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), 6057(b), 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

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/1986

2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)

A.L. GEORGE LLC

1 LINK DR
BINGHAMTON, NY 13904

2b Employer Identification Number (EIN)
16-1613705

2c Sponsor's telephone number
607-722-2300

2d Business code (see instructions)
424800

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.	08/13/2012	ANTHONY VAN SLYKE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/13/2012	ANTHONY VAN SLYKE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
A.L. GEORGE LLC

1 LINK DR
BINGHAMTON, NY 13904

3b Administrator's EIN
16-1613705

3c Administrator's telephone number
607-722-2300

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	227
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**	240
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	13
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	253
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	253
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	145
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	8
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
A.L. GEORGE LLC

D Employer Identification Number (EIN)
16-1613705

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions

Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
MONY LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
13-1632487	66370	1350-08-57	1	01/01/2011	12/31/2011

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶ PER APPLICABLE RATE SCHEDULE

b	Premiums paid to carrier	6b	715
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) [X] individual policies (2) [ ] group deferred annuity (3) [ ] other (specify) ▶

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

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

a Type of contract: (1) [ ] deposit administration (2) [ ] immediate participation guarantee (3) [ ] guaranteed investment (4) [ ] other ▶

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

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance

e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug

i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract

m ☐ Other (specify) ▶

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
A.L. GEORGE LLC

D Employer Identification Number (EIN)
16-1613705

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

SEI TRUST COMPANY

06-1271230

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

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

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

RBC CAPITAL MARKETS CORP

41-1416330

(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?
27	N/A	0	Yes [X] No [ ]	Yes [ ] No [X]	23284	Yes [ ] No [X]

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

GPC SECURITIES

58-1517899

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 64	N/A	0	Yes [X] No [ ]	Yes [ ] No [X]	2973	Yes [ ] No [X]

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

MORNINGSTAR

36-4317381

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	N/A	0	Yes [X] No [ ]	Yes [ ] No [X]	44	Yes [ ] No [X]

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)

RELIANCE TRUST COMPANY

58-1428634

(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?
19 25	N/A	0	Yes [X] No [ ]	Yes [ ] No [X]	460	Yes [ ] No [X]

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

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

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

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

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
RBC CAPITAL MARKETS CORP	27	23284
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
HARTFORD SECURITIES DISTRIBUTION CO 06-1408044	SEE FEE & COMPENSATION DISCLOSURE REPORT ATTACH	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
GPC SECURITIES	15 64	2973
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
HARTFORD RETIREMENT SERVICES 26-1589907	SEE FEE & COMPENSATION DISCLOSURE REPORT ATTACH	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MORNINGSTAR ASSOC	49	44
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
HARTFORD LIFE INSURANCE 06-0974148	SEE FEE & COMPENSATION DISCLOSURE REPORT ATTACH	

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
RELIANCE TRUST COMPANY	19 25	460
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
HARTFORD LIFE INSURANCE 06-0974148	SEE FEE & COMPENSATION DISCLOSURE REPORT ATTACH	

(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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
A.L. GEORGE LLC

D Employer Identification Number (EIN)
16-1613705

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

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

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
23-2852249-001	C	1610576

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
A.L. GEORGE LLC

D Employer Identification Number (EIN)
16-1613705

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	313161	179075
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	11133	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	233980	241973
(9) Value of interest in common/collective trusts	1c(9)		1610576
(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)	11757101	6208769
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	20309	21593

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	12335684	8261986
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	2398557	8785
k Total liabilities (add all amounts in lines 1g through1j)	1k	2398557	8785
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	9937127	8253201

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)	317056	
(B) Participants	2a(1)(B)	355400	
(C) Others (including rollovers)	2a(1)(C)	65486	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		737942
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	10542	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		10542
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	127794	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		127794
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		9484
(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)		-242477
c Other income	2c		1285
d Total income. Add all **income** amounts in column (b) and enter total	2d		644570
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	730814	
(2) To insurance carriers for the provision of benefits	2e(2)	715	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		731529
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		731529
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-86959
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		1596967

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: BOWERS & COMPANY CPAS PLLC (2) EIN: 20-1317788

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
OWASCO BEVERAGE CORP 401(K) SALARY DEFERRAL PLAN	16-1295934	001

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

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
A.L. GEORGE LLC. 401(K) SALARY SAVINGS PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
A.L. GEORGE LLC

D Employer Identification Number (EIN)
16-1613705

Part I Distributions

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

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

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

EIN(s): 06-0974148

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

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

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

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

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

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

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

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **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 or other authority 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. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

A.L. George LLC 401(K) Salary Savings Plan
EIN#: 16-1613705
Plan #002

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

FINANCIAL STATEMENTS
December 31, 2011 and 2010

Table of Contents

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

INDEPENDENT AUDITORS' REPORT 1

AUDITED FINANCIAL STATEMENTS 3

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS 3

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS 4

NOTES TO FINANCIAL STATEMENTS 5

OTHER FINANCIAL INFORMATION 14

SCHEDULE OF ASSETS (HELD AT END OF YEAR) 14

BOWERS & COMPANY
CPAs PLLC
CERTIFIED PUBLIC ACCOUNTANTS • BUSINESS CONSULTANTS

INDEPENDENT AUDITORS' REPORT

TO THE PARTICIPANTS AND ADMINISTRATOR OF
A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

We were engaged to audit the financial statements of the **A.L. George LLC 401(k) Salary Savings Plan** (the "Plan") as of December 31, 2011, and for the year then ended, and the supplemental schedule as of December 31, 2011 as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2010 were audited by other auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Reliance Trust Company, the custodian of the Plan. Their report, dated October 13, 2011, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the custodian, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information described in Note 6, which was certified by Reliance Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of December 31, 2011 and for the year then ended, that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and 2011 schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Bowers & Company

Syracuse, New York
July 16, 2012

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

ASSETS

	2011	2010
Investments, at Fair Value		
Common Collective Trust	$ 1,607,999	$ 1,458,033
Mutual Funds	6,208,769	10,263,803
Cash Value of Life Insurance	21,593	20,308
Total Investments, at Fair Value	7,838,361	11,742,144
Notes Receivable from Participants	241,973	245,113
Receivables		
Employer Contributions	179,075	313,161
Total Assets	8,259,409	12,300,418

LIABILITIES

Due to Other Plan	0	2,389,772
Other	8,785	8,785
Total Liabilities	8,785	2,398,557
Net Assets Available For Benefits at Fair Value	8,250,624	9,901,861
Adjustment From Fair Value to Contract Value For Fully Benefit-Responsive Investment Contracts	2,577	35,266
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,253,201	$ 9,937,127

See notes to financial statements.

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2011 and 2010

	2011	2010
ADDITIONS		
Contributions:		
Participant	$ 355,400	$ 346,302
Employer	317,056	440,558
Rollovers	65,486	87,474
Interest Income on Notes Receivable from Participants	10,542	14,870
Increase in Cash Value of Life Insurance	1,285	1,453
Interest and Dividends	127,794	149,390
Net Investment Gain from Common Collective Trust	9,484	
Net Investment Gain (Loss) from Mutual Funds	(242,477)	1,005,586
Transfer from Other Plan	0	332,226
Total Additions	644,570	2,377,859
DEDUCTIONS		
Benefit Payments to Participants and Beneficiaries	730,814	525,196
Insurance Premiums Paid	715	780
Transfer to Other Plan	1,596,967	2,270,885
Total Deductions	2,328,496	2,796,861
DECREASE IN NET ASSETS DURING THE YEAR	(1,683,926)	(419,002)
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	9,937,127	10,356,129
End of Year	$ 8,253,201	$ 9,937,127

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN

The following brief description of the A. L. George, LLC (the "Company") 401(k) Salary Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have ninety days of service and are age eighteen or older. On October 29, 2010, the Company acquired the assets of Onondaga Beverage Corporation at which time all employees of Onondaga Beverage Corporation became employees of A.L. George, LLC. Further, the Company adopted the Owasco and Onondaga Beverage 401(k) salary savings plan. Additionally, at this time, Employees of Owasco Beverage, Inc. were no longer participants of the Plan. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

Each year, participants may contribute a percentage of their annual compensation, as defined in the Plan, subject to Internal Revenue Service (IRS) limitations. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company will match 50% of the participant's contributions up to a maximum matching contribution of 3 percent. Additionally, the Company may make a discretionary profit sharing contribution each year for participants who have one year of service and 1,000 hours of service in that year. Participants direct the investment of their contributions and the employer matching and discretionary contributions into various investment options offered by the plan. Participants may change their investment options at any time.

Participant Accounts

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

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN – Continued

Vesting

Participants are immediately vested in their contributions, plus actual earnings thereon. Vesting in the Company's matching and discretionary contributions plus actual earnings is based on years of continuous service. A participant is 100% vested after six years of service.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. A financial hardship withdrawal provision is available, enabling a participant to withdraw an amount to cover an immediate and heavy financial need, in accordance with current Internal Revenue Service regulations.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates from 4.25% to 9.25%, which are commensurate with local prevailing rates as determined quarterly by the Plan Administrator. Principal and interest is paid ratably through bi-weekly payroll deductions.

Forfeitures

At December 31, 2011 and 2010, forfeited nonvested accounts totaled $34,935 and $27,038, respectively. These accounts can be used to reduce employer contributions.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES

The accounting principles and practices which affect the more significant elements of the financial statements are:

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchase and sales are recorded on trade-date basis. Interest is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants

Loans to participants are reported at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses incurred by the Plan are paid by the employers.

Risks and Uncertainties

The Plan provides for various investment options in any combination of a variety of mutual funds. Investments in mutual funds are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain mutual funds and the level of uncertainty related to changes in the value of mutual funds, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued

Estimates

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

Basis of Accounting

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

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

Change for New Pronouncement

Effective December 31, 2010, the Plan retroactively changed its method of recognizing participant loans in its financial statements to conform with a recent pronouncement of the Financial Accounting Standards Board. The Plan had classified participant loans as plan investments which were measured at fair value. Under the new accounting method, participant loans are recorded as notes receivable from participants, and measured at their unpaid principal balance plus any accrued but unpaid interest. Upon adoption, there was no material impact to the Plan.

Date of Management's Review

The Plan has evaluated subsequent events through July 16, 2012, which is the date the financial statements were available to be issued.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 3 – INCOME TAX STATUS

The Employer has adopted the Hartford Retirement Services LLC Prototype Defined Contribution Plan. The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service ruled that the prototype plan of Hartford Retirement Services LLC is acceptable under Section 401(a) of the Internal Revenue Code ("IRC") and, therefore, is not subject to federal income tax under present law. Although the plan has been amended and restated since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

NOTE 4 – INVESTMENTS

Reliance Trust Company, custodian of the Plan's funds, held the Plan's investments and executed transactions therein for 2011 and 2010.

The following presents investments that represent 5% or more of the Plan's net assets at either December 31, 2011 or 2010:

	2011	2010
MFS Fund – Bond Fund	$ 369,117	$ 553,695
MFS Fund – Total Return Fund	$ 553,264	$ 1,346,087
MFS Fund – Value Fund	$ 420,434	$ 1,227,943
MFS Fund – Moderate Allocation Fund	$ 759,506	$ 726,714
MFS Fund – Growth Allocation Fund	$ 1,204,493	$ 1,130,290
MFS Fund – Aggressive Growth Allocation Fund	$ 1,088,705	$ 1,230,558
MFS Fund – Research International Fund	$ 256,140	$ 706,763
Davis New York Venture Fund	$ 337,219	$ 657,664
Alger Mid-Cap Growth Fund	$ 269,383	$ 541,381
JP Morgan Small Cap Growth Fund	$ 218,653	$ 523,586
Mass Investors Growth Fund	$ 477,798	$ 1,086,519
Common Collective Trust – MFS Fixed Institutional Fund	$ 1,575,641	$ 1,462,576

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") No. 820, *Fair Value Measurements and Disclosures,* establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC No. 820 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

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

Common Collective Trust: Valued based on the relative interest of each participating investor (including each participant) in the fair value of the common/collective trust.

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

The fair value of the Common/Collective Trust Fund has been estimated using the net asset value per share of the underlying investments. There are no unfunded commitments for the Common/Collective Trust Fund as of December 31, 2011 or 2010. The Trust requires twelve months written notice for non-benefit related withdrawals from investment contracts. The following is a description of the Common/Collective Trust Fund:

The Common/Collective Trust Fund's principal objective is to earn a current income stream that is relatively consistent over time, while preserving capital through a broadly diversified high quality portfolio. The Common/Collective Trust Fund invests in a variety of investment contracts issued by insurance companies and other financial institutions and other investment products with similar characteristics. The fund strives to maintain a stable $1 unit value. However, there is no guarantee that this objective can be achieved.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011:

	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Asset Allocation	$ 3,016,949	$ 0	$ 0	$ 3,016,949
Bonds	369,117			369,117
Balanced	553,264			553,264
US Stocks	2,008,349			2,008,349
Global	261,090			261,090
Common Collective Trust	0	0	1,607,999	1,607,999
Total Assets at Fair Value	$ 6,208,769	$ 0	$ 1,607,999	$ 7,816,768

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

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

	Level 1	Level 2	Level 3	Total
Mutual Funds				
Asset Allocation	$ 3,237,652	$ 0	$ 0	$ 3,237,652
Bonds	553,695			553,695
Balanced	1,346,087			1,346,087
US Stocks	4,401,443			4,401,443
Global	724,926			724,926
Common Collective Trust	0	0	1,458,033	1,458,033
Total Assets at Fair Value	$ 10,263,803	$ 0	$ 1,458,033	$ 11,721,836

Level 3 Gains and Losses

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2011:

	Common Collective Trust
Balance, Beginning of Year	$ 1,458,033
Purchases, Sales, Issuances and Settlements (net)	149,966
Balance, End of Year	$ 1,607,999

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

	Common Collective Trust
Balance, Beginning of Year	$ 1,288,157
Purchases, Sales, Issuances and Settlements (net)	169,876
Balance, End of Year	$ 1,458,033

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 – FINANCIAL INFORMATION CERTIFIED BY PLAN TRUSTEE

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan administrator has obtained a certification from Reliance Trust Company, trustee of the Plan, that all of the information provided by them is complete and accurate. Information included in the accompanying financial statements as of investments, investment and interest income, net investment gain (loss) in fair value of investments and all information in the supplemental schedule is presented in reliance solely upon those certifications.

NOTE 7 – PLAN TERMINATION

Although it has not expressed an intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 8 – TRANSFER FROM OTHER PLAN

On December 14, 2010, net assets of $332,226 from the former A.L. George, LLC 401(k) Plan were merged into the Plan.

NOTE 9 – TRANSFER TO OTHER PLAN AND DUE TO OTHER PLAN

At December 31, 2010, the account Transfer to Other Plan of $2,270,885 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010. At December 31, 2010, the account Due to Other Plan of $2,389,772 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010 of $2,270,885 plus subsequent earnings of $118,887. At January 1, 2011, an additional amount of $1,596,967 was recorded as a Transfer to Other Plan for net assets of additional Owasco Beverage, Inc. employees not reflected at December 31, 2010. The net assets of the Owasco Beverage Inc. employees were transferred out of the Plan in 2011.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

EIN: 16-1613705
PLAN #002
SCHEDULE H, LINE 4I

(a)/(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
Reliance Trust Company	MFS Fund - Bond Fund	*	$ 369,117
Reliance Trust Company	MFS Fund - Total Return Fund	*	553,264
Reliance Trust Company	MFS Fund - Value Fund	*	420,434
Reliance Trust Company	MFS Fund - Research International Fund	*	256,140
Reliance Trust Company	MFS Fund - Conservative Allocation Fund	*	130,852
Reliance Trust Company	MFS Fund - Moderate Allocation Fund	*	759,506
Reliance Trust Company	MFS Fund - Growth Allocation Fund	*	1,024,493
Reliance Trust Company	MFS Fund - Aggressive Growth Allocation Fund	*	1,088,705
Reliance Trust Company	Mass Investors Growth Fund	*	477,798
Reliance Trust Company	Davis New York Venture Fund	*	337,219
Reliance Trust Company	JP Morgan Small Cap Growth Fund	*	218,653
Reliance Trust Company	Alger Mid Cap Growth Fund	*	269,383
Reliance Trust Company	Prud Jennison Mid Cap Growth Fund	*	175,489
Reliance Trust Company	Invesco Real Estate Fund	*	6,529
Reliance Trust Company	American Century Livestrong Inc	*	13,393
Reliance Trust Company	Invesco Van Kempen Small Cap Value	*	5,410
Reliance Trust Company	Columbia Small Cap Core	*	14,262
Reliance Trust Company	Janus Overseas	*	4,950
Reliance Trust Company	First American Mid Cap Index Fund	*	83,172
Reliance Trust Company	Common Collective Trust - MFS Fixed Institutional	*	1,575,641
Reliance Trust Company	Common Collective Trust - MFS Fixed Fund	*	34,935
Reliance Trust Company	Cash Value of Life Insurance	*	21,593
Participant Loans	Notes (Interest Rates Ranging from 4.25% to 9.25%)		241,973
			$ 8,082,911

*Cost Omitted for Participant Directed Investments

A.L. George LLC 401(K) Salary Savings Plan
EIN#: 16-1613705
Plan #002

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

FINANCIAL STATEMENTS
December 31, 2011 and 2010

Table of Contents

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

INDEPENDENT AUDITORS' REPORT 1

AUDITED FINANCIAL STATEMENTS 3

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS 3

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS 4

NOTES TO FINANCIAL STATEMENTS 5

OTHER FINANCIAL INFORMATION 14

SCHEDULE OF ASSETS (HELD AT END OF YEAR) 14

BOWERS & COMPANY
CPAs PLLC
CERTIFIED PUBLIC ACCOUNTANTS • BUSINESS CONSULTANTS

INDEPENDENT AUDITORS' REPORT

TO THE PARTICIPANTS AND ADMINISTRATOR OF
A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

We were engaged to audit the financial statements of the **A.L. George LLC 401(k) Salary Savings Plan** (the "Plan") as of December 31, 2011, and for the year then ended, and the supplemental schedule as of December 31, 2011 as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2010 were audited by other auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Reliance Trust Company, the custodian of the Plan. Their report, dated October 13, 2011, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the custodian, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

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Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and 2011 schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Bowers & Company

Syracuse, New York
July 16, 2012

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

ASSETS

	2011	2010
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Common Collective Trust	$ 1,607,999	$ 1,458,033
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Years Ended December 31, 2011 and 2010

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NET ASSETS AVAILABLE FOR BENEFITS		
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End of Year	$ 8,253,201	$ 9,937,127

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN

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NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN – Continued

Vesting

Participants are immediately vested in their contributions, plus actual earnings thereon. Vesting in the Company's matching and discretionary contributions plus actual earnings is based on years of continuous service. A participant is 100% vested after six years of service.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. A financial hardship withdrawal provision is available, enabling a participant to withdraw an amount to cover an immediate and heavy financial need, in accordance with current Internal Revenue Service regulations.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates from 4.25% to 9.25%, which are commensurate with local prevailing rates as determined quarterly by the Plan Administrator. Principal and interest is paid ratably through bi-weekly payroll deductions.

Forfeitures

At December 31, 2011 and 2010, forfeited nonvested accounts totaled $34,935 and $27,038, respectively. These accounts can be used to reduce employer contributions.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES

The accounting principles and practices which affect the more significant elements of the financial statements are:

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

Purchase and sales are recorded on trade-date basis. Interest is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes plan's gains and losses on investments bought and sold as well as held during the year.

Notes Receivable from Participants

Loans to participants are reported at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses incurred by the Plan are paid by the employers.

Risks and Uncertainties

The Plan provides for various investment options in any combination of a variety of mutual funds. Investments in mutual funds are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain mutual funds and the level of uncertainty related to changes in the value of mutual funds, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued

Estimates

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

Basis of Accounting

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

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

Change for New Pronouncement

Effective December 31, 2010, the Plan retroactively changed its method of recognizing participant loans in its financial statements to conform with a recent pronouncement of the Financial Accounting Standards Board. The Plan had classified participant loans as plan investments which were measured at fair value. Under the new accounting method, participant loans are recorded as notes receivable from participants, and measured at their unpaid principal balance plus any accrued but unpaid interest. Upon adoption, there was no material impact to the Plan.

Date of Management's Review

The Plan has evaluated subsequent events through July 16, 2012, which is the date the financial statements were available to be issued.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 3 – INCOME TAX STATUS

The Employer has adopted the Hartford Retirement Services LLC Prototype Defined Contribution Plan. The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service ruled that the prototype plan of Hartford Retirement Services LLC is acceptable under Section 401(a) of the Internal Revenue Code ("IRC") and, therefore, is not subject to federal income tax under present law. Although the plan has been amended and restated since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

NOTE 4 – INVESTMENTS

Reliance Trust Company, custodian of the Plan's funds, held the Plan's investments and executed transactions therein for 2011 and 2010.

The following presents investments that represent 5% or more of the Plan's net assets at either December 31, 2011 or 2010:

	2011	2010
MFS Fund – Bond Fund	$ 369,117	$ 553,695
MFS Fund – Total Return Fund	$ 553,264	$ 1,346,087
MFS Fund – Value Fund	$ 420,434	$ 1,227,943
MFS Fund – Moderate Allocation Fund	$ 759,506	$ 726,714
MFS Fund – Growth Allocation Fund	$ 1,204,493	$ 1,130,290
MFS Fund – Aggressive Growth Allocation Fund	$ 1,088,705	$ 1,230,558
MFS Fund – Research International Fund	$ 256,140	$ 706,763
Davis New York Venture Fund	$ 337,219	$ 657,664
Alger Mid-Cap Growth Fund	$ 269,383	$ 541,381
JP Morgan Small Cap Growth Fund	$ 218,653	$ 523,586
Mass Investors Growth Fund	$ 477,798	$ 1,086,519
Common Collective Trust – MFS Fixed Institutional Fund	$ 1,575,641	$ 1,462,576

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") No. 820, *Fair Value Measurements and Disclosures,* establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC No. 820 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

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

Common Collective Trust: Valued based on the relative interest of each participating investor (including each participant) in the fair value of the common/collective trust.

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

The fair value of the Common/Collective Trust Fund has been estimated using the net asset value per share of the underlying investments. There are no unfunded commitments for the Common/Collective Trust Fund as of December 31, 2011 or 2010. The Trust requires twelve months written notice for non-benefit related withdrawals from investment contracts. The following is a description of the Common/Collective Trust Fund:

The Common/Collective Trust Fund's principal objective is to earn a current income stream that is relatively consistent over time, while preserving capital through a broadly diversified high quality portfolio. The Common/Collective Trust Fund invests in a variety of investment contracts issued by insurance companies and other financial institutions and other investment products with similar characteristics. The fund strives to maintain a stable $1 unit value. However, there is no guarantee that this objective can be achieved.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011:

	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Asset Allocation	$ 3,016,949	$ 0	$ 0	$ 3,016,949
Bonds	369,117			369,117
Balanced	553,264			553,264
US Stocks	2,008,349			2,008,349
Global	261,090			261,090
Common Collective Trust	0	0	1,607,999	1,607,999
Total Assets at Fair Value	$ 6,208,769	$ 0	$ 1,607,999	$ 7,816,768

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

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

	Level 1	Level 2	Level 3	Total
Mutual Funds				
Asset Allocation	$ 3,237,652	$ 0	$ 0	$ 3,237,652
Bonds	553,695			553,695
Balanced	1,346,087			1,346,087
US Stocks	4,401,443			4,401,443
Global	724,926			724,926
Common Collective Trust	0	0	1,458,033	1,458,033
Total Assets at Fair Value	$ 10,263,803	$ 0	$ 1,458,033	$ 11,721,836

Level 3 Gains and Losses

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2011:

	Common Collective Trust
Balance, Beginning of Year	$ 1,458,033
Purchases, Sales, Issuances and Settlements (net)	149,966
Balance, End of Year	$ 1,607,999

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

	Common Collective Trust
Balance, Beginning of Year	$ 1,288,157
Purchases, Sales, Issuances and Settlements (net)	169,876
Balance, End of Year	$ 1,458,033

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 – FINANCIAL INFORMATION CERTIFIED BY PLAN TRUSTEE

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan administrator has obtained a certification from Reliance Trust Company, trustee of the Plan, that all of the information provided by them is complete and accurate. Information included in the accompanying financial statements as of investments, investment and interest income, net investment gain (loss) in fair value of investments and all information in the supplemental schedule is presented in reliance solely upon those certifications.

NOTE 7 – PLAN TERMINATION

Although it has not expressed an intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 8 – TRANSFER FROM OTHER PLAN

On December 14, 2010, net assets of $332,226 from the former A.L. George, LLC 401(k) Plan were merged into the Plan.

NOTE 9 – TRANSFER TO OTHER PLAN AND DUE TO OTHER PLAN

At December 31, 2010, the account Transfer to Other Plan of $2,270,885 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010. At December 31, 2010, the account Due to Other Plan of $2,389,772 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010 of $2,270,885 plus subsequent earnings of $118,887. At January 1, 2011, an additional amount of $1,596,967 was recorded as a Transfer to Other Plan for net assets of additional Owasco Beverage, Inc. employees not reflected at December 31, 2010. The net assets of the Owasco Beverage Inc. employees were transferred out of the Plan in 2011.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

EIN: 16-1613705
PLAN #002
SCHEDULE H, LINE 4I

(a)/(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
Reliance Trust Company	MFS Fund - Bond Fund	*	$ 369,117
Reliance Trust Company	MFS Fund - Total Return Fund	*	553,264
Reliance Trust Company	MFS Fund - Value Fund	*	420,434
Reliance Trust Company	MFS Fund - Research International Fund	*	256,140
Reliance Trust Company	MFS Fund - Conservative Allocation Fund	*	130,852
Reliance Trust Company	MFS Fund - Moderate Allocation Fund	*	759,506
Reliance Trust Company	MFS Fund - Growth Allocation Fund	*	1,024,493
Reliance Trust Company	MFS Fund - Aggressive Growth Allocation Fund	*	1,088,705
Reliance Trust Company	Mass Investors Growth Fund	*	477,798
Reliance Trust Company	Davis New York Venture Fund	*	337,219
Reliance Trust Company	JP Morgan Small Cap Growth Fund	*	218,653
Reliance Trust Company	Alger Mid Cap Growth Fund	*	269,383
Reliance Trust Company	Prud Jennison Mid Cap Growth Fund	*	175,489
Reliance Trust Company	Invesco Real Estate Fund	*	6,529
Reliance Trust Company	American Century Livestrong Inc	*	13,393
Reliance Trust Company	Invesco Van Kempen Small Cap Value	*	5,410
Reliance Trust Company	Columbia Small Cap Core	*	14,262
Reliance Trust Company	Janus Overseas	*	4,950
Reliance Trust Company	First American Mid Cap Index Fund	*	83,172
Reliance Trust Company	Common Collective Trust - MFS Fixed Institutional	*	1,575,641
Reliance Trust Company	Common Collective Trust - MFS Fixed Fund	*	34,935
Reliance Trust Company	Cash Value of Life Insurance	*	21,593
Participant Loans	Notes (Interest Rates Ranging from 4.25% to 9.25%)		241,973
			$ 8,082,911

*Cost Omitted for Participant Directed Investments

A.L. George LLC 401(K) Salary Savings Plan
EIN#: 16-1613705
Plan #002

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

FINANCIAL STATEMENTS
December 31, 2011 and 2010

Table of Contents

A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

INDEPENDENT AUDITORS' REPORT 1

AUDITED FINANCIAL STATEMENTS 3

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS 3

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS 4

NOTES TO FINANCIAL STATEMENTS 5

OTHER FINANCIAL INFORMATION 14

SCHEDULE OF ASSETS (HELD AT END OF YEAR) 14

BOWERS & COMPANY
CPAs PLLC
CERTIFIED PUBLIC ACCOUNTANTS • BUSINESS CONSULTANTS

INDEPENDENT AUDITORS' REPORT

TO THE PARTICIPANTS AND ADMINISTRATOR OF
A.L. GEORGE LLC 401(K) SALARY SAVINGS PLAN

We were engaged to audit the financial statements of the **A.L. George LLC 401(k) Salary Savings Plan** (the "Plan") as of December 31, 2011, and for the year then ended, and the supplemental schedule as of December 31, 2011 as listed in the accompanying index. These financial statements and supplemental schedule are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2010 were audited by other auditors. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Reliance Trust Company, the custodian of the Plan. Their report, dated October 13, 2011, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the custodian, were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information described in Note 6, which was certified by Reliance Trust Company, the custodian of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of December 31, 2011 and for the year then ended, that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and 2011 schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Bowers & Company

Syracuse, New York
July 16, 2012

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

ASSETS

	2011	2010
Investments, at Fair Value		
Common Collective Trust	$ 1,607,999	$ 1,458,033
Mutual Funds	6,208,769	10,263,803
Cash Value of Life Insurance	21,593	20,308
Total Investments, at Fair Value	7,838,361	11,742,144
Notes Receivable from Participants	241,973	245,113
Receivables		
Employer Contributions	179,075	313,161
Total Assets	8,259,409	12,300,418

LIABILITIES

Due to Other Plan	0	2,389,772
Other	8,785	8,785
Total Liabilities	8,785	2,398,557
Net Assets Available For Benefits at Fair Value	8,250,624	9,901,861
Adjustment From Fair Value to Contract Value For Fully Benefit-Responsive Investment Contracts	2,577	35,266
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,253,201	$ 9,937,127

See notes to financial statements.

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2011 and 2010

	2011	2010
ADDITIONS		
Contributions:		
Participant	$ 355,400	$ 346,302
Employer	317,056	440,558
Rollovers	65,486	87,474
Interest Income on Notes Receivable from Participants	10,542	14,870
Increase in Cash Value of Life Insurance	1,285	1,453
Interest and Dividends	127,794	149,390
Net Investment Gain from Common Collective Trust	9,484	
Net Investment Gain (Loss) from Mutual Funds	(242,477)	1,005,586
Transfer from Other Plan	0	332,226
Total Additions	644,570	2,377,859
DEDUCTIONS		
Benefit Payments to Participants and Beneficiaries	730,814	525,196
Insurance Premiums Paid	715	780
Transfer to Other Plan	1,596,967	2,270,885
Total Deductions	2,328,496	2,796,861
DECREASE IN NET ASSETS DURING THE YEAR	(1,683,926)	(419,002)
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	9,937,127	10,356,129
End of Year	$ 8,253,201	$ 9,937,127

See notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN

The following brief description of the A. L. George, LLC (the "Company") 401(k) Salary Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of the Company who have ninety days of service and are age eighteen or older. On October 29, 2010, the Company acquired the assets of Onondaga Beverage Corporation at which time all employees of Onondaga Beverage Corporation became employees of A.L. George, LLC. Further, the Company adopted the Owasco and Onondaga Beverage 401(k) salary savings plan. Additionally, at this time, Employees of Owasco Beverage, Inc. were no longer participants of the Plan. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Contributions

Each year, participants may contribute a percentage of their annual compensation, as defined in the Plan, subject to Internal Revenue Service (IRS) limitations. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company will match 50% of the participant's contributions up to a maximum matching contribution of 3 percent. Additionally, the Company may make a discretionary profit sharing contribution each year for participants who have one year of service and 1,000 hours of service in that year. Participants direct the investment of their contributions and the employer matching and discretionary contributions into various investment options offered by the plan. Participants may change their investment options at any time.

Participant Accounts

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

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 – GENERAL DESCRIPTION OF THE PLAN – Continued

Vesting

Participants are immediately vested in their contributions, plus actual earnings thereon. Vesting in the Company's matching and discretionary contributions plus actual earnings is based on years of continuous service. A participant is 100% vested after six years of service.

Payment of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a ten-year period. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. A financial hardship withdrawal provision is available, enabling a participant to withdraw an amount to cover an immediate and heavy financial need, in accordance with current Internal Revenue Service regulations.

Notes Receivable from Participants

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Forfeitures

At December 31, 2011 and 2010, forfeited nonvested accounts totaled $34,935 and $27,038, respectively. These accounts can be used to reduce employer contributions.

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December 31, 2011 and 2010

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Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

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Loans to participants are reported at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the plan document.

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Benefits are recorded when paid.

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Administrative expenses incurred by the Plan are paid by the employers.

Risks and Uncertainties

The Plan provides for various investment options in any combination of a variety of mutual funds. Investments in mutual funds are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain mutual funds and the level of uncertainty related to changes in the value of mutual funds, it is at least reasonably possible that changes in risks in the near term would materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES – Continued

Estimates

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

Basis of Accounting

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

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

Change for New Pronouncement

Effective December 31, 2010, the Plan retroactively changed its method of recognizing participant loans in its financial statements to conform with a recent pronouncement of the Financial Accounting Standards Board. The Plan had classified participant loans as plan investments which were measured at fair value. Under the new accounting method, participant loans are recorded as notes receivable from participants, and measured at their unpaid principal balance plus any accrued but unpaid interest. Upon adoption, there was no material impact to the Plan.

Date of Management's Review

The Plan has evaluated subsequent events through July 16, 2012, which is the date the financial statements were available to be issued.

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 3 – INCOME TAX STATUS

The Employer has adopted the Hartford Retirement Services LLC Prototype Defined Contribution Plan. The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service ruled that the prototype plan of Hartford Retirement Services LLC is acceptable under Section 401(a) of the Internal Revenue Code ("IRC") and, therefore, is not subject to federal income tax under present law. Although the plan has been amended and restated since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

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December 31, 2011 and 2010

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Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

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

Common Collective Trust: Valued based on the relative interest of each participating investor (including each participant) in the fair value of the common/collective trust.

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

The fair value of the Common/Collective Trust Fund has been estimated using the net asset value per share of the underlying investments. There are no unfunded commitments for the Common/Collective Trust Fund as of December 31, 2011 or 2010. The Trust requires twelve months written notice for non-benefit related withdrawals from investment contracts. The following is a description of the Common/Collective Trust Fund:

The Common/Collective Trust Fund's principal objective is to earn a current income stream that is relatively consistent over time, while preserving capital through a broadly diversified high quality portfolio. The Common/Collective Trust Fund invests in a variety of investment contracts issued by insurance companies and other financial institutions and other investment products with similar characteristics. The fund strives to maintain a stable $1 unit value. However, there is no guarantee that this objective can be achieved.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011:

	Level 1	Level 2	Level 3	Total
Mutual Funds:				
Asset Allocation	$ 3,016,949	$ 0	$ 0	$ 3,016,949
Bonds	369,117			369,117
Balanced	553,264			553,264
US Stocks	2,008,349			2,008,349
Global	261,090			261,090
Common Collective Trust	0	0	1,607,999	1,607,999
Total Assets at Fair Value	$ 6,208,769	$ 0	$ 1,607,999	$ 7,816,768

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 - FAIR VALUE - Continued

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

	Level 1	Level 2	Level 3	Total
Mutual Funds				
Asset Allocation	$ 3,237,652	$ 0	$ 0	$ 3,237,652
Bonds	553,695			553,695
Balanced	1,346,087			1,346,087
US Stocks	4,401,443			4,401,443
Global	724,926			724,926
Common Collective Trust	0	0	1,458,033	1,458,033
Total Assets at Fair Value	$ 10,263,803	$ 0	$ 1,458,033	$ 11,721,836

Level 3 Gains and Losses

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2011:

	Common Collective Trust
Balance, Beginning of Year	$ 1,458,033
Purchases, Sales, Issuances and Settlements (net)	149,966
Balance, End of Year	$ 1,607,999

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

	Common Collective Trust
Balance, Beginning of Year	$ 1,288,157
Purchases, Sales, Issuances and Settlements (net)	169,876
Balance, End of Year	$ 1,458,033

NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 – FINANCIAL INFORMATION CERTIFIED BY PLAN TRUSTEE

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan administrator has obtained a certification from Reliance Trust Company, trustee of the Plan, that all of the information provided by them is complete and accurate. Information included in the accompanying financial statements as of investments, investment and interest income, net investment gain (loss) in fair value of investments and all information in the supplemental schedule is presented in reliance solely upon those certifications.

NOTE 7 – PLAN TERMINATION

Although it has not expressed an intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 8 – TRANSFER FROM OTHER PLAN

On December 14, 2010, net assets of $332,226 from the former A.L. George, LLC 401(k) Plan were merged into the Plan.

NOTE 9 – TRANSFER TO OTHER PLAN AND DUE TO OTHER PLAN

At December 31, 2010, the account Transfer to Other Plan of $2,270,885 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010. At December 31, 2010, the account Due to Other Plan of $2,389,772 represents the net assets of the employees of Owasco Beverage, Inc. at October 29, 2010 of $2,270,885 plus subsequent earnings of $118,887. At January 1, 2011, an additional amount of $1,596,967 was recorded as a Transfer to Other Plan for net assets of additional Owasco Beverage, Inc. employees not reflected at December 31, 2010. The net assets of the Owasco Beverage Inc. employees were transferred out of the Plan in 2011.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

EIN: 16-1613705
PLAN #002
SCHEDULE H, LINE 4I

(a)/(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
Reliance Trust Company	MFS Fund - Bond Fund	*	$ 369,117
Reliance Trust Company	MFS Fund - Total Return Fund	*	553,264
Reliance Trust Company	MFS Fund - Value Fund	*	420,434
Reliance Trust Company	MFS Fund - Research International Fund	*	256,140
Reliance Trust Company	MFS Fund - Conservative Allocation Fund	*	130,852
Reliance Trust Company	MFS Fund - Moderate Allocation Fund	*	759,506
Reliance Trust Company	MFS Fund - Growth Allocation Fund	*	1,024,493
Reliance Trust Company	MFS Fund - Aggressive Growth Allocation Fund	*	1,088,705
Reliance Trust Company	Mass Investors Growth Fund	*	477,798
Reliance Trust Company	Davis New York Venture Fund	*	337,219
Reliance Trust Company	JP Morgan Small Cap Growth Fund	*	218,653
Reliance Trust Company	Alger Mid Cap Growth Fund	*	269,383
Reliance Trust Company	Prud Jennison Mid Cap Growth Fund	*	175,489
Reliance Trust Company	Invesco Real Estate Fund	*	6,529
Reliance Trust Company	American Century Livestrong Inc	*	13,393
Reliance Trust Company	Invesco Van Kempen Small Cap Value	*	5,410
Reliance Trust Company	Columbia Small Cap Core	*	14,262
Reliance Trust Company	Janus Overseas	*	4,950
Reliance Trust Company	First American Mid Cap Index Fund	*	83,172
Reliance Trust Company	Common Collective Trust - MFS Fixed Institutional	*	1,575,641
Reliance Trust Company	Common Collective Trust - MFS Fixed Fund	*	34,935
Reliance Trust Company	Cash Value of Life Insurance	*	21,593
Participant Loans	Notes (Interest Rates Ranging from 4.25% to 9.25%)		241,973
			$ 8,082,911

*Cost Omitted for Participant Directed Investments

Fee and Compensation Disclosure Report

This document is intended to assist a plan administrator ("you") in completing the Form 5500 Schedule C[1] by identifying different types of compensation paid with respect to the Hartford product utilized by your plan.

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

- Where an actual dollar amount of compensation is disclosed, no further notation regarding compensation calculations is generally provided.
- Where an estimate of the compensation amount is disclosed, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount.
- Where a formula or rate is provided to report compensation, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount. This formula or rate may be disclosed to describe the compensation to which it applies under the Schedule C rules. Alternatively, for purposes of Schedule C disclosure or in connection with your fiduciary review of the compensation paid with respect to the services, products and investment options utilized by the plan, you may calculate and disclose an actual or estimated dollar amount by multiplying the rate by the total assets to which it applies.

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2011 - 12/31/2011 and indirect compensation is presented on a calendar year basis ending 12/31/2011.

This report includes compensation actually paid to or by the Hartford within the indicated plan year as part of your Hartford product. *(Note: If the plan year period or plan year end indicated in this Schedule C reporting package is incorrect, please notify your Hartford customer service representative immediately).* This report does not include amounts deducted from plan assets and paid to third parties (other than Hartford). In addition, the report does not include compensation related to investments held by the plan that are not serviced on our recordkeeping system. You should contact your other service providers for reportable compensation information. You may also receive information on the compensation reported here from other service providers as is described below.

Please note that we have provided suggested service codes with respect to services provided through our Hartford product. Please review all Schedule C and other Form 5500 materials with your experienced benefits counsel and other professionals to determine the most appropriate codes for your plan. In addition, please note that because plans with fewer than 100 participants (as of the beginning of the plan year) are generally not required to file Schedule C, you should refer to the instructions provided by the IRS for Schedule C and/or review the applicability of Schedule C to your plan with your experienced tax/benefits counsel, to determine whether it is necessary for the plan to report the information contemplated by this report.

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

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Information provided in this document and related materials we provide are not intended to be and shall not be deemed tax advice, tax form preparation services, legal advice, advice to plans regarding compliance with ERISA reporting compliance, or accounting or other professional services. As described above, the information contained in this report may not cover all of the compensation received by the plan's service providers. We strongly encourage you to review all Schedule C and other Form 5500 materials with experienced benefits counsel and other professionals.

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[1] Please refer to the Schedule C of the Form 5500 and its instructions (available at: http://www.dol.gov/ebsa/5500main.html), and please confer with experienced benefits counsel and other professionals, to determine the applicability of Schedule C to your plan.

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

A.L. GEORGE, LLC 401K SSP (110519316)
EIN #: 16-1613705

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2011 - 12/31/2011 and indirect compensation is presented on a calendar year basis ending 12/31/2011.

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

Total Direct Compensation Paid **$0.00**

The total amount identified above reflects all fees deducted from plan assets at the plan administrator's direction for the plan year. Service providers which have received portions of these direct fees are listed below, along with the amount of fees they received. Please note that if there is a discrepancy between the total direct fees reported above and the sum of the direct fees reported below, you should contact your other service providers or your plan records to identify the recipient(s) of the fees and any other information relevant to your Schedule C filing.

Recipient: Hartford Retirement Services, LLC EIN: 26-1589907

Service Codes: 15, 37, 38, 49, 59, 60, 62, 63, 64, 65, 72, 99, 50 (if direct compensation amount reflected below)

Direct Compensation **$0.00**

The total amount identified above reflects fees deducted from plan assets at the plan administrator's direction for the 2011 plan year for the above named recipient. Please review other service providers, below, to determine whether direct fees were also paid to them. Also, please review your records to determine whether other service providers may have received any compensation not reported below (e.g., a reimbursement paid to any plan fiduciary, your employee benefits counsel, or a plan auditor).

Note: Due to system accounting protocols (including 'cash basis' accounting), amounts reported as Direct Compensation and amounts reported as paid to Hartford Retirement Services, LLC are the net result of aggregating direct compensation after the effects of adjustments processed in 2011, some of which may have pertained to prior years.

Indirect Compensation

Float compensation Payor: Reliance Trust Company EIN: 58-1428634 **$18.62**

This is an estimate based on the average annual rate of float compensation (0.0712% for 2011) earned on certain processing bank accounts for the 2011 calendar year multiplied by an estimate of the assets related to uncashed checks*. This estimate does not include float earned for any other reason (e.g., if amounts remitted to The Hartford cannot be immediately invested because they are not in good order). Please review or request a copy of the current float disclosure for more information about the other circumstances in which float is earned.

* A complete listing of distribution checks that remain outstanding is available on the Retirement Plan Access web site under the Standard Reports section (Report R03998-Outstanding Distribution Checks). Uncashed check assets will continue to remain in a float-earning bank account until such time direction is received from the Plan Sponsor. The Plan Sponsor should consult with their tax advisor or benefits counsel to determine if assets attributable to uncashed checks should be included on the Form 5500 filing.

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. Hartford's Code of Ethics and Business Conduct generally restricts Hartford employees from giving to or receiving gifts from customers and/or business partners having a value of over $100, in any individual situation, without prior approval. However, it is possible that one or more of your service providers for the calendar year, including Hartford, engaged in transactions generating nonmonetary compensation. Information concerning reportable transactions undertaken between or among non-Hartford parties may not be available to The Hartford.

Please consult with your legal or tax advisors if you have any questions.

Compensation paid with respect to Funds

Investment Option Name	*EIN*	*Rate of Fees and Payments Received By Hartford with Respect to the Fund* (rates as of 12/31/2011)*	*Total Fund Annual Operating Expenses (Fund Expense Ratio) (as of 12/31/2011)*
ALGER MIDCAP GROWTH FUND-A	13-2665689	0.55% x assets	1.38%
AMERICAN CEN LIVSTRONG 2020-A	43-0821857	0.60% x assets	0.46%
AMERICAN CENT LIVESTRONG INC-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2015-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2025-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2030-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2035-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2045-A	43-0821857	0.60% x assets	0.46%
AMERICAN CNT LIVESTRONG 2050-A	43-0821857	0.60% x assets	0.46%
COLUMBIA SMALL CAP CORE-A	36-6851784	0.50% x assets	1.32%
DAVIS NEW YORK VENTURE FUND-A	13-2601967	0.35% x assets plus $12/participant	0.89%
FIXED FUND	23-2177800	0.88% x assets	0.00%
FIXED FUND-INSTITUTIONAL	23-2177800		0.00%
INVESCO REAL ESTATE FUND-A	76-0343427	0.60% x assets	1.30%
INVESCO VAN KAMPEN SM CAP VAL-A	84-0933032	0.60% x assets	1.36%
JANUS OVERSEAS A	84-0592523	0.45% x assets plus $16/participant	1.03%
JPMORGAN SMALL CAP GROWTH FUND-A	26-3613641	0.55% x assets	1.39%
MASS INVESTORS GROWTH STK FD-R3	04-1885327	0.63% x assets	0.85%
MFS AGGRESS GROWTH ALLOCATION-R3	04-3158862	0.63% x assets	0.32%
MFS BOND FUND-R3	04-2535629	0.63% x assets	0.85%
MFS CONSERVATIVE ALLOCATION-R3	04-3158862	0.63% x assets	0.31%
MFS GROWTH ALLOCATION FUND-R3	04-3158862	0.63% x assets	0.30%
MFS MODERATE ALLOCATION FUND-R3	04-3158862	0.63% x assets	0.30%
MFS RESEARCH INTERNATIONAL R3	04-3158862	0.63% x assets	1.20%
MFS TOTAL RETURN FUND-R3	04-2468583	0.63% x assets	0.77%
MFS VALUE FUND-R3	04-3158862	0.63% x assets	0.95%
NUVEEN MID CAP INDEX-A	41-1418224	0.50% x assets	0.86%
PRUD JENNISON MID CAP GROWTH-A	13-2631108	0.45% x assets plus $16/participant	1.09%

The list includes any investment option held by the plan on at least one month end during the 2011 calendar year. To arrive at an estimate of the dollar amount that Hartford received from each fund, multiply the rate of fees received from each fund by your plan's year-end balance (or if the fund was liquidated prior to year end, the balance on the liquidation date) and, if applicable, the per participant fee by the number of participants in the fund at year end (or the liquidation date if earlier). This will be an estimate because your plan's balance and number of

participants will vary over the course of the year, so the year-end balance and number of participants may be higher or lower than the daily balance. In addition, these fees are calculated on a daily basis.

* Please note that Hartford Retirement Services, LLC's affiliate, Hartford Securities Distribution Company, Inc., receives the sales compensation (12b-1 fees) portion of this amount. After compensating the plan's broker-dealer firm, if applicable, any residual amount is paid to Hartford Retirement Services, LLC.

Recipient: RBC CAPITAL MARKETS CORP EIN: 41-1416330

Service Codes:

Please contact your Service Provider for the list of applicable services performed and Service Codes.

Direct Compensation **$0.00**

Our records indicate that this recipient did not receive any Direct Compensation. Please review your records to determine whether this service provider may have received any compensation not reported.

Indirect Compensation

* **Sales commission** Payor: Hartford Securities Distribution Company, Inc. EIN: 06-1408044 **$23,283.80**

* *Sales Commissions are reported on a Plan Year basis.*

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. Hartford's Code of Ethics and Business Conduct generally restricts Hartford employees from giving to or receiving gifts from customers and/or business partners having a value of over $100, in any individual situation, without prior approval. However, it is possible that one or more of your service providers for the 2011 calendar year, including Hartford, engaged in transactions generating nonmonetary compensation. Information concerning reportable transactions undertaken between or among non-Hartford parties may not be available to The Hartford.

Please consult with your legal or tax advisors if you have any questions.

Recipient: GPC Securities, Inc. EIN: 58-1517899

Service Codes: 15, 64, 65

Indirect Compensation

Transaction Processing Services Payor: Hartford Retirement Services, LLC EIN: 26-1589907 **$2,972.51**

GPC Securities, Inc. performed recordkeeping and trading functions through August 22, 2011. These activities were transferred to Hartford Securities Distribution Company, Inc. ("HSD") on August 23, 2011. HSD is a broker-dealer registered with the Securities and Exchange Commission which executes, clears and settles the Plan's purchase, exchange and redemption of shares or units in the funds on an agency basis. It is a wholly-owned affiliate of Hartford Retirement Services, LLC. More information is available in the Fund Fee Disclosure Notice for Retirement Plan Fiduciaries which accompanies the HSD Securities Account Agreement.

This is an estimate based on multiplying actual 2011 month end assets by 0.045%/12 for months January through August and then summing the results.

Recipient: Morningstar Associates, LLC EIN: 36-4317381

Service Code: 49

Indirect Compensation

"Managed by You" services fee Payor: Hartford Life Insurance Company EIN: 06-0974148 **$43.60**

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

Recipient: Reliance Trust Company EIN: 58-1428634

Indirect Compensation

Custodial/Trust service fee **$460.19**
Service Codes: 19, 25, 99

Payors: Hartford Life Insurance Company EIN: 06-0974148
Hartford Retirement Services, LLC EIN: 26-1589907

This is an estimate based on multiplying actual 2011 month end assets by 0.005%/12 and then summing the results.