Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 11/01/2010 and ending 10/31/2011

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
THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 11/01/1967

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
THE BOBRICK CORPORATION

11611 HART STREET
NORTH HOLLYWOOD, CA 91605

2b Employer Identification Number (EIN) 95-2500371

2c Sponsor's telephone number 818-503-1603

2d Business code (see instructions) 424210

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.	08/15/2012	TUAN HO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
THE BOBRICK CORPORATION

11611 HART STREET
NORTH HOLLYWOOD, CA 91605

3b Administrator's EIN
95-2500371

3c Administrator's telephone number
818-503-1603

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**	520
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**	443
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	96
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	539
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	5
f	Total. Add lines **6d** and **6e**	**6f**	544
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	497
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

(1)		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)		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)		**A**	(Insurance Information)
(4)	X	**C**	(Service Provider Information)
(5)	X	**D**	(DFE/Participating Plan Information)
(6)		**G**	(Financial Transaction Schedules)

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

For calendar plan year 2010 or fiscal plan year beginning 11/01/2010 and ending 10/31/2011

A Name of plan	**B** Three-digit plan number (PN) ▶	
THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN		001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
THE BOBRICK CORPORATION	95-2500371	

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).. . . . . ☐ 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

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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)

WELLS FARGO BANK, N.A.

94-1347393

(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 19 21 37 38 50 59 60 62 63	SERVICE PROVIDER	9375	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 11/01/2010 and ending 10/31/2011

A Name of plan
THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
THE BOBRICK CORPORATION

D Employer Identification Number (EIN)
95-2500371

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: WELLS FARGO STABLE RETURN FUND G

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-6202499-001	C	10015235

a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO INTNATL EQTY INDX FND G

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-2265229-001	C	1173302

a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO RUSSELL 2000 INDX FND N

b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
94-3316721-001	C	3046294

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)

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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)

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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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 11/01/2010 and ending 10/31/2011

A Name of plan
THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE BOBRICK CORPORATION

D Employer Identification Number (EIN)
95-2500371

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	62995	54531
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1213201	672323
(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)	1347369	1536842
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	373521	263245
(B) Common	1c(4)(B)	913218	1026441
(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)	1353688	1382199
(9) Value of interest in common/collective trusts	1c(9)	14298676	14234831
(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)	10365255	11750849
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	29927923	30921261
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	29927923	30921261

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)		
	(B) Participants	2a(1)(B)	1360265	
	(C) Others (including rollovers)	2a(1)(C)	1290	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1361555
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	21978	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)	51656	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	79028	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		152662
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	20094	
	(B) Common stock	2b(2)(B)	23797	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	216380	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		260271
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	5179994	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	5240270	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-60276

			(a) Amount	(b) Total
2b	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	27542	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		27542
	(6) Net investment gain (loss) from common/collective trusts	2b(6)		316093
	(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)		435792
c	Other income	2c		
d	Total income. Add all **income** amounts in column (b) and enter total	2d		2493639
	Expenses			
e	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1418777	
	(2) To insurance carriers for the provision of benefits	2e(2)		
	(3) Other	2e(3)		
	(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		1418777
f	Corrective distributions (see instructions)	2f		25760
g	Certain deemed distributions of participant loans (see instructions)	2g		29147
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)	26617	
	(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		26617
j	Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1500301
	Net Income and Reconciliation			
k	Net income (loss). Subtract line 2j from line 2d	2k		993338
l	Transfers of assets:			
	(1) To this plan	2l(1)		
	(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: SOBUL, PRIMES & SCHENKEL, CPA, APC **(2)** EIN: 95-3661421

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		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 11/01/2010 and ending 10/31/2011

A Name of plan
THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
THE BOBRICK CORPORATION

D Employer Identification Number (EIN)
95-2500371

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 56-1354495

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

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):

Independent Auditors' Report

To The Bobrick Corporation
Profit Sharing Retirement Plan Committee

We were engaged to audit the accompanying statements of net assets available for benefits of The Bobrick Corporation Profit Sharing Plan as of October 31, 2011 and 2010 and the related statement of changes in net assets available for benefits for the year ended October 31, 2011, and the supplementary schedule as of October 31, 2011. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Wells Fargo Bank, the custodian of the Plan, except for comparing such information with the related information included in the 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 and for the years ended October 31, 2011 and 2010, 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 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the 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 the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



June 20, 2012

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

OCTOBER 31, 2011 AND 2010

with

REPORT OF INDEPENDENT AUDITORS

Independent Auditors' Report

To The Bobrick Corporation
Profit Sharing Retirement Plan Committee

We were engaged to audit the accompanying statements of net assets available for benefits of The Bobrick Corporation Profit Sharing Plan as of October 31, 2011 and 2010 and the related statement of changes in net assets available for benefits for the year ended October 31, 2011, and the supplementary schedule as of October 31, 2011. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Wells Fargo Bank, the custodian of the Plan, except for comparing such information with the related information included in the 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 and for the years ended October 31, 2011 and 2010, 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 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the 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 the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



June 20, 2012

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
OCTOBER 31, 2011 AND 2010

	OCTOBER 31,	
	2011	2010
ASSETS		
Investments, at fair value		
Cash equivalents and certificates of deposit	$ 672,323	$ 1,213,201
Convertible debentures	1,541,842	1,347,369
Convertible preferred stock	258,245	373,521
Common stock	1,026,441	913,218
Common/collective trusts	14,234,831	14,298,676
Mutual funds	11,750,849	10,365,255
Total Investments	29,484,531	28,511,240
Receivables		
Participants' contributions	54,531	62,995
Notes receivable from participants	1,382,199	1,353,688
Total Receivables	1,436,730	1,416,683
TOTAL ASSETS	30,921,261	29,927,923
NET ASSETS AVAILABLE FOR BENEFITS	$ 30,921,261	$ 29,927,923

The Accompanying Notes are an Integral Part of these Financial Statements

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED OCTOBER 31, 2011

ADDITIONS		
Additions to net assets attributed to:		
Investment income		
Net appreciation in fair value of investments	$ 719,151	
Interest and dividend income	333,905	
Total Investment Income		$ 1,053,056
Interest income from notes receivable from participants		79,028
Contributions		
Participants contributions	1,360,265	
Participants rollover contributions	1,290	
Total Contributions		1,361,555
TOTAL ADDITIONS		2,493,639
DEDUCTIONS		
Deductions from net assets attributable to:		
Expenses		
Benefits paid to participants	1,473,684	
Administrative expenses	26,617	
TOTAL DEDUCTIONS		1,500,301
NET INCREASE		993,338
Net assets available for benefits, beginning of year		29,927,923
NET ASSETS AVAILABLE FOR BENEFITS, END OF YEAR		$ 30,921,261

The Accompanying Notes are an Integral Part of these Financial Statements

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
OCTOBER 31, 2011 AND 2010

NOTE 1 - DESCRIPTION OF PLAN

The following description of The Bobrick Corporation Profit Sharing Retirement Plan (the "Plan") provides only general information. Participants should refer to the Plan's agreement for a more complete description of the Plan's provisions.

(a) General Information

The Plan is a fully participant-directed defined contribution plan designed for the benefit of the employees of The Bobrick Corporation and its subsidiaries (the "Company"). The Plan was established on November 1, 1967 and subsequently amended. The Plan consists of two components: the first component permits certain employees to defer compensation pursuant to section 401(k) of the Internal Revenue Code (the "Code"); the second component permits the Company to make an additional contribution to the Plan based on net income, as defined in accordance with the Plan, for the benefit of certain eligible employees, whether or not those employees have elected to participate in the deferred compensation component of the Pl

The Plan is subject to the provisions of The Employee Retirement Income Security Act of 1974 (ERISA). The Plan is administered by The Bobrick Corporation Profit Sharing Retirement Plan Committee (the "Committee"), which is composed of certain officers and directors of the Company. The Plan's trustee, Wells Fargo Bank, holds and administers the contributions to the Plan and invests and reinvests the Plan's assets at the direction of the participants.

(b) Eligibility

Employees are eligible to participate in the Plan upon completing 60 consecutive days of service during which they must have worked at least 320 hours of service.

(c) Employee Contributions

Each participant may defer from 1% up to 90% of their annual compensation not exceeding $16,500 for the calendar year 2011, and higher amounts as may be prescribed by the Internal Revenue Service in future years as well as catch up contributions. Participants may also elect to defer from 1% up to 90% of their Christmas Stocking Dividend.

Participants are allowed to change the contribution amount and to suspend or resume contributions at any time upon written notice to the Company. They may also change their investment options daily.

NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

(d) Employer Contributions

For each Plan year, the Company may make Safe Harbor Nonelective Employer Contributions ("Safe Harbor Contributions"). The entry date for the purpose of sharing in the Safe Harbor Contribution is the first day of each Plan year and the first day of the seventh month of each Plan year following the day the participant has completed one year (1,000 hours) of service. Under this arrangement, the Company would be required, without regard to whether the employee makes an elective contribution, to make a contribution to the Plan equal to at least 3% of the employee's compensation, which excludes compensation prior to that person's entry date as described above. The maximum limit for the Safe Harbor Contributions for the Plan year ended October 31, 2011 was $245,000.

The Company is required to give written notice to all eligible participants of its election to make Safe Harbor Contributions before the beginning of each Plan year. Eligible participants will receive their allocation of the Safe Harbor Contribution without regard to any last day of employment or hour of service requirement that may apply to other types of contributions.

(e) Investment Income or Loss

Investment income or loss is allocated among participants based upon each participant's pro rata share of the total participant accounts.

(f) Participant Accounts

Each participant's account is credited with the participant's contribution, allocation of the Company's contribution, if applicable, and the Plan earnings, including any unrealized appreciation or depreciation on investment assets.

(g) Participant Vesting

Participants are immediately vested in their voluntary contributions and the Company's Safe Harbor Contributions, plus actual earnings thereon. Vesting in the Company's discretionary contribution portion of their accounts, plus actual earnings thereon, is based on years of continuous service. A participant is 20% vested after two years of credited service. Vesting increases 20% each following year until fully vested after six years.

All participants become fully vested in their nonelective employer contribution accounts when they attain normal retirement age (defined as the anniversary date following the participant's 64th birthday) or at the time of their total disability or death regardless of the number of years of service.

NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

(h) Payment of Benefits

Upon termination of service, participants may elect to receive their accrued benefit distribution in one of the following ways:

(1) Lump Sum

A single sum payment from the participant account.

(2) Direct Transfer

A direct transfer to an individual retirement account as described in Section 408(a) of the Code or an individual retirement annuity as described in Section 408(b) of the Code, an annuity plan as described in Section 403(a) of the Code, or another "qualified" trust as described in Section 401(a) of the Code that accepts transfers.

(3) Partial Direct Transfer

A partial direct transfer, provided that the participant elects to directly transfer at least $500 of his or her vested accrued benefits.

(i) Plan Termination

Although the Company has not expressed any intent to discontinue the Plan or its contributions thereto, the Company has the right to do so at any time subject to the Plan provisions. In the event of termination, all participation will terminate on the Plan year end following such termination and the equity of all participants will be distributed as soon as possible thereafter.

(j) Forfeitures

Forfeitures are used to reduce future employer contributions. There were no forfeitures used to reduce employer contributions for the current Plan year.

(k) Participant Loans

Participants may borrow from their fund accounts up to $50,000 or 50% of their account balance, whichever is less. The loans are secured by the balance of that participant's account and bear interest ranging from 4.0% to 9.5% per annum, which is commensurate with local prevailing rates. Participants may have up to two loans outstanding at any time. Principal and interest are paid ratably through payroll deductions. On October 31, 2011 and 2010, the outstanding participant loans amounted to $1,382,199 and $1,353,688, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

(a) Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting in accordance with the accounting principles generally accepted in the United States of America.

(b) Administration Costs

The cost of legal, accounting and other services necessary to administer the Plan, as well as the internal cost to compile the participant data, are paid by the Company.

(c) Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion of fair value measurements.

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

Loans to participants are valued at the amount of unpaid principal, which approximates fair value.

(d) Notes Receivable from Participants

Notes receivable from participants are measured 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.

(e) Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for benefits and the changes therein. Actual results may differ from those estimates.

(f) Concentration of Credit Risk

The Plan has exposure to credit risk to the extent that its investment are subject to market fluctuations that may materially affect the value of the investment balances.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(g) Payment of Benefits

Benefits are recorded when paid.

(h) Non-discrimination Testing

The Plan failed the discrimination test for the year ended October 31, 2011 due to excess employee contributions of $41,961. The Plan will reimburse these excess contributions to its participants during the year ended October 31, 2012.

(i) Subsequent Events

In preparing these financial statements, the Company has evaluated events and transactions for potential recognition or disclosure through June 20, 2012, the date the financial statements were available to be issued.

(j) Reclassifications

Certain reclassifications have been made to the prior year financial statements in order for them to be in conformity with the current year presentation.

NOTE 3 - INVESTMENTS

(a) Information Prepared and Certified By Custodian

The Plan's assets are invested with Wells Fargo Bank (the custodian).

The following is a summary of the Plan's financial information that is included in the financial statements based on information certified by the custodian as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

The fair value of investments and the related investment gains for the year ended October 31, 2011 and 2010 as reported by the custodian are as follows:

	2011	2010
Investments	$ 29,484,531	$ 28,511,240
Net investment gains	$ 1,053,056	$ 2,613,650

NOTE 3 - INVESTMENTS (CONTINUED)

(b) The following presents investments that represent 5% or more of the Plan's net assets available for benefits:

	October 31, 2011	October 31, 2010
Wells Fargo Advantage Dow Jones Target 2010 - 131,012 and 66,080 shares, respectively	$ 1,722,806	$ 851,773
Wells Fargo Advantage Dow Jones Target 2020 - 153,036 and 144,094 shares, respectively	2,140,967	1,969,771
Wells Fargo Advantage Dow Jones Target 2030 - 153,500 and 141,460 shares, respectively	2,190,449	1,970,551
Wells Fargo Advantage Index Fund - 102,343 and 96,523 shares, respectively	4,560,415	4,225,794
Wells Fargo Collective Russell 2000 Index Fund - 169,615 and 154,555 shares, respectively	3,046,294	2,607,350
Wells Fargo Collective Stable Return Fund - 205,205 and 218,599 shares, respectively	10,015,235	10,402,925

During the current year ended October 31, 2011, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated by $719,151 as follows:

Mutual funds	$ 316,093
Common/collective trusts	384,532
Cash equivalents and certificates of deposit	(10,784)
Corporate bonds and convertible debentures	(41,481)
Common stock	100,234
Convertible preferred stock	(29,443)
	$ 719,151

NOTE 4 - FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

NOTE 4 - FAIR VALUE MEASUREMENTS (CONTINUED)

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

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end. The fair values of common stocks, corporate bonds, and U.S. Government securities are based on the closing price reported on the active market where the individual securities are traded.

Level 3 Fair Value Measurements

Loans to plan participants are valued at amortized cost which approximates fair value.

The following tables set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of October 31, 2011 and 2010:

		Fair Value Measurements at Reporting Date Using:	
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Unobservable Inputs (Level 3)
October 31, 2011			
Mutual funds:			
Index funds	$ 8,780,011	$ 8,780,011	$ -
Fixed income funds	11,738,041	11,738,041	-
Balanced funds	5,467,628	5,467,628	-

NOTE 4 - FAIR VALUE MEASUREMENTS (CONTINUED)

		Fair Value Measurements at Reporting Date Using:	
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Unobservable Inputs (Level 3)
Common stock:			
Consumer	89,365	89,365	-
Energy	284,698	284,698	-
Financial	232,273	232,273	-
Healthcare	8,924	8,924	-
Industrial	20,017	20,017	-
Materials	141,070	141,070	-
Technology	137,987	137,987	-
Utilities	112,107	112,107	-
Corporate bonds and convertible debentures	1,541,842	1,541,842	-
Convertible preferred stock	258,245	258,245	-
Cash equivalents and certificates of deposit	672,323	672,323	-
Notes receivable from participants	1,382,199	-	1,382,199
Total assets at fair value	$ 30,866,730	$ 29,484,531	$ 1,382,199

October 31, 2010

Mutual funds:			
Index funds	$ 8,121,544	$ 8,121,544	$ -
Fixed income funds	11,254,698	11,254,698	-
Balanced funds	5,287,688	5,287,688	-

NOTE 4 - FAIR VALUE MEASUREMENTS (CONTINUED)

		Fair Value Measurements at Reporting Date Using:	
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Unobservable Inputs (Level 3)
Common stock:			
Energy	226,352	226,352	-
Financial	230,694	230,694	-
Materials	146,503	146,503	-
Services	62,216	62,216	-
Technology	139,839	139,839	-
Utilities	107,614	107,614	-
Corporate bonds and convertible debentures	1,347,369	1,347,369	-
Convertible preferred stock	373,521	373,521	-
Cash equivalents and certificates of deposit	1,213,201	1,213,201	-
Notes receivable from participants	1,353,688	-	1,353,688
Total assets at fair value	$ 29,864,927	$ 28,511,239	$ 1,353,688

The following tables reconcile the beginning and ending balances of fair value measurements using significant unobservable inputs (Level 3) of the notes receivable from participants for the years ended October 31, 2011 and 2010:

October 31, 2011	
Beginning Balance	$ 1,353,688
Total gains or losses included in changes in net assets available for benefits	-
Purchases, issuances, sales, and settlements (net)	28,511
Ending balance	$ 1,382,199

NOTE 4 - FAIR VALUE MEASUREMENTS (CONTINUED)

October 31, 2010

Beginning Balance	$ 1,286,342
Total gains or losses included in changes in net assets available for benefits	-
Purchases, issuances, sales, and settlements (net)	67,346
Ending balance	$ 1,353,688

NOTE 5 - TAX STATUS

The Plan obtained its latest determination on April 19, 2010, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code ("IRC"). The plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently in compliance with the applicable requirements of the IRC.

NOTE 6 - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of pooled separate accounts and short term investment fund accounts managed by Wells Fargo Bank. Wells Fargo Bank is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

SUPPLEMENTAL SCHEDULE PROVIDED
PURSUANT TO THE DEPARTMENT OF LABOR RULES AND REGULATIONS

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
SCHEDULE 1 - ASSETS (HELD AT END OF YEAR)
OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
CASH EQUIVALENTS			
Wells Fargo Short Term Investment Fund			$ 24,542
CERTIFICATES OF DEPOSIT			
American Express Bank	$90,000, 3.3%, due 6/10/2013		94,463
American Express Centurion Bank	$85,000, 2.85%, due 6/11/2012		87,183
CIT Bank	$90,000, 3.5%, due 5/6/2014		96,439
Discover Bank	$90,000, 3.4%, due 11/13/2013		95,763
Midfirst Bank	$90,000, 3.05%, due 5/14/2012		92,525
NCB FSB Hillsboro (Ohio)	$85,000, 3.15%, due 6/12/2013		88,962
Sallie Mae Bank Murray (Utah)	$90,000, 3%, due 6/11/2012		92,446
TOTAL CERTIFICATES OF DEPOSIT			647,781
TOTAL CASH EQUIVALENTS AND CERTIFICATES OF DEPOSIT			672,323
CONVERTIBLE DEBENTURES			
Actuant Corporation	$17,000, 2%, due 11/15/2023		20,578
AGCO Corp.	$18,000, 1.25%, due 12/15/2036		22,720
Allegheny Technologies	$12,000, 4.25%, due 6/1/2014		16,503
Alliance Data SRA CUM	$12,000, 1.75%, due 8/1/2013		16,583
Anixter Intl Inc.	$14,000, 1%, due 2/15/2013		15,622
Annaly Capital Mgmt.	$24,000, 4%, due 2/15/2015		27,923
Arcelormittal	$10,000, 5%, due 5/15/2014		11,293
Avis Budget Group Inc.	$17,000, 3.5%, due 10/1/2014		19,562
Bank of America Corp.	$100,000, 5.25%, due 12/1/2015		100,887
Biomarin Pharmaceutical	$8,000, 1.875%, due 4/23/2017		14,083
Boston PPTYS Ltd.	$13,000, 3.75%, due 5/15/2036		15,061
Cadence Design Sys Inc.	$8,000, 2.625%, due 6/1/2015		12,758
Chart Industries Inc.	$14,000, 2%, due 8/1/2018		15,328
Chesapeake Energy Corp.	$28,000, 2.5%, due 5/15/2037		28,078
Continental Airlines, Inc.	$17,000, 4.5%, due 1/15/2015		21,263
Cubist Pharmaceuticals	$6,000, 2.25%, due 6/15/2013		7,911
Cubist Pharmaceuticals	$7,000, 2.5%, due 11/1/2017		10,168
Danaher Corp. Zero CPN	$9,000, due 1/22/2021		12,623
Dryships Inc.	$18,000, 5%, due 12/1/2014		13,785
DST Systems Inc.	$18,000, 4.125%, due 8/15/2023		21,982
EMC Corp.	$10,000, 1.75%, due 12/1/2011		15,285
EMC Corp.	$22,000, 1.75%, due 12/1/2013		35,168
Endo Pharmaceut Hldgs IN	$18,000, 1.75%, due 4/15/2015		22,379
Equinix Inc.	$19,000, 3%, due 10/15/2014		20,854

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
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OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
CONVERTIBLE DEBENTURES (CONTINUED)			
FEI Company	$7,000, 2.875%, due 6/1/2013		10,234
Ford Motor Company	$9,000, 4.25%, due 11/15/2016		13,564
General Cable Corp.	$8,000, due 11/15/2029		8,346
Gilead Sciences Inc.	$31,000, 0.625%, due 5/1/2013		36,716
Goldcorp Inc.	$11,000, 2%, due 8/1/2014		14,273
Goldman Sachs Group Inc.	$100,000, 3%, due 12/22/2017		98,272
Heartware International	$17,000, 3.5%, due 12/15/2017		17,459
Hologic Inc.	$14,000, 2%, due 12/15/2037		14,963
Hornbeck Offshore Services Inc. New	$16,000, due 11/15/2026		15,560
Human Genome Sciences	$4,000, 2.25%, due 8/15/2012		4,109
Intel Corp.	$18,000, 3.25%, due 8/1/2039		22,871
KKR Financial Holdings	$13,000, 7.5%, due 1/15/2017		17,301
Level 3 Communications	$5,000, 6.5%, due 10/1/2016		8,227
Liberty Media Corp.	$10,000, 3.125%, due 3/30/2023		11,177
Liberty Media Corp.	$18,000, 3.125%, due 3/8/2031		14,497
Linear Technology Corp.	$20,000, 3%, due 5/1/2027		21,225
Mastec Inc.	$9,000, 4.25%, due 12/15/2014		14,365
McMoran Exploration Co.	$9,000, 4%, due 12/29/2017		9,211
Medicis Pharmaceutical	$14,000, 2.5%, due 6/4/2032		19,025
MF Global Holdings Ltd.	$0, 3.375%, due 8/1/2018		5,075
MGM Resorts Intl.	$15,000, 4.25%, due 4/15/2015		15,028
Microchip Technology Inc.	$18,000, 2.125%, due 12/15/2037		24,040
Morgan Stanley	$100,000, 4.1%, due 1/26/2015		98,771
Navistar Intl Corp.	$17,000, 3%, due 10/15/2014		19,063
Netapp Inc.	$17,000, 1.75%, due 6/1/2013		23,456
Newmont Mining Corp.	$13,000, 3%, due 2/15/2012		19,030
Nuance Communications	$12,000, 2.75%, due 8/15/2027		18,040
Omnicom Group Inc. Zero Cpn	$14,000, due 7/1/2038		14,805
On Semiconductor Corp.	$18,000, 2.625%, due 12/15/2026		19,821
Onyx Pharmaceuticals Inc.	$6,000, 4%, due 8/15/2016		7,888
Peabody Energy Corp.	$24,000, 4.75%, due 12/15/2066		26,591
Pioneer Natural Resource	$7,000, 2.875%, due 1/15/2038		10,306
Rayonier Trs Holdings In	$12,000, 3.75%, due 10/15/2012		14,345
Rovi Corporation	$19,000, 2.625%, due 2/15/2040		24,062
RTI International Metals	$13,000, 3%, due 12/1/2015		13,878
SAKS Incorporated	$19,000, 2%, due 3/15/2024		19,381
SanDisk Corp.	$21,000, 1.5%, due 8/15/2017		25,135
SBA Communications Corp.	$16,000, 1.875%, due 5/1/2013		17,470
Sotheby's Holdings, Inc.	$7,000, 3.125%, due 6/15/2013		8,728
ST Mary Land & Exploration	$11,000, 3.5%, due 4/1/2027		17,233

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
SCHEDULE 1 - ASSETS (HELD AT END OF YEAR)
OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
CONVERTIBLE DEBENTURES (CONTINUED)			
Stanley Black & Decker I	$14,000, due 5/17/2012		15,497
Symantec Corp.	$19,000, 1%, due 6/15/2013		22,112
Tech Data Corp.	$14,000, 2.75%, due 12/15/2026		14,303
Terex Corp.	$13,000, 4%, due 6/1/2015		16,629
TTM Technologies	$10,000, 3.25%, due 5/15/2015		10,812
UBS AG Jersey Branch	$30,000, 4%, due 4/22/2020		30,141
Unisource Energy Corp.	$13,000, 4.5%, due 3/1/2035		14,398
United Auto Group Inc.	$12,000, 3.5%, due 4/1/2026		11,970
US Steel Corp.	$7,000, 4%, due 5/15/2014		7,777
Verisign Inc.	$13,000, 3.25%, due 8/15/2037		14,405
Viropharma Inc.	$20,000, 2%, due 3/15/2017		25,726
Vornado Realty L P	$10,000, 3.875%, due 4/15/2025		10,605
Xilinx, Inc.	$12,000, 2.625%, due 6/15/2017		15,534
TOTAL CONVERTIBLE DEBENTURES			1,541,842
COMMON STOCK			
Alcoa Inc.	7,256.088 shares		78,076
Archer Daniels Midland Co.	378 shares		10,939
BP PLC - ADR	1,258 shares		55,578
Chesapeake Energy Corp.	2,663 shares		74,884
Chevron Corporation	1,420 shares		149,171
Core Laboratories	46.788 shares		5,065
Energizer Holdings, Inc.	1,870 shares		137,987
Entergy Corp.	564 shares		39,012
Ford Motor Comoany	355 shares		4,146
Hecla Mng Co.	460 shares		2,884
Kansas City Southern	245 shares		15,477
McDonalds Corp.	800 shares		74,280
MetLife Inc.	415 shares		14,591
Mylan Labs	456 shares		8,924
Nextera Energy, Inc.	975 shares		54,990
Plum Creek Timber Company, Inc.	3,600 shares		135,576
PNM Res Inc.	1,000 shares		18,105
Prudential Financial, Inc.	1,029 shares		55,772
State Street Corp.	652 shares		26,334
Temple Inland, Inc.	1,339 shares		42,594
United Continental Holdings, Inc.	235 shares		4,540
Vale SA	726 shares		17,516
TOTAL COMMON STOCK			1,026,441

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
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OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
PREFERRED CONVERTIBLE SECURITIES			
AMG Capital Trust II	485 shares		19,339
Apache Corp.	305 shares		17,400
Bank of America Corp.	24 shares		20,544
Bunge Ltd.	165 shares		16,200
Citigroup Inc.	385 shares		36,590
East West Bancorp Inc.	5 shares		100
Energy XXI	48 shares		15,645
Fifth Third Bancorp	150 shares		21,579
General Motors Co.	1,045 shares		43,681
Goodyear Tire & Rubber	435 shares		8,155
Hartford Financial Services Group	345 shares		7,231
Interpublic Group of Co.'s	15 shares		13,275
MetLife Inc.	395 shares		26,710
RTI International ME	13,000 shares		(14,605)
Wells Fargo & Company	25 shares		26,400
TOTAL PREFERRED CONVERTIBLE SECURITIES			258,245
COMMON/COLLECTIVE TRUSTS			
Wells Fargo International Equity Index Fund G	94,241 shares		1,173,302
Wells Fargo Collective Russell 2000 Index Fund	169,615 shares		3,046,294
Wells Fargo Collective Stable Return Fund G	205,205 shares		10,015,235
TOTAL COMMON/COLLECTIVE TRUSTS			14,234,831
MUTUAL FUNDS			
Wells Fargo Advantage Dow Jones Target 2010	131,012 shares		1,722,806
Wells Fargo Advantage Dow Jones Target 2020	153,036 shares		2,140,967
Wells Fargo Advantage Dow Jones Target 2030	153,500 shares		2,190,449
Wells Fargo Advantage Dow Jones Target 2040	40,854 shares		633,649
Wells Fargo Advantage Dow Jones Target 2050	57,174 shares		502,563
Wells Fargo Advantage Index Fund - Admin #88	102,343 shares		4,560,415
TOTAL MUTUAL FUNDS			11,750,849
NOTES RECEIVABLE FROM PARTICIPANTS			
Various due dates, interest 4% to 9.5%			1,382,199
TOTAL ASSETS HELD FOR INVESTMENT			$ 30,866,730

The Accompanying Notes are an Integral Part of these Financial Statements

SUPPLEMENTAL SCHEDULE PROVIDED
PURSUANT TO THE DEPARTMENT OF LABOR RULES AND REGULATIONS

THE BOBRICK CORPORATION
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SCHEDULE 1 - ASSETS (HELD AT END OF YEAR)
OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
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CERTIFICATES OF DEPOSIT			
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TOTAL CASH EQUIVALENTS AND CERTIFICATES OF DEPOSIT			672,323
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Actuant Corporation	$17,000, 2%, due 11/15/2023		20,578
AGCO Corp.	$18,000, 1.25%, due 12/15/2036		22,720
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Arcelormittal	$10,000, 5%, due 5/15/2014		11,293
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Bank of America Corp.	$100,000, 5.25%, due 12/1/2015		100,887
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Boston PPTYS Ltd.	$13,000, 3.75%, due 5/15/2036		15,061
Cadence Design Sys Inc.	$8,000, 2.625%, due 6/1/2015		12,758
Chart Industries Inc.	$14,000, 2%, due 8/1/2018		15,328
Chesapeake Energy Corp.	$28,000, 2.5%, due 5/15/2037		28,078
Continental Airlines, Inc.	$17,000, 4.5%, due 1/15/2015		21,263
Cubist Pharmaceuticals	$6,000, 2.25%, due 6/15/2013		7,911
Cubist Pharmaceuticals	$7,000, 2.5%, due 11/1/2017		10,168
Danaher Corp. Zero CPN	$9,000, due 1/22/2021		12,623
Dryships Inc.	$18,000, 5%, due 12/1/2014		13,785
DST Systems Inc.	$18,000, 4.125%, due 8/15/2023		21,982
EMC Corp.	$10,000, 1.75%, due 12/1/2011		15,285
EMC Corp.	$22,000, 1.75%, due 12/1/2013		35,168
Endo Pharmaceut Hldgs IN	$18,000, 1.75%, due 4/15/2015		22,379
Equinix Inc.	$19,000, 3%, due 10/15/2014		20,854

THE BOBRICK CORPORATION
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OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
CONVERTIBLE DEBENTURES (CONTINUED)			
FEI Company	$7,000, 2.875%, due 6/1/2013		10,234
Ford Motor Company	$9,000, 4.25%, due 11/15/2016		13,564
General Cable Corp.	$8,000, due 11/15/2029		8,346
Gilead Sciences Inc.	$31,000, 0.625%, due 5/1/2013		36,716
Goldcorp Inc.	$11,000, 2%, due 8/1/2014		14,273
Goldman Sachs Group Inc.	$100,000, 3%, due 12/22/2017		98,272
Heartware International	$17,000, 3.5%, due 12/15/2017		17,459
Hologic Inc.	$14,000, 2%, due 12/15/2037		14,963
Hornbeck Offshore Services Inc. New	$16,000, due 11/15/2026		15,560
Human Genome Sciences	$4,000, 2.25%, due 8/15/2012		4,109
Intel Corp.	$18,000, 3.25%, due 8/1/2039		22,871
KKR Financial Holdings	$13,000, 7.5%, due 1/15/2017		17,301
Level 3 Communications	$5,000, 6.5%, due 10/1/2016		8,227
Liberty Media Corp.	$10,000, 3.125%, due 3/30/2023		11,177
Liberty Media Corp.	$18,000, 3.125%, due 3/8/2031		14,497
Linear Technology Corp.	$20,000, 3%, due 5/1/2027		21,225
Mastec Inc.	$9,000, 4.25%, due 12/15/2014		14,365
McMoran Exploration Co.	$9,000, 4%, due 12/29/2017		9,211
Medicis Pharmaceutical	$14,000, 2.5%, due 6/4/2032		19,025
MF Global Holdings Ltd.	$0, 3.375%, due 8/1/2018		5,075
MGM Resorts Intl.	$15,000, 4.25%, due 4/15/2015		15,028
Microchip Technology Inc.	$18,000, 2.125%, due 12/15/2037		24,040
Morgan Stanley	$100,000, 4.1%, due 1/26/2015		98,771
Navistar Intl Corp.	$17,000, 3%, due 10/15/2014		19,063
Netapp Inc.	$17,000, 1.75%, due 6/1/2013		23,456
Newmont Mining Corp.	$13,000, 3%, due 2/15/2012		19,030
Nuance Communications	$12,000, 2.75%, due 8/15/2027		18,040
Omnicom Group Inc. Zero Cpn	$14,000, due 7/1/2038		14,805
On Semiconductor Corp.	$18,000, 2.625%, due 12/15/2026		19,821
Onyx Pharmaceuticals Inc.	$6,000, 4%, due 8/15/2016		7,888
Peabody Energy Corp.	$24,000, 4.75%, due 12/15/2066		26,591
Pioneer Natural Resource	$7,000, 2.875%, due 1/15/2038		10,306
Rayonier Trs Holdings In	$12,000, 3.75%, due 10/15/2012		14,345
Rovi Corporation	$19,000, 2.625%, due 2/15/2040		24,062
RTI International Metals	$13,000, 3%, due 12/1/2015		13,878
SAKS Incorporated	$19,000, 2%, due 3/15/2024		19,381
SanDisk Corp.	$21,000, 1.5%, due 8/15/2017		25,135
SBA Communications Corp.	$16,000, 1.875%, due 5/1/2013		17,470
Sotheby's Holdings, Inc.	$7,000, 3.125%, due 6/15/2013		8,728
ST Mary Land & Exploration	$11,000, 3.5%, due 4/1/2027		17,233

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
SCHEDULE I - ASSETS (HELD AT END OF YEAR)
OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
CONVERTIBLE DEBENTURES (CONTINUED)			
Stanley Black & Decker I	$14,000, due 5/17/2012		15,497
Symantec Corp.	$19,000, 1%, due 6/15/2013		22,112
Tech Data Corp.	$14,000, 2.75%, due 12/15/2026		14,303
Terex Corp.	$13,000, 4%, due 6/1/2015		16,629
TTM Technologies	$10,000, 3.25%, due 5/15/2015		10,812
UBS AG Jersey Branch	$30,000, 4%, due 4/22/2020		30,141
Unisource Energy Corp.	$13,000, 4.5%, due 3/1/2035		14,398
United Auto Group Inc.	$12,000, 3.5%, due 4/1/2026		11,970
US Steel Corp.	$7,000, 4%, due 5/15/2014		7,777
Verisign Inc.	$13,000, 3.25%, due 8/15/2037		14,405
Viropharma Inc.	$20,000, 2%, due 3/15/2017		25,726
Vornado Realty L P	$10,000, 3.875%, due 4/15/2025		10,605
Xilinx, Inc.	$12,000, 2.625%, due 6/15/2017		15,534
TOTAL CONVERTIBLE DEBENTURES			1,541,842
COMMON STOCK			
Alcoa Inc.	7,256.088 shares		78,076
Archer Daniels Midland Co.	378 shares		10,939
BP PLC - ADR	1,258 shares		55,578
Chesapeake Energy Corp.	2,663 shares		74,884
Chevron Corporation	1,420 shares		149,171
Core Laboratories	46.788 shares		5,065
Energizer Holdings, Inc.	1,870 shares		137,987
Entergy Corp.	564 shares		39,012
Ford Motor Comoany	355 shares		4,146
Hecla Mng Co.	460 shares		2,884
Kansas City Southern	245 shares		15,477
McDonalds Corp.	800 shares		74,280
MetLife Inc.	415 shares		14,591
Mylan Labs	456 shares		8,924
Nextera Energy, Inc.	975 shares		54,990
Plum Creek Timber Company, Inc.	3,600 shares		135,576
PNM Res Inc.	1,000 shares		18,105
Prudential Financial, Inc.	1,029 shares		55,772
State Street Corp.	652 shares		26,334
Temple Inland, Inc.	1,339 shares		42,594
United Continental Holdings, Inc.	235 shares		4,540
Vale SA	726 shares		17,516
TOTAL COMMON STOCK			1,026,441

The Accompanying Notes are an Integral Part of these Financial Statements

THE BOBRICK CORPORATION
PROFIT SHARING RETIREMENT PLAN
SCHEDULE 1 - ASSETS (HELD AT END OF YEAR)
OCTOBER 31, 2011

Identity of issue, borrower, lessor, or similar party	Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
PREFERRED CONVERTIBLE SECURITIES			
AMG Capital Trust II	485 shares		19,339
Apache Corp.	305 shares		17,400
Bank of America Corp.	24 shares		20,544
Bunge Ltd.	165 shares		16,200
Citigroup Inc.	385 shares		36,590
East West Bancorp Inc.	5 shares		100
Energy XXI	48 shares		15,645
Fifth Third Bancorp	150 shares		21,579
General Motors Co.	1,045 shares		43,681
Goodyear Tire & Rubber	435 shares		8,155
Hartford Financial Services Group	345 shares		7,231
Interpublic Group of Co.'s	15 shares		13,275
MetLife Inc.	395 shares		26,710
RTI International ME	13,000 shares		(14,605)
Wells Fargo & Company	25 shares		26,400
TOTAL PREFERRED CONVERTIBLE SECURITIES			258,245
COMMON/COLLECTIVE TRUSTS			
Wells Fargo International Equity Index Fund G	94,241 shares		1,173,302
Wells Fargo Collective Russell 2000 Index Fund	169,615 shares		3,046,294
Wells Fargo Collective Stable Return Fund G	205,205 shares		10,015,235
TOTAL COMMON/COLLECTIVE TRUSTS			14,234,831
MUTUAL FUNDS			
Wells Fargo Advantage Dow Jones Target 2010	131,012 shares		1,722,806
Wells Fargo Advantage Dow Jones Target 2020	153,036 shares		2,140,967
Wells Fargo Advantage Dow Jones Target 2030	153,500 shares		2,190,449
Wells Fargo Advantage Dow Jones Target 2040	40,854 shares		633,649
Wells Fargo Advantage Dow Jones Target 2050	57,174 shares		502,563
Wells Fargo Advantage Index Fund - Admin #88	102,343 shares		4,560,415
TOTAL MUTUAL FUNDS			11,750,849
NOTES RECEIVABLE FROM PARTICIPANTS			
Various due dates, interest 4% to 9.5%			1,382,199
TOTAL ASSETS HELD FOR INVESTMENT			$ 30,866,730

The Accompanying Notes are an Integral Part of these Financial Statements