETIREMENT PLAN

FINANCIAL REPORT

JUNE 30, 2011 AND 2010

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEES' RETIREMENT PLAN

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March 28, 2012

The Incorporated Trustees
of the Gospel Worker Society
The Plan Administrator of
Employee's Retirement Plan

We were engaged to audit the accompanying statements of net assets available for benefits of The Incorporated Trustees of the Gospel Worker Society Employee's Retirement Plan as of June 30, 2011 and 2010, and the related statement of changes in net assets available for benefits for the years then ended, and the financial schedules for the year ended June 30, 2011. These financial statements and schedules 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 PNC, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and financial schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended June 30, 2011 and 2010 that the information provided to the plan administrator by the trustee is complete and accurate.

The information disclosed in Note 7 "Accumulated Plan Benefits" was obtained from the Towers Watson actuary report dated July 1, 2010 and we did not perform any auditing procedures with respect to this summarized information.

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

Blanda Becker + Co Inc
Blanda Becker + Co., Inc.

The accompanying notes are an integral part of these financial statements

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

June 30, 2011 and 2010

ASSETS	<u>2011</u>	<u>2010</u>
INVESTMENTS, at fair value		
Short-term investments	\$ 365,812	\$ 317,711
Government and agency obligations	29,754	37,221
Mutual funds	11,151,228	10,000,036
Common stocks	<u>3,149,481</u>	<u>2,502,181</u>
Total investments	14,696,275	12,857,149
RECEIVABLES		
Employer's contributions	675,000	450,000
Accrued income	<u>25,040</u>	<u>27,341</u>
	700,040	477,341
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 15,396,315</u>	<u>\$ 13,334,490</u>

The accompanying notes are an integral part of these financial statements

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN
STATEMENTS OF CHANGES IN ASSETS AVAILABLE FOR BENEFITS

Years Ended June 30, 2011 and 2010

	<u>2011</u>	<u>2010</u>
ADDITIONS TO NET ASSETS		
Contributions - employer	\$ 875,000	\$ 850,000
Gain on sale of investments	231,599	178,767
Interest and dividends received	397,350	343,301
Unrealized appreciation	1,168,614	854,741
Miscellaneous	<u>-</u>	<u>6,616</u>
TOTAL ADDITIONS	2,672,563	2,233,425
DEDUCTIONS		
Retirement benefits paid to participants	608,995	620,329
Miscellaneous	<u>1,743</u>	<u>-</u>
TOTAL DEDUCTIONS	610,738	620,329
NET INCREASE (DECREASE)	2,061,825	1,613,096
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>13,334,490</u>	<u>11,721,394</u>
End of year	<u>\$ 15,396,315</u>	<u>\$ 13,334,490</u>

The accompanying notes are an integral part of these financial statements

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of Plan

The following brief description of The Incorporated Trustees of the Gospel Worker Society Employee's Retirement Plan (Plan) is provided for general information purpose only. Participants should refer to the Plan agreement for more complete information.

A. General

The Plan is a defined benefit pension plan covering substantially all employees of The Incorporated Gospel Worker Society. It is subject to the provision of the Employee Retirement Income Security Act of 1974 (ERISA).

B. Eligibility to participate

Employees participate in the Plan on July 1 following completion of one year of service, attainment of age 21 and completion of 1,000 hours of service in a twelve month period measured from an individual employee's date of hire or the first day of any Plan year thereafter.

C. Pension benefits

Employees with one or more years of service are entitled to monthly pension benefits beginning at normal retirement age (65) equal to 2.5% of average monthly compensation plus 2.7% of average monthly compensation in excess of social security compensation times years of service to a maximum of 35 years. There are minimum retirement monthly benefits of \$13.50 times years of service (maximum 35 years) and the benefit as computed under the formula in effect prior to July 1, 1997, for service to June 30, 1997. The maximum benefit is the lesser of the Internal Revenue Code Section 415 dollar limit and 100% of average compensation for the highest three years. The average monthly compensation is the average monthly pay for the highest five consecutive years in the ten years preceding retirement. Monthly compensation cannot exceed \$20,417 starting July 1, 2010. Social Security Covered Compensation is expressed as a monthly amount and equals one-twelfth of the 35-year average of taxable wages ending in the year of Social Security Normal Retirement.

The Plan permits early retirement at age 60 for those employees with at least 15 years of service. Such employees may elect a deferred benefit commencing at their normal retirement date, computed by multiplying the normal retirement benefit by a ratio of completed service at early retirement to total possible service to age 65, further reduced actuarially for early commencement.

Employees with five or more years of service, regardless of age, are eligible for a vested deferred retirement benefit that equals 100% of the early retirement benefit described above. If an employee terminates before rendering five years of service, he forfeits the right to receive any portion of his accumulated Plan benefits.

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of Plan (continued)

D. Death and disability benefits

If an active participant dies subsequent to becoming eligible for early retirement, but prior to retirement, his beneficiary would receive 75% of the participant's accrued early retirement benefits payable in monthly income or a lump sum. If the participant has a surviving spouse, however, the spouse would receive the benefit in Pre-Retirement Death Benefit (vested), if of greater value. If an employee or former employee dies subsequent to becoming eligible for vested benefits but prior to retirement, his beneficiary would receive 50% of the participant's accrued early retirement benefits payable in monthly income or a lump sum. Active employees with 15 or more years of service who become totally disabled will receive monthly disability benefits that are equal to the early retirement benefits described in [C] above without actuarial reduction. Disability benefits are paid until death or recovery from total disability. Evidence of continued eligibility may be requested by the Retirement Committee.

E. Contributions

Annual contributions are made at the discretion of the Plan Administrator in an amount that is within the range of minimum and maximum tax deductible limits. These amounts are determined by independent consulting actuaries in order to provide sufficient assets to meet the benefits to ultimately be paid to Plan participants. The determination of such amounts by the actuaries is based upon current market interest rates, compensation increases rate (4.0%), mortality and turnover experience, and retirement at normal retirement age (65).

F. Plan termination

In the event the Plan terminates, the net assets of the Plan shall be allocated among the participants of the Plan in accordance with provisions of Section 4044 of Employee Retirement Income Security Act of 1974 (ERISA), as amended, and the benefits of such participants shall be fully vested and non-forfeitable to the extent funded following such allocation.

Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participant's benefits. Whether a particular participant's accumulated plan benefit will be paid depends on both the priority of these benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (PBGC) at the time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty while other benefits may be provided for at all.

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2. Summary of Significant Accounting Policies

A. Date of Management's Review

Subsequent events were evaluated through March 28, 2012, which is the date the financial statements were available to be issued.

B. Basis of Accounting

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

C. Estimates

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

D. Investment Valuation and Income Recognition

Investments are reported at fair market 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. The fair values of common stock, most corporate bonds, and U.S. government securities are based on quoted market prices.

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 includes the plan's gains and losses on investments bought and sold as well as held during the year.

E. Expenses of the Plan

All administrative and trustee expenses are paid by the Company.

F. Payment of Benefits

Benefit payments to participants are recorded upon distribution.

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 2. Summary of Significant Accounting Policies (continued)

G. Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value accumulated plan benefits for determining cash contributions is determined by Towers Watson, Plan actuaries, and results from applying actuarial assumptions to reflect the probability of payment (by means of decrements such as for death, disability, withdrawals or retirements) and the time value of money (through discounts for interest) between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuation as of July 1, 2010 and 2009 were [a] life expectancy of participants (2010 the RP-2000 Mortality Table for males and females projected to 2010 using scale AA; 2009 the 1994 Group Annuity Mortality Table for males and females projected to 2002), [b] disability assumptions (2009 and 2008, the Watson Wyatt 1985 Disability Study Class I male and female), [c] retirement age assumptions (the assumed average retirement age was 65), [d] investment return (assumed average rate of return 6.0% for 2010 and 6.5% for 2009) and [e] salary scale (4% compounded annually). The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Different actuarial assumptions and other factors would be applicable in determining the actuarial present value of accumulated plan benefits if the Plan is terminated.

Note 3. Fair Value Measurements

The Plan's investments are reported at fair market value in the accompanying statement 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 market 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 different fair value measurement at the reporting date.

The fair value measurements authoritative literature established a fair value hierarchy that prioritizes 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 observable inputs other than quoted prices for identical assets and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. The Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

Level 1 Fair Value Measurements

The fair values of common stock, most corporate bonds, and U.S. government securities are based on quoted market prices.

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

Note 4. Investments

The Plan's investments are held by the bank-administered trust fund. Investments that represent 5% or more of the Plan's net assets are as follows:

	<u>June 30, 2011</u>		<u>June 30, 2010</u>	
	Shares/ Face Value <u>Cost</u>	Current <u>Value</u>	Shares/ Face Value <u>Cost</u>	Current <u>Value</u>
PNC International Equity Fund	\$ 1,342,315	\$ 1,485,791	\$ 1,087,930	\$ 911,898
PNC Bond Fund Class I	\$ 8,333,245	\$ 7,940,406	\$ 8,126,256	\$ 8,495,581
PNC Small Cap Core Fund	\$ 614,507	\$ 747,659		

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

Note 5. Information Prepared and Certified By Trustee

National City Bank, Trustee of the Plan, holds the Plan's investment assets and executes transactions therein. Financial information relating to those assets is included in the accompanying financial statements and schedules based on information that has been prepared and certified by the Trustee. The information, which has not been audited by us as independent accountants, is summarized below:

	<u>June 30, 2011</u>		<u>June 30, 2010</u>	
	Current		Current	
	<u>Value</u>	<u>Cost</u>	<u>Value</u>	<u>Cost</u>
Investments:				
Short-term investments including money market funds	\$ 365,812	\$ 365,812	\$ 317,711	\$ 317,711
Government and agency obligations	\$ 29,754	\$ 28,631	\$ 37,221	\$ 34,266
Mutual funds	\$ 11,151,227	\$ 10,620,681	\$ 10,000,036	\$ 9,843,378
Common stocks	\$ 3,149,481	\$ 2,512,535	\$ 2,502,181	\$ 2,406,245
Accrued income	\$ 25,040	\$ 25,040	\$ 27,341	\$ 27,341

Items not audited which occasioned changes in net assets include the following:

	<u>2011</u>	<u>2010</u>
Net appreciation (depreciation) in fair value of investments (government, agency obligations, and stocks)	\$ 1,168,614	\$ 854,741
Interest and dividends received	397,350	343,301
Gain (loss) on sale of investments	231,599	178,767
Miscellaneous - net	<u>(1,743)</u>	<u>6,616</u>
	\$ 1,795,820	\$ 1,383,425

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEE'S RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 6. Income tax status

The Internal Revenue Service has ruled that the Plan qualifies under Section 401 and the related Trust qualifies under Section 501(a) of the Internal Revenue Code(IRC) and is, therefore, not subject to tax. The plan was amended June 30, 1997 and approved by the Internal Revenue Service. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The plan administrator is not aware of any course of action or series of events that might adversely affect the Plan's qualified status. Participants are not subject to federal income taxes on the contributions of the Company, or any gains or income earned by Plan assets. However, plan benefits received are taxable to them. The plan had minor amendments made in January 2007. A favorable determination letter from the Internal Revenue Service was received in March 2008.

Note 7. Funding policy

The Company's funding policy is to make not less than the ERISA minimum annual contributions to the Plan in amounts sufficient to fund the Plan's normal service cost on a current basis plus the amount required to amortize the unfunded actuarial liability based on ERISA requirement amortization period.

Note 8. Accumulated plan benefits

	<u>2010</u>	<u>2009</u>
Actuarial present value of accumulated plan benefits		
Vested benefits:		
Participants currently receiving payments	\$ 4,047,975	\$ 3,977,584
Other participants	<u>6,838,299</u>	<u>5,891,586</u>
	10,886,274	9,869,170
Non-vested benefits	<u>243,307</u>	<u>233,144</u>
	<u>\$ 11,129,581</u>	<u>\$ 10,102,314</u>

The changes in accumulated plan benefits comprise the following:

Actuarial present value of accumulated benefits on July 1, 2009	<u>\$ 10,102,314</u>
Increase(decrease) in plan year due to:	
Benefits Accumulated	329,923
Decrease in discount period	657,935
Benefits paid	(620,329)
Assumption changes	585,839
Actuarial gains and losses	<u>73,899</u>
Actuarial present value of accumulated benefits on July 1, 2010	<u>\$ 11,129,581</u>

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

Note 9. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of 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 change could materially affect the amounts reported in the statement of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171
Plan No. 001

FORM 5500, SCHEDULE H, PART I, LINE 1C(1)(2) INVESTMENTS

June 30, 2011

<u>Identity of Party</u>	<u>Description of Investment</u>	<u>Cost</u>	<u>Current Value</u>
<u>UNITED STATES TREASURY AND GOVERNMENT AGENCY SECURITIES</u>			
Federal National Mortgage Association			
GTD MTG - 7.00% due September 1, 2015		\$ 486	\$ 507
Federal National Mortgage Association			
GTD MTG - 7.00% due June 1, 2031		4,601	5,265
GNMA GTD Pass-thru CTF Pool - 7.0%			
due May 15, 2023		<u>21,249</u>	<u>23,982</u>
		<u>\$ 26,336</u>	<u>\$ 29,754</u>

FORM 5500, SCHEDULE H, PART I, LINE 1C(1) INVESTMENTS

* PNC Prime Money Market Fund discretionary	<u>\$ 365,812</u>	<u>\$ 365,812</u>
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* represents a party-in-interest

The accompanying notes are an integral part of these financial statements

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171

Plan No. 001

FORM 5500, SCHEDULE H, PART I, LINE 1C(13) INVESTMENTS

June 30, 2011

<u>Identity of party</u>	<u>Description of investment</u>	<u>Cost</u>	<u>Current Value</u>
<u>MUTUAL FUNDS</u>			
PNC International Equity Fund		\$ 1,342,315	\$ 1,485,791
PNC Bond Fund Class I		\$ 7,940,406	\$ 8,333,245
PNC Small Cap Core Fund		\$ 614,507	\$ 747,659
Ishares Russell Midcap Index Fd		\$ 577,849	\$ 584,533
		\$ 10,475,077	\$ 11,151,228

FORM 5500, SCHEDULE H, PART I, LINE 1B(3) INVESTMENTS

Accrued income	\$ 25,040	\$ 25,040
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The accompanying notes are an integral part of these financial statements

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171

Plan No. 001

FORM 5500, SCHEDULE H, PART I, LINE 1C4(B) INVESTMENTS

June 30, 2011

<u>Shares</u>	<u>Common stocks</u>	<u>Cost</u>	<u>Current Value</u>
599	Allergan Inc	\$ 27,063	\$ 49,867
766	American Express	32,956	39,602
829	Ameriprise Financial	34,098	47,817
1412	Amerisource Bergen	40,066	58,457
228	Apache Corporation	20,000	28,133
390	Apple Inc	42,304	130,911
1,097	AT&T Inc	26,963	34,457
560	Baker Hughes	38,895	40,634
2,173	Bank of America	35,899	23,816
500	Borg Warner	38,298	40,395
945	Capital One Financial	40,776	48,828
1,055	Celanese Corp	23,467	56,242
810	CenturyLink	27,468	32,748
950	Chevron Corporation	70,559	97,698
688	Chubb Corp	30,686	43,076
962	Citigroup	40,930	40,058
630	Coca Cola Co	35,904	42,393
870	Cooper Industries	38,240	51,913
970	Covidien PLC	45,650	51,633
323	Cummins Inc	16,996	33,427
470	Deere & Co	38,481	38,752
1,130	Disney Walt Co	47,249	44,115
	Totals forward	\$ 792,948	\$ 1,074,972

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171
Plan No. 001

FORM 5500, SCHEDULE H, PART I, LINE 1C4(B) INVESTMENTS

June 30, 2011

Totals forward		\$	792,948	\$	1,074,972
707	Dollar Tree		20,891		47,100
760	Dover Corp		37,784		51,528
800	DuPont E I DeNemours		35,249		43,240
1,985	EMC Corp		33,897		54,687
790	Eaton Corp		39,838		40,646
980	Ebay Inc		33,723		31,625
540	Equity Residential		24,451		32,400
1,360	Exxon Mobil Corp		101,329		110,677
2,294	General Electric		38,874		43,265
104	Google Inc		45,814		52,664
900	The Hershey Company		43,193		51,165
370	Hess Corporation		29,421		27,661
2,004	Intel Corp		35,786		44,409
390	International Business Machs Corp		42,349		66,905
1,712	JP Morgan Chase & Co		56,706		70,089
1,038	Johnson & Johnson		66,901		69,048
480	Lauder Estee Cos Inc		45,721		50,491
1,400	Limited Brands		35,002		53,830
1,720	Macy's Inc		48,466		50,293
1,620	Mattel Inc		35,078		44,534
667	Merck & Co		25,019		23,538
Totals forward		\$	1,668,440	\$	2,134,767

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY
EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171
Plan No. 001

FORM 5500, SCHEDULE H, PART I, LINE 1C4(B) INVESTMENTS

June 30, 2011

<u>Shares</u>	<u>Common stocks</u>	<u>Cost</u>	<u>Current Value</u>
Totals forward		\$ 1,668,440	\$ 2,134,767
2,487	Microsoft	62,738	64,662
790	Moody's	31,125	30,294
960	National Oilwell Varco	40,448	75,082
880	Northeast Utilities	28,441	30,950
1,993	Oracle Corp	39,580	65,590
401	PPG Industries Inc	25,501	36,407
2,757	Pzifer Inc	44,676	56,794
997	Proctor & Gamble	57,411	63,379
960	Qualcomm Inc	51,871	54,518
302	Shire PLC	20,582	28,451
581	JM Smucker	36,278	44,412
890	Texas Instruments	31,990	29,219
650	Tiffany & Co	37,979	51,038
549	Union Pacific Corp	40,850	57,316
564	United Technologies Corp	32,537	49,920
1,102	Unitedhealth Group Inc	29,710	56,841
928	Viacom Inc Class B	21,437	47,328
788	Wal Mart Stores Inc	43,873	41,873
820	Walgreen Co	34,852	34,816
1,681	Wells Fargo & Co	44,635	47,168
1,552	Wisconsin Energy Corp	31,567	48,654
		<u>\$ 2,456,521</u>	<u>\$ 3,149,479</u>

THE INCORPORATED TRUSTEES OF THE GOSPEL WORKER SOCIETY

EMPLOYEE'S RETIREMENT PLAN

EMPLOYER NO. 34-0766171
Plan No. 001

FORM 5500, SCHEDULE H, PART IV, LINE 4(J)
REPORTABLE TRANSACTIONS

Year Ended June 30, 2011

INDIVIDUAL SECURITY TRANSACTIONS IN EXCESS OF 5%
OF THE CURRENT VALUE OF PLAN ASSETS

Total value of Plan assets - June 30, 2011	\$	14,696,275
5% of total value of Plan assets	\$	734,814

<u>Identity</u> <u>of Par-</u> <u>ticipant</u>	<u>Description of</u> <u>assets</u>	<u>Purchase/Selling</u> <u>price</u>	<u>Expenses</u> <u>incurred</u> <u>with</u> <u>transactions</u>	<u>Cost of</u> <u>assets</u>	<u>Current value</u> <u>of assets on</u> <u>trans. date</u>	<u>Net gain(loss)</u>
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No individual security transactions were in excess of 5% during the plan year

The accompanying notes are an integral part of these financial statements

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	The Incorporated Trustees of the Gospel Worker Society
EIN/PN	34-0766171/001
Plan Name	The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
Valuation Date	July 1, 2010
Enrolled Actuary	Audrey A. Cervas
Enrollment Number	11-06430

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of July 1, 2010

See Schedule SB, Part V for retirement rates. It is assumed that participants will retire upon becoming eligible for normal retirement (age 65) or current age if later.

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN: 34-0766171 / 001
Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26 Schedule of Active Participant Data as of July 1, 2010

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		2		0		0		0		0		0		0		0		0	
25 - 29	0		0		1		0		0		0		0		0		0		0	
30 - 34	0		0		0		0		0		0		0		0		0		0	
35 - 39	0		1		0		1		0		0		0		0		0		0	
40 - 44	0		0		0		1		3		1		1		0		0		0	
45 - 49	0		2		0		1		2		0		4		0		0		0	
50 - 54	0		0		0		4		2		2		2		1		1		0	
55 - 59	0		2		1		0		1		4		1		0		0		0	
60 - 64	0		0		1		0		2		0		1		0		1		0	
65 - 69	0		0		0		1		0		1		0		1		0		0	
70 & Over	0		0		0		1		1		3		0		1		0		0	

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN: 34-0766171 / 001
Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions and Methods

Economic Assumptions

Interest rate basis:

- | | |
|---------------------|-----------------|
| ➤ Applicable month | March |
| ➤ Yield curve basis | 3-Segment Rates |

Interest rates:

- | | |
|---------------------------|-------|
| ➤ First segment rate | 4.44% |
| ➤ Second segment rate | 6.62% |
| ➤ Third segment rate | 6.74% |
| ➤ Effective interest rate | 6.55% |

Annual rates of increase

- | | |
|-------------------------------------|-------|
| ➤ Compensation: | 4.00% |
| ➤ Future Social Security wage bases | 3.50% |
| ➤ Statutory limits on compensation | 0.00% |

Plan Name:	The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN:	34-0766171 / 001
Plan Sponsor:	The Incorporated Trustees of the Gospel Worker Society
eVal VRS:	2010 Schedule SB
Valuation Date:	July 1, 2010

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee becomes a participant.
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	
➤ Healthy	For target liability, the prescribed mortality assumption under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants. For ASC 960 purposes, the RP-2000 Mortality Table for males and females projected to the valuation date using Scale AA.
➤ Disabled	1985 Pension Disability Mortality for males and females.

Termination

Percentage leaving during the year		
Attained Age	Males	Females
20	14.95%	24.96%
25	9.94	14.95
30	6.91	9.94
35	4.88	6.91
40	2.82	4.88
45	1.67	2.82
50	0.40	1.67
55	0.00	0.40
60 and over	0.00	0.00

Disability	Wyatt 1985 Disability Study Class 1 male and female rates.
Retirement	It is assumed that participants will retire upon becoming eligible for normal retirement (age 65) or current age if later.
Benefit commencement date:	
➤ Preretirement death benefit	The later of the death of the active participant or the date the participant would have attained age 55
➤ Deferred vested benefit	The later of age 65 or termination of employment
➤ Disability benefit	Upon disablement

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN: 34-0766171 / 001
Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
eVal VRS: 2010 Schedule SB
Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

➤ Retirement benefit	Upon termination of employment
Marriage	85% of male and 50% of female participants are assumed to be married. Male spouses are assumed to be three years older than female spouses.
Plan Compensation	Compensation assumed paid in the current year beginning on the valuation date is the prior year's compensation rolled forward by the salary increase assumption.
Administrative expenses	\$0; the plan sponsor pays administrative expenses directly.
At-risk assumptions	For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan, which is usually the lump sum form of payment.
Form of Payment	Participants are assumed to elect the single life form.

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN: 34-0766171 / 001
Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
eVal VRS: 2010 Schedule SB
Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

Methods	
Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year
Actuarial value of assets	The actuarial value of assets is equal to the market value of assets as of the valuation date plus the discounted present value of contributions made after the valuation date for the 2009 plan year, discounted using the effective interest rate for the 2009 plan year.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued based on discussions with The Incorporated Trustees of the Gospel Workers Society regarding the likelihood that these benefits will be paid. Towers Watson has reviewed the plan provisions with The Incorporated Trustees of the Gospel Workers Society and, based on that review, is not aware of any significant benefits required to be valued that were not.
Change in assumptions and methods since prior valuation	Changes in Assumptions: The following changes in assumptions were made as part of this valuation: • The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvement. Changes in Methods: None.

Plan Name:	The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN:	34-0766171 / 001
Plan Sponsor:	The Incorporated Trustees of the Gospel Worker Society
eVal VRS:	2010 Schedule SB
Valuation Date:	July 1, 2010

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Principal Plan Provisions

Plan Provisions

July 1, 1974 (as most recently amended effective July 1, 2006).

Eligibility for Participation All employees after completing one year of service and attaining age 21.

Definitions

Vesting service	One year is credited for each plan year in which at least 1,000 hours are completed.
Credited service	One year is credited for each plan year in which at least 1,000 hours are completed. In the year of termination, fractional service is granted.
Final average compensation	Average Monthly Compensation is the average monthly pay for the highest five consecutive years in the ten years preceding retirement. Monthly Compensation cannot exceed \$20,417 starting July 1, 2010.
Normal retirement date (NRD)	First of month coinciding with or next following the later of the attainment of age 65 and the fifth anniversary of participation.
Normal retirement benefit	Monthly Benefit Amount – (a) 2.5% of Average Monthly Compensation not greater than Social Security Covered Compensation plus (b) 2.7% of Average Monthly Compensation in excess of Social Security Covered Compensation times (c) years of service to a maximum of 35 years. There are minimum retirement monthly benefits of \$13.50 times years of service (maximum 35 years) and the benefit as computed under the formula in effect prior to July 1, 1997 for service to June 30, 1997. Maximum benefit is the lesser of the IRC Section 415 dollar limit and 100% of average compensation for high 3 years. Social Security Covered Compensation is expressed as a monthly amount and equals one-twelfth of the 35-year average of taxable wages ending in the year of Social Security Normal Retirement.
Monthly preretirement death benefit (Early Retirement)	If an active participant dies subsequent to becoming eligible for early retirement but prior to retirement, his beneficiary would receive 75% of the participant's accrued early retirement benefit payable in monthly income or a lump sum. If the participant has a surviving spouse, however, the spouse would receive the benefit in Pre-Retirement Death Benefit (Vested), if a greater value.
Monthly pre-retirement death benefit (Vested)	If an employee or former employees dies subsequent to becoming eligible for vested benefits, but prior to retirement, his spouse would receive 50% of the participant's actuarially adjusted accrued retirement benefits payable in monthly income.

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN: 34-0766171 / 001
Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
eVal VRS: 2010 Schedule SB
Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

Eligibility for Benefits

Normal retirement	Later of age 65 and fifth anniversary of participation
Early retirement	Age 60 with at least 15 years of service
Vested termination	Any age with at least 5 years of service
Disability	Permanent and total disability prior to Normal Retirement Date with 15 years of service.
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

Normal retirement	Normal Retirement Benefit												
Early retirement	Monthly Benefit Amount – Accrued benefit as in Normal Retirement Benefit above multiplied by a ratio of completed service at early retirement to total possible service to age 65, further reduced actuarially for early commencement. The early commencement reduction factors are summarized below: <table border="1"> <thead> <tr> <th>Age</th><th>Factor</th></tr> </thead> <tbody> <tr> <td>60</td><td>.6458</td></tr> <tr> <td>61</td><td>.7023</td></tr> <tr> <td>62</td><td>.7650</td></tr> <tr> <td>63</td><td>.8348</td></tr> <tr> <td>64</td><td>.9128</td></tr> </tbody> </table>	Age	Factor	60	.6458	61	.7023	62	.7650	63	.8348	64	.9128
Age	Factor												
60	.6458												
61	.7023												
62	.7650												
63	.8348												
64	.9128												
Vested termination	Accrued benefit calculated as in Normal Retirement Benefit above multiplied by a ratio of completed service at termination to total possible service to age 65, further reduced actuarially if commencement is earlier than normal.												
Disablement	Benefit shall be calculated in the manner described in Early Retirement Benefit above without actuarial reduction.												
Preretirement death (Early Retirement)	If an active participant dies subsequent to becoming eligible for early retirement but prior to retirement, his beneficiary would receive 75% of the participant's accrued early retirement benefits payable in monthly income or a lump sum. If the participant has a surviving spouse, however, the spouse would receive the benefit in Pre-Retirement Death Benefit (Vested), if of greater value.												
Preretirement death (Vested)	If an employee or former employee dies subsequent to becoming eligible for vested benefits, but prior to retirement, his spouse would receive 50% of the participant's actuarially adjusted accrued retirement benefits payable in monthly income.												

Plan Name: The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
 EIN / PN: 34-0766171 / 001
 Plan Sponsor: The Incorporated Trustees of the Gospel Worker Society
 eVal VRS: 2010 Schedule SB
 Valuation Date: July 1, 2010

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	The normal form of payment is a Single Life Option or an actuarially reduced 50% Joint & Survivor Option for a married employee. Optional forms of payment are the following actuarial equivalent forms of payment
	(i) 50%, 75%, 100% Joint & Survivor
	(ii) 5, 10, or 15 year certain and continuous
	(iii) cash refund annuity.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

Plan Name:	The Incorporated Trustees of the Gospel Worker Society Employees' Retirement Plan
EIN / PN:	34-0766171 / 001
Plan Sponsor:	The Incorporated Trustees of the Gospel Worker Society
eVal VRS:	2010 Schedule SB
Valuation Date:	July 1, 2010

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2010**This Form is Open to Public
Inspection**For calendar plan year 2010 or fiscal plan year beginning 07/01/2010 and ending 06/30/2011▶ **Round off amounts to nearest dollar.**▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan The Incorporated Trustees of the Gospel Worker Society Employees'		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF The Incorporated Trustees of the Gospel Worker Society		D Employer Identification Number (EIN) 34-0766171
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I Basic Information

1 Enter the valuation date: Month <u>7</u> Day <u>1</u> Year <u>2010</u>			
2 Assets:			
a Market value.....	2a	13,319,531	
b Actuarial value.....	2b	13,319,531	
3 Funding target/participant count breakdown		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a	35	4,060,313
b For terminated vested participants.....	3b	26	935,973
c For active participants:			
(1) Non-vested benefits.....	3c(1)		314,681
(2) Vested benefits.....	3c(2)		5,544,578
(3) Total active.....	3c(3)	55	5,859,259
d Total.....	3d	116	10,855,545
4 If the plan is at-risk, check the box and complete items (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions.....	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor.....	4b		
5 Effective interest rate.....	5	6.55 %	
6 Target normal cost.....	6	342,822	

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

**SIGN
HERE**

aal

Signature of actuary

Audrey A. Cervas

Type or print name of actuary

Towers Watson Delaware Inc.

1001 Lakeside Avenue, Suite 1900

Cleveland

OH 44114-1172

Address of the firm

4/4/2012

Date

11-06430

Most recent enrollment number

(216) 937-4000

Telephone number (including area code)

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2010
v.092308.1

Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	1,470,016	662,942
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8)	1,470,016	662,942
10 Interest on item 9 using prior year's actual return of <u>12.27</u> %	180,371	81,343
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		780,140
b Interest on (a) using prior year's effective rate of <u>7.51</u> %		58,589
c Total available at beginning of current plan year to add to prefunding balance		838,729
d Portion of (c) to be added to prefunding balance		0
12 Reduction in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	1,650,387	744,285

Part III Funding percentages

14 Funding target attainment percentage	14	100.63 %
15 Adjusted funding target attainment percentage	15	122.69 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	118.93 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/26/2011	100,000		03/08/2012	100,000	
06/20/2011	100,000				
08/24/2011	150,000				
12/16/2011	175,000				
01/30/2012	150,000				
02/16/2012	100,000				
Totals ▶			18(b)	875,000	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contribution from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	803,721

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:			
a Segment rates:	1st segment: 4.44 %	2nd segment: 6.62 %	3rd segment: 6.74 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 65
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....		☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....	29	
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29).....	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	273,508
32 Amortization installments:		
	Outstanding Balance	Installment
a Net shortfall amortization installment.....	0	0
b Waiver amortization installment.....	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33).....	34	273,508
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	0
36 Additional cash requirement (item 34 minus item 35).....	36	273,508
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	803,721
38 Interest-adjusted excess contributions for current year (see instructions).....	38	530,213
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

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Portfolio

Cash and cash equivalents

Mutual funds - money market

Description	Market value last period	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
PNC MONEY MARKET FUND	\$316,808.75	\$316,808.75	2.16 %	\$316,808.75		0.06 %	\$158.42	\$10.38
FUND #417	316,808.750	\$1.0000		\$1.00				
20-75-073-4458712								
PNC MONEY MARKET FUND	49,003.26	49,003.26	0.34 %	49,003.26		0.05 %	24.50	1.87
FUND #417	49,003.260	1.0000		1.00				
PNC CAPITAL ADVISOR								
Total mutual funds - money market		\$365,812.01	2.49 %	\$365,812.01		0.05 %	\$182.92	\$12.25
Total cash and cash equivalents		\$365,812.01	2.49 %	\$365,812.01		0.05 %	\$182.92	\$12.25

Fixed income

Agency bonds

Description (Cusip)	Market value last period	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
FEDERAL NATL MTG ASSN	\$513.37	\$507.22	0.01 %	\$486.35	\$20.87	6.57 %	\$33.29	\$2.87
POOL #550568	475.530	\$106.6650		\$102.28				
7.00% DUE 09-01-2015								
NOT RATED								
(31385RTZ3)								
20-75-073-4458712								



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Fixed income
Agency bonds

Description (Cusip)	Market value last period	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
FEDERAL NATL MTG ASSN POOL #581486 7.00% DUE 06-01-2031 NOT RATED (31387D6X2) 20-75-073-4458712	Quantity 5,092.83 4,548.430	5,264.41 115.7413	0.04 %	4,600.99 101.16	663.42	6.05 %	318.39	27.42
GOVT NATL MTG ASSN I POOL #357905 07.000% DUE 05/15/2023 NOT RATED (36203SR25) 20-75-073-4458712	23,025.05 20,904.680	23,982.48 114.7230	0.17 %	21,248.63 101.65	2,733.85	6.11 %	1,463.33	126.01
Total agency bonds		\$29,754.11	0.20 %	\$26,335.97	\$3,418.14	6.10 %	\$1,815.01	\$156.30

Mutual funds - fixed income

Description (Symbol)	Market value last period	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
PNC BOND FUND (PFDIX) CLASS I FUND #403 20-75-073-4458712	Quantity \$8,287,482.56 797,439.707	\$8,333,244.94 \$10.4500	56.71 %	\$7,940,405.74 \$9.96	\$392,839.20	2.99 %	\$248,360.69	\$20,691.20
Total fixed income		\$8,362,999.05	56.91 %	\$7,966,741.71	\$396,257.34	2.99 %	\$250,175.70	\$20,847.50

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Equities

Stocks

Consumer discretionary

Description (Symbol)	Market value last period	Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
			Current price per unit		Avg. original value at PNC per unit				
BORG WARNER INC. (BWA)	\$38,297.60		\$40,395.00	0.28 %	\$38,297.60	\$2,097.40	0.60 %	\$240.00	
PNC CAPITAL ADVISOR		500	\$80.7900		\$76.60				
DISNEY WALT CO (DIS)	47,429.49		44,115.20	0.31 %	47,429.49	- 3,314.29	1.03 %	452.00	
PNC CAPITAL ADVISOR		1,130	39.0400		41.97				
DOLLAR TREE INC (DLTR)	29,432.41		47,100.34	0.33 %	20,891.05	26,209.29			
PNC CAPITAL ADVISOR		707	66.6200		29.55				
LIMITED BRANDS INC (LTD)	30,898.00		53,830.00	0.37 %	35,001.82	18,828.18	2.09 %	1,120.00	1,400.00
PNC CAPITAL ADVISOR		1,400	38.4500		25.00				
MACY'S INC (M)	48,462.55		50,292.80	0.35 %	48,462.55	1,830.25	1.37 %	688.00	172.00
PNC CAPITAL ADVISOR		1,720	29.2400		28.18				
MATTEL INC (MAT)	34,279.20		44,533.80	0.31 %	35,078.02	9,455.78	3.35 %	1,490.40	
PNC CAPITAL ADVISOR		1,620	27.4900		21.65				
TIFFANY & CO NEW (TIF)	37,978.98		51,038.00	0.35 %	37,978.98	13,059.02	1.48 %	754.00	188.50
PNC CAPITAL ADVISOR		650	78.5200		58.43				
VIACOM INC CLASS B WI (VIAB)	29,111.36		47,328.00	0.33 %	21,436.52	25,891.48	1.97 %	928.00	232.00
PNC CAPITAL ADVISOR		928	51.0000		23.10				
Total consumer discretionary			\$378,633.14	2.58 %	\$284,576.03	\$94,057.11	1.50 %	\$5,672.40	\$1,992.50

Consumer staples

Description (Symbol)	Market value last period	Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
			Current price per unit		Avg. original value at PNC per unit				
COCA COLA CO (KO)	\$35,903.63		\$42,392.70	0.29 %	\$35,903.63	\$6,489.07	2.80 %	\$1,184.40	\$296.10
PNC CAPITAL ADVISOR		630	\$67.2900		\$56.99				
THE HERSHEY COMPANY (HSY)	43,137.00		51,165.00	0.35 %	43,192.97	7,972.03	2.43 %	1,242.00	
PNC CAPITAL ADVISOR		900	56.8500		47.99				
LAUDER ESTEE COS INC (EL)	45,721.25		50,491.20	0.35 %	45,721.25	4,769.95	0.72 %	360.00	
CL A		480	105.1900		95.25				
PNC CAPITAL ADVISOR									



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Consumer staples

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
PROCTER & GAMBLE CO (PG)	59,800.06	63,379.29	0.44 %	57,411.47	5,967.82	3.31 %	2,093.70	
PNC CAPITAL ADVISOR	997	63.5700		57.58				
JM SMUCKER CO/THE-NEW COM WI (SJM)	34,987.82	44,411.64	0.31 %	36,277.70	8,133.94	2.31 %	1,022.56	
PNC CAPITAL ADVISOR	581	76.4400		62.44				
WAL-MART STORES INC (WMT)	37,879.16	41,874.32	0.29 %	43,873.28	- 1,998.96	2.75 %	1,150.48	
PNC CAPITAL ADVISOR	788	53.1400		55.68				
WALGREEN CO (WAG)	34,852.35	34,817.20	0.24 %	34,852.35	- 35.15	1.65 %	574.00	
PNC CAPITAL ADVISOR	820	42.4600		42.50				
Total consumer staples		\$328,531.35	2.24 %	\$297,232.65	\$31,298.70	2.32 %	\$7,627.14	\$296.10

Energy

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
APACHE CORPORATION (APA)	\$19,195.32	\$28,132.92	0.20 %	\$20,000.06	\$8,132.86	0.49 %	\$136.80	
PNC CAPITAL ADVISOR	228	\$123.3900		\$87.72				
BAKER HUGHES INC (BHI)	38,895.05	40,633.60	0.28 %	38,895.05	1,738.55	0.83 %	336.00	
PNC CAPITAL ADVISOR	560	72.5600		69.46				
CHEVRON CORPORATION (CVX)	70,558.66	97,698.00	0.67 %	70,558.66	27,139.34	3.04 %	2,964.00	
PNC CAPITAL ADVISOR	950	102.8400		74.27				
EXXON MOBIL CORP (XOM)	83,953.51	110,676.80	0.76 %	101,328.83	9,347.97	2.32 %	2,556.80	
PNC CAPITAL ADVISOR	1,360	81.3800		74.51				
HESS CORPORATION (HES)	29,420.81	27,661.20	0.19 %	29,420.81	- 1,759.61	0.54 %	148.00	
PNC CAPITAL ADVISOR	370	74.7600		79.52				
NATIONAL OILWELL VARCO INC (NOV)	40,448.39	75,081.60	0.52 %	40,448.39	34,633.21	0.57 %	422.40	
PNC CAPITAL ADVISOR	960	78.2100		42.13				
Total energy		\$379,884.12	2.59 %	\$300,651.80	\$79,232.32	1.73 %	\$6,564.00	

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Financial

Description (Symbol)	Market value last period	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
AMERICAN EXPRESS CO (AXP)	Quantity \$31,870.48	\$39,602.20	0.27 %	\$32,955.75	\$6,646.45	1.40 %	\$551.52	\$137.88
PNC CAPITAL ADVISOR	766	\$51.7000		\$43.02				
AMERIPRISE FINANCIAL INC (AMP)	32,540.75	47,816.72	0.33 %	34,098.14	13,718.58	1.60 %	762.68	
PNC CAPITAL ADVISOR	829	57.6800		41.13				
BANK OF AMERICA CORP (BAC)	31,226.01	23,816.08	0.17 %	35,898.51	- 12,082.43	0.37 %	86.92	
PNC CAPITAL ADVISOR	2,173	10.9600		16.52				
CAPITAL ONE FINANCIAL CORP (COF)	38,083.50	48,828.15	0.34 %	40,775.50	8,052.65	0.39 %	189.00	
PNC CAPITAL ADVISOR	945	51.6700		43.15				
CHUBB CORP (CB)	35,455.09	43,075.68	0.30 %	30,686.29	12,389.39	2.50 %	1,073.28	268.32
PNC CAPITAL ADVISOR	688	62.6100		44.60				
CITIGROUP INC (C)	36,171.20	40,057.68	0.28 %	40,930.43	- 872.75	0.10 %	38.48	
PNC CAPITAL ADVISOR	962	41.6400		42.55				
EQUITY RESIDENTIAL (EQR)	22,485.60	32,400.00	0.23 %	24,451.15	7,948.85	2.26 %	729.00	182.25
SH BEN INT REIT	540	60.0000		45.28				
PNC CAPITAL ADVISOR								
JPMORGAN CHASE & CO (JPM)	62,676.32	70,089.28	0.48 %	56,705.83	13,383.45	2.45 %	1,712.00	
PNC CAPITAL ADVISOR	1,712	40.9400		33.12				
MOODY'S CORP (MCO)	31,124.66	30,296.50	0.21 %	31,124.66	- 828.16	1.47 %	442.40	
PNC CAPITAL ADVISOR	790	38.3500		39.40				
WELLS FARGO & COMPANY (WFC)	43,033.60	47,168.86	0.33 %	44,635.33	2,533.53	1.72 %	806.88	
PNC CAPITAL ADVISOR	1,681	28.0600		26.55				
Total financial		\$423,151.15	2.88 %	\$372,261.59	\$50,889.56	1.51 %	\$6,392.16	\$588.45



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Health care

<i>Health care</i>		Current market value	%	Total original value at PNC				
	Market value last period	Current	of total	Avg. original value		Current	Estimated	Accrued
Description (Symbol)	Quantity	price per unit	portfolio	at PNC per unit	Unrealized gain/loss	yield	annual income	income
COVIDIEN PLC (COV)	\$39,352.20	\$51,633.10	0.36 %	\$45,649.56	\$5,983.54	1.51 %	\$776.00	
ISIN IE00B68SQD29 SEDOL B68SQD2	970	\$53.2300		\$47.06				
PNC CAPITAL ADVISOR								
ALLERGAN INC (AGN)	34,897.74	49,866.75	0.34 %	27,063.14	22,803.61	0.25 %	119.80	
PNC CAPITAL ADVISOR	599	83.2500		45.18				
AMERISOURCEBERGEN CORP (ABC)	44,831.00	58,456.80	0.40 %	40,065.92	18,390.88	1.12 %	649.52	
PNC CAPITAL ADVISOR	1,412	41.4000		28.38				
JOHNSON & JOHNSON (JNJ)	65,018.38	69,047.76	0.47 %	66,900.56	2,147.20	3.43 %	2,366.64	
PNC CAPITAL ADVISOR	1,038	66.5200		64.45				
MERCK & CO INC (MRK)	23,324.99	23,538.43	0.17 %	25,018.70	- 1,480.27	4.31 %	1,013.84	253.46
PNC CAPITAL ADVISOR	667	35.2900		37.51				
PFIZER INC (PFE)	40,833.23	56,794.20	0.39 %	44,675.84	12,118.36	3.89 %	2,205.60	
PNC CAPITAL ADVISOR	2,757	20.6000		16.20				
SHIRE PLC (SHPGY)	19,328.19	28,451.42	0.20 %	20,581.79	7,869.63	0.42 %	118.69	
SPONSORED ADR	302	94.2100		68.15				
PNC CAPITAL ADVISOR								
UNITEDHEALTH GROUP INC (UNH)	31,296.80	56,841.16	0.39 %	29,709.81	27,131.35	1.27 %	716.30	
PNC CAPITAL ADVISOR	1,102	51.5800		26.96				
Total health care		\$394,629.62	2.69 %	\$299,665.32	\$94,964.30	2.02 %	\$7,966.39	\$253.46

Industrials

<i>Industrials</i>		Current market value	%	Total original value at PNC				
Description (Symbol)	Market value last period	Current	of total	Avg. original value		Current	Estimated	Accrued
	Quantity	price per unit	portfolio	at PNC per unit	Unrealized gain/loss	yield	annual income	income
COOPER INDUSTRIES PLC (CBE)	\$39,536.06	\$51,912.90	0.36 %	\$38,240.13	\$13,672.77	1.95 %	\$1,009.20	\$252.30
SEDOL B40K911 ISIN IE00B40K9117	870	\$59.6700		\$43.95				
PNC CAPITAL ADVISOR								
CUMMINS INC (CMI)	21,036.99	33,427.27	0.23 %	16,996.00	16,431.27	1.02 %	339.15	
PNC CAPITAL ADVISOR	323	103.4900		52.62				
DEERE & CO (DE)	38,481.35	38,751.50	0.27 %	38,481.35	270.15	1.99 %	770.80	192.70
PNC CAPITAL ADVISOR	470	82.4500		81.88				

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Industrials

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
DOVER CORP (DOV)	37,784.08	51,528.00	0.36 %	37,784.08	13,743.92	1.63 %	836.00	
PNC CAPITAL ADVISOR	760	67.8000		49.72				
EATON CORP (ETN)	39,837.57	40,645.50	0.28 %	39,837.56	807.94	2.65 %	1,074.40	
PNC CAPITAL ADVISOR	790	51.4500		50.43				
GENERAL ELECTRIC CO (GE)	33,079.48	43,264.84	0.30 %	38,874.44	4,390.40	3.19 %	1,376.40	344.10
PNC CAPITAL ADVISOR	2,294	18.8600		16.95				
UNION PACIFIC CORP (UNP)	38,160.99	57,315.60	0.40 %	40,850.32	16,465.28	1.82 %	1,043.10	260.78
PNC CAPITAL ADVISOR	549	104.4000		74.41				
UNITED TECHNOLOGIES CORP (UTX)	36,609.24	49,919.64	0.34 %	32,537.12	17,382.52	2.17 %	1,082.88	
PNC CAPITAL ADVISOR	564	88.5100		57.69				
Total industrials		\$366,765.25	2.50 %	\$283,601.00	\$83,164.25	2.05 %	\$7,531.93	\$1,049.88

Information technology

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
APPLE INC (AAPL)	\$98,096.70	\$130,911.30	0.90 %	\$42,304.11	\$88,607.19			
PNC CAPITAL ADVISOR	390	\$335.6700		\$108.47				
EMC CORP (EMC)	36,325.50	54,686.75	0.38 %	33,896.86	20,789.89			
PNC CAPITAL ADVISOR	1,985	27.5500		17.08				
EBAY INC (EBAY)	33,722.69	31,624.60	0.22 %	33,722.69	- 2,098.09			
PNC CAPITAL ADVISOR	980	32.2700		34.41				
GOOGLE INC-CL A (GOOG)	46,274.80	52,663.52	0.36 %	45,813.82	6,849.70			
PNC CAPITAL ADVISOR	104	506.3800		440.52				
INTEL CORP (INTC)	40,297.99	44,408.64	0.31 %	35,786.39	8,622.25	3.28 %	1,452.90	
PNC CAPITAL ADVISOR	2,004	22.1600		17.86				
INTERNATIONAL BUSINESS MACHS (IBM)	48,157.20	66,904.50	0.46 %	42,349.11	24,555.39	1.75 %	1,170.00	
CORP	390	171.5500		108.59				
PNC CAPITAL ADVISOR								
MICROSOFT CORP (MSFT)	57,225.87	64,662.00	0.44 %	62,738.09	1,923.91	2.47 %	1,591.68	
PNC CAPITAL ADVISOR	2,487	26.0000		25.23				



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Information technology		Current market value	% of total portfolio	Total original value at PNC Avg. original value at PNC per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
Description (Symbol)	Market value last period Quantity	Current price per unit						
ORACLE CORP (ORCL)	42,769.78	65,589.63	0.45 %	39,580.30	26,009.33	0.73 %	478.32	
PNC CAPITAL ADVISOR	1,993	32.9100		19.86				
QUALCOMM INC (QCOM)	51,870.75	54,518.40	0.38 %	51,870.75	2,647.65	1.52 %	825.60	
PNC CAPITAL ADVISOR	960	56.7900		54.03				
TEXAS INSTRUMENTS INC (TXN)	31,989.54	29,218.70	0.20 %	31,989.53	- 2,770.83	1.59 %	462.80	
PNC CAPITAL ADVISOR	890	32.8300		35.94				
Total information technology		\$595,188.04	4.05 %	\$420,051.65	\$175,136.39	1.01 %	\$5,981.30	

Materials		Current market value	% of total portfolio	Total original value at PNC Avg. original value at PNC per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
Description (Symbol)	Market value last period Quantity	Current price per unit						
CELANESE CORP-SERIES A (CE)	\$26,280.05	\$56,242.05	0.39 %	\$23,467.03	\$32,775.02	0.38 %	\$211.00	
PNC CAPITAL ADVISOR	1,055	\$53.3100		\$22.24				
DUPONT E I DE NEMOURS & CO (DD)	35,248.66	43,240.00	0.30 %	35,248.66	7,991.34	3.04 %	1,312.00	
PNC CAPITAL ADVISOR	800	54.0500		44.06				
PPG INDUSTRIES INC (PPG)	24,224.41	36,406.79	0.25 %	25,500.51	10,906.28	2.52 %	914.28	
PNC CAPITAL ADVISOR	401	90.7900		63.59				
Total materials		\$135,888.84	0.93 %	\$84,216.20	\$51,672.64	1.79 %	\$2,437.28	

Telecommunication services		Current market value	% of total portfolio	Total original value at PNC Avg. original value at PNC per unit	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
Description (Symbol)	Market value last period Quantity	Current price per unit						
AT&T INC (T)	\$26,536.43	\$34,456.77	0.24 %	\$26,963.38	\$7,493.39	5.48 %	\$1,886.84	
PNC CAPITAL ADVISOR	1,097	\$31.4100		\$24.58				
CENTURYLINK INC (CTL)	26,981.10	32,748.30	0.23 %	27,467.99	5,280.31	7.18 %	2,349.00	
PNC CAPITAL ADVISOR	810	40.4300		33.91				
Total telecommunication services		\$67,205.07	0.46 %	\$54,431.37	\$12,773.70	6.30 %	\$4,235.84	

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Utilities

Description (Symbol)	Market value last period	Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
			Current price per unit		Avg. original value at PNC per unit				
NORTHEAST UTILITIES (NU)	\$28,441.28		\$30,949.60	0.22 %	\$28,441.28	\$2,508.32	3.13 %	\$968.00	
PNC CAPITAL ADVISOR	880		\$35.1700		\$32.32				
WISCONSIN ENERGY CORP (WEC)	39,374.24		48,655.20	0.34 %	31,566.67	17,088.53	3.32 %	1,614.08	
PNC CAPITAL ADVISOR	1,552		31.3500		20.34				
Total utilities			\$79,604.80	0.54 %	\$60,007.95	\$19,596.85	3.24 %	\$2,582.08	
Total stocks			\$3,149,481.38	21.43 %	\$2,456,695.56	\$692,785.82	1.81 %	\$56,990.52	\$4,180.39

Etf - equity

Description (Symbol)	Market value last period	Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
			Current price per unit		Avg. original value at PNC per unit				
ISHARES RUSSELL MIDCAP (IWR)	\$577,849.14		\$584,531.64	3.98 %	\$577,849.14	\$6,682.50	1.50 %	\$8,756.75	
INDEX FD ETF	5,346		\$109.3400		\$108.09				
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Mutual funds - equity

Description (Symbol)	Market value last period	Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
			Current price per unit		Avg. original value at PNC per unit				
PNC INTERNATIONAL EQUITY FUND (PIUIX)	\$1,166,282.99		\$1,485,791.43	10.11 %	\$1,342,314.51	\$143,476.92			
CLASS I	92,515.033		\$16.0600		\$14.51				
20-75-073-4458712									
PNC SMALL CAP CORE FUND (PPCIX)	589,066.29		747,658.85	5.09 %	614,506.84	133,152.01			
CLASS I	59,243.966		12.6200		10.37				
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Total mutual funds - equity			\$2,233,450.28	15.20 %	\$1,956,821.35	\$276,628.93			



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Mutual funds - equity

Description (Symbol)	Market value last period Quantity	Current market value	% of total portfolio	Total original value at PNC	Unrealized gain/loss	Current yield	Estimated annual income	Accrued income
		Current price per unit		Avg. original value at PNC per unit				
Total equities		\$5,967,463.30	40.61 %	\$4,991,366.05	\$976,097.25	1.10 %	\$65,747.27	\$4,180.39
Total portfolio		\$14,696,274.36	100.00 %	\$13,323,919.77	\$1,372,354.59	2.15 %	\$316,105.89	\$25,040.14

Pending Trades

Purchases

Description	Trade date	Settle date	Quantity	Price per unit	Cash
WHOLE FOODS MKT INC	06/29/11	07/05/11	590	\$63.8045	- \$37,644.65

Sales

Description	Trade date	Settle date	Quantity	Price per unit	Cash
WALGREEN CO	06/29/11	07/05/11	820	\$41.8306	\$34,267.63

Net pending trades - \$3,377.02