Form 5500

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Signature of DFE

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		tification Information				
For cale	ndar plan year 2011 or fiscal p	olan year beginning 01/01/2011		and ending 12/31/2	011	
A This	return/report is for:	a multiemployer plan;	a multiple	e-employer plan; or		
		a single-employer plan;	a DFE (s	pecify)		
B This	return/report is:	the first return/report;	the final	return/report;		
	•	an amended return/report;	a short p	lan year return/report (less that	an 12 months).	
C If the	plan is a collectively-bargaine	d plan, check here	_			
D Chec	k box if filing under:	X Form 5558;	automati	c extension;	the DFVC program;	
	· ·	special extension (enter des	scription)			
Part	II Basic Plan Inform	nation—enter all requested informa	ation			
1a Nam	ne of plan EEN-ELLINGSON, INC. 401(k		2001		1b Three-digit plan number (PN) ▶	002
		y. =			1c Effective date of pla 01/01/2004	an
	•	s, including room or suite number (En	mployer, if for single-	employer plan)	2b Employer Identification Number (EIN)	
BARGR	EEN-ELLINGSON, INC.				91-0715309	
					2c Sponsor's telephor number 253-475-9201	
	COMA MALL BLVD A, WA 98409		COMA MALL BLVD , WA 98409		2d Business code (see instructions) 423800	Э
Caution	: A penalty for the late or inc	complete filing of this return/repor	rt 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	Filed with authorized/valid ele	ctronic signature.	10/09/2012	JANET HANKS		
HERE						
	Signature of plan administ	rator	Date	Enter name of individual sign	gning as plan administrator	
SIGN HERE						
IILIKE	Signature of employer/pla	n sponsor	Date	Enter name of individual sign	gning as employer or plan sp	onsor
SIGN						
HERE						

Date

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

Form 5500 (2011) v.012611

Enter name of individual signing as DFE

Form 5500 (2011) Page **2**

	Plan administrator's name and address (if same as plan sponsor, enter "Sar RGREEN-ELLINGSON, INC.	me")			Iministrator's EIN -0715309
	6626 TACOMA MALL BLVD TACOMA, WA 98409				ministrator's telephone imber 253-475-9201
4	If the name and/or EIN of the plan sponsor has changed since the last return the plan number from the last return/report:	n/report filed for th	nis plan, enter the name, EIN	and	4b EIN
а	Sponsor's name				4c PN
5	Total number of participants at the beginning of the plan year			5	424
6	Number of participants as of the end of the plan year (welfare plans comple	te only lines 6a, 6	b, 6c, and 6d).		
а	Active participants			6a	397
b	Retired or separated participants receiving benefits			6b	3
С	Other retired or separated participants entitled to future benefits			6с	47
d	Subtotal. Add lines 6a , 6b , and 6c			6d	447
е	Deceased participants whose beneficiaries are receiving or are entitled to re	eceive benefits		6e	1
f	Total. Add lines 6d and 6e			6f	448
g	Number of participants with account balances as of the end of the plan year complete this item)	, ,	•	6g	300
h	Number of participants that terminated employment during the plan year wit less than 100% vested			6h	0
7	Enter the total number of employers obligated to contribute to the plan (only	y multiemployer p	lans complete this item)	7	
8a b	If the plan provides pension benefits, enter the applicable pension feature of 2E 2F 2G 2J 2K 2T 3D 3H If the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable pension feature of the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits, enter the applicable welfare feature contains the plan provides welfare benefits and the plan provides welfare benefit				
9a	Plan funding arrangement (check all that apply)	9b Plan bene	fit arrangement (check all tha	t apply)	
	(1) Insurance	(1)	Insurance		
	Code section 412(e)(3) insurance contracts	(2)	Code section 412(e)(3) i	nsurano	ce contracts
	(3) X Trust (4) General assets of the sponsor	(3) (4)	X Trust General assets of the sp	onsor	
10	Check all applicable boxes in 10a and 10b to indicate which schedules are a		_		ched. (See instructions)
а	Pension Schedules	b General S	Schedules		
	(1) R (Retirement Plan Information)	(1)	X H (Financial Inform	nation)	
	(2) MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) (3) (4)	I (Financial Inform A (Insurance Inform C (Service Provide	mation)	,
	(3) SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5) (6)	D (DFE/Participating) G (Financial Trans)	_	

SCHEDULE C (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Service Provider Information

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

▶ File as an attachment to Form 5500.

OMB No. 1210-0110

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	B Three-digit	000
BARGREEN-ELLINGSON, INC. 401(K) PLAN	plan number (PN)	002
	promise (Co.)	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Nu	ımber (EIN)
BARGREEN-ELLINGSON, INC.	91-0715309	
Part I Service Provider Information (see instructions)		
You must complete this Part, in accordance with the instructions, to report the information or more in total compensation (i.e., money or anything else of monetary value) in conner plan during the plan year. If a person received only eligible indirect compensation for wanswer line 1 but are not required to include that person when completing the remainded	ction with services rendered to the pothich the plan received the required of	lan or the person's position with the
1 Information on Persons Receiving Only Eligible Indirect Compen	sation	
a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder		nly eligible
indirect compensation for which the plan received the required disclosures (see instructi	•	, ,
b If you answered line 1a "Yes," enter the name and EIN or address of each person proverceived only eligible indirect compensation. Complete as many entries as needed (see		e service providers who
(b) Enter name and EIN or address of person who provided yo	u disclosures on eligible indirect com	npensation
FID.INV.INST.OPS.CO.		·
04-2647786		
04 2047 700		
(b) Established FIN and description of the large interest in the second		
(b) Enter name and EIN or address of person who provided yo	u disclosure on eligible indirect comp	pensation
(b) Enter name and EIN or address of person who provided yo	u disclosures on eligible indirect com	pensation
(b) Enter name and EIN or address of person who provided yo	u disclosures on eligible indirect com	pensation

answered	"Yes" to line 1a above	e, complete as many	entries as needed to list ea	r Indirect Compensation in the person receiving, directly or the plan or their position with the	indirectly, \$5,000 or more in t	otal compensation
			2) Enter name and EIN or	addraga (aga inatrustiana)		
KMC EINM	NCIAL SERVICES INC		a) Enter name and EIN or	address (see instructions)		
KIVIS FINAI	NCIAL SERVICES INC	,				
91-0850651	1					
(b) Service Code(s)	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?	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 61	ADVISOR	66857	Yes X No	Yes No 🗵	0	Yes X No
			a) Enter name and EIN or	address (see instructions)		
	NVESTMENTS INSTI	•	a) Enter hame and Env or	dadress (see matrastions)		
04-2647786 (b)	(c)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee	Enter direct	Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	Did the service provider give you a formula instead of an amount or
64 65 37 60	RECORDKEEPER	2650	Yes X No	Yes 🛛 No 🗌	0	Yes X No
		(a) Enter name and EIN or	address (see instructions)		
(b) Service Code(s)	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?	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

Page :	3 -	2
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answered	d "Yes" to line 1a above	e, complete as many	entries as needed to list ea	or Indirect Compensation ach person receiving, directly or the plan or their position with the	indirectly, \$5,000 or more in t	total compensation
		((a) Enter name and EIN or	address (see instructions)		
(b) Service Code(s)	Relationship to employer, employer 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?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	
			Yes No	Yes No		Yes No
		((a) Enter name and EIN or	· address (see instructions)		
(b) Service Code(s)	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?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	
			Yes No	Yes No		Yes No
		((a) Enter name and EIN or	address (see instructions)		
(b) Service Code(s)	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 service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
KMS FINANCIAL SERVICES INC	61	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
OPPHMR INTL GRTH Y - OPPENHEIMERFUN	\$5M+=0.25%	
13-2953455		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibili for or the amount of the indirect compensation.	
ABF LARGE CAP VAL Y - STATE STREET	0.10%	
04-1867445		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
ABF LG CAP VAL INV - STATE STREET B	0.35%	
04-1867445		
	•	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
ALL/BERN INTL GR ADV - ALLIANCEBERN	0.25%	
13-3211780		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		compensation, including any e the service provider's eligibility
	for or the amount of	the indirect compensation.
BLKRK INTL OPP INST - BNY MELLON IN P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes	(c) Enter amount of indirect
FIDELITY INVESTMENTS INSTITUTIONAL	(see instructions) 60	compensation 0
(d) Enter name and EIN (address) of source of indirect compensation		compensation, including any
	formula used to determine for or the amount of	e the service provider's eligibility the indirect compensation.
DREY BASIC S&P 500 - DREYFUS TRANSF	0.15%	
13-5673135		
	·	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
JPM EMRG MKTS EQ IS - BOSTON FINANC	0.10%	
04-2526037		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibili for or the amount of the indirect compensation.	
JPM EMRG MKTS EQ SEL - BOSTON FINAN	0.25%	
04-2526037		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.
MAINSTY ICAP SELEQ I - BOSTON FINAN	0.25%	
04-2526037		

· · · · · · · · · · · · · · · · · · ·		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
NUVEEN MDCP INDEX I - US BANCORP FU	0.15%	
39-0281260 		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
NUVEEN REAL ESTATE I - US BANCORP F	0.35%	
39-0281260		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
OPPHMR INTL GRTH Y - OPPENHEIMERFUN P.O. BOX 5270 COLORADO, CO 80217	0.25%	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.	
PRU GLOBAL RE Z - PRUDENTIAL MUTUAL	0.25%		
22-3703799			
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibilit for or the amount of the indirect compensation.		
THORNBURG VALUE R5 - BOSTON FINANCI	0.25%		
04-2526037			
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation	
FIDELITY INVESTMENTS INSTITUTIONAL	60	0	
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determin	compensation, including any e the service provider's eligibility the indirect compensation.	
WFA TOT RTN BD ADM - BOSTON FINANCI	0.25%		
04-2526037			
		·	

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.
WFA TOTAL RTN BD I - BOSTON FINANCI	0.05%	
04-2526037		
(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	formula used to determine	compensation, including any e the service provider's eligibility 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	formula used to determine	compensation, including any e the service provider's eligibility the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information						
4 Provide, to the extent possible, the following information for ear 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				

Page	6-
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Pa	rt III	Termination Information on Accountants and Enrolled Actuaries (see insection) (complete as many entries as needed)	structions)
а	Name		b ein:
С	Positio	n:	
d	Addres	es:	e Telephone:
Ex	olanatio	1:	
а	Name:		b EIN:
C	Positio		<u> </u>
d	Addres		e Telephone:
Exp	olanatio	n:	
а	Name:		b EIN:
С	Positio		
d	Addres		e Telephone:
Ex	olanatio	n:	
а	Name:		b EIN:
C	Positio		
d	Addres		e Telephone:
Ex	olanatio	n:	
а	Name:		b EIN:
C	Positio	n:	
d	Addres		e Telephone:
Ex	planatio	1:	

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 p	olan year beginning	01/01/2011 and	l ending 12/31/2011
A Name of plan BARGREEN-ELLINGSON, INC. 401(K) PLAN		B Three-digit plan number (PN)
C Plan or DFE sponsor's name as she BARGREEN-ELLINGSON, INC.	own on line 2a of Form	5500	D Employer Identification Number (EIN) 91-0715309
	•	Ts, PSAs, and 103-12 IEs (to be co to report all interests in DFEs)	mpleted by plans and DFEs)
a Name of MTIA, CCT, PSA, or 103-		,	
b Name of sponsor of entity listed in	(a): FIDELITY MAI	NAGEMENT TRUST COMPANY	
C EIN-PN 04-3022712-026	d Entity C	e Dollar value of interest in MTIA, CCT, P 12 IE at end of year (see instructions)	SA, or 103 943508
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, P 12 IE at end of year (see instructions)	SA, or 103
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, P 12 IE at end of year (see instructions)	SA, or 103-
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, P 12 IE at end of year (see instructions)	SA, or 103-
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, P 12 IE at end of year (see instructions)	SA, or 103-
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	Dollar value of interest in MTIA, CCT, P 12 IE at end of year (see instructions)	SA, or 103-
a Name of MTIA, CCT, PSA, or 103-	12 IE:		
b Name of sponsor of entity listed in	(a):		
C EIN-PN	d Entity	e Dollar value of interest in MTIA, CCT, P	SA, or 103-

12 IE at end of year (see instructions)

e Dollar value of interest in MTIA, CCT, PSA, or 103-

e Dollar value of interest in MTIA, CCT, PSA, or 103-

12 IE at end of year (see instructions)

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):

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

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

C EIN-PN

C EIN-PN

d Entity

d Entity

code

code

F	art II	Information on Participating Plans (to be completed by DFEs)	
_	Plan na	(Complete as many entries as needed to report all participating plans)	
			e FIN DN
	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na		
b	Name o		C EIN-PN
а	Plan na		
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN
а	Plan na	me	
b	Name o		C EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

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

Pension Benefit Guaranty Corporation	Jillient to Form 5	300.		1	Inspection	on
For calendar plan year 2011 or fiscal plan year beginning 01/01/2011		and e	nding 12/3	1/2011		
A Name of plan			B Three-d	igit		
BARGREEN-ELLINGSON, INC. 401(K) PLAN			plan nur	mber (PN))	002
C Plan sponsor's name as shown on line 2a of Form 5500			D Employe	r Identificati	on Number (EIN)
BARGREEN-ELLINGSON, INC.					(,
			91-07153	109		
Part I Asset and Liability Statement						
1 Current value of plan assets and liabilities at the beginning and end of the p						
the value of the plan's interest in a commingled fund containing the assets lines 1c(9) through 1c(14). Do not enter the value of that portion of an insur						
benefit at a future date. Round off amounts to the nearest dollar. MTIAs						
and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e.	See instructions.			-		
Assets		(a) Be	ginning of Yea	ar	(b) End	l of Year
a Total noninterest-bearing cash	. 1a					
b Receivables (less allowance for doubtful accounts):						
(1) Employer contributions	. 1b(1)					
(2) Participant contributions	1b(2)					
(3) Other	1b(3)					
C General investments:						
(1) Interest-bearing cash (include money market accounts & certificates	1c(1)			298692		289939
of deposit)	4 - (0)			200002		20000
(3) Corporate debt instruments (other than employer securities):						
(A) Preferred	1c(3)(A)					
. ,	4-(2)(D)					
(B) All other	. 10(0)(2)					
(4) Corporate stocks (other than employer securities):	1c(4)(A)					
(A) Preferred						
(B) Common	4 - (5)			373039		350457
(5) Partnership/joint venture interests	4 - (0)			37 0000		330437
(6) Real estate (other than employer real property)						
(7) Loans (other than to participants)	4 (0)			181866		200676
(8) Participant loans	. (0)			048754		208676 943508
(9) Value of interest in common/collective trusts	4-(40)		- 10	J-101 U-		943306
(10) Value of interest in pooled separate accounts	4-(44)					
(11) Value of interest in master trust investment accounts	4-(40)					
(12) Value of interest in 103-12 investment entities						
funda)	1c(13)		21	195037		20/182500

1c(14)

1c(15)

(14) Value of funds held in insurance company general account (unallocated

contracts).....

1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	23097388	22275089
	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			
I	Net assets (subtract line 1k from line 1f)	11	23097388	22275089

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
а	Contributions:			
	(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	486979	
	(B) Participants	2a(1)(B)	1067842	
	(C) Others (including rollovers)	2a(1)(C)	43366	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)		1598187
b	Earnings on investments:			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	90312	
	(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)	9832	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		100144
	(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)	669867	
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		669867
	(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)		

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		(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)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		23805
(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)		-1482725
C Other income	. 2c		
d Total income. Add all income amounts in column (b) and enter total	. 2d		909278
Expenses	•		
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	. 2e(1)	1657387	
(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)	- 40		1657387
f Corrective distributions (see instructions)			
g Certain deemed distributions of participant loans (see instructions)			
h Interest expense	01:		
i Administrative expenses: (1) Professional fees	0:(4)		
(2) Contract administrator fees	0:(0)		
(3) Investment advisory and management fees	2:(2)		
(4) Other		74190	
(5) Total administrative expenses. Add lines 2i(1) through (4)	0:(5)		74190
j Total expenses. Add all expense amounts in column (b) and enter total	"		1731577
Net Income and Reconciliation	, _		
k Net income (loss). Subtract line 2j from line 2d	2k		-822299
Transfers of assets:			
	21(1)		
(1) To this plan	2l(2)		
(2) From this plan	(-/		
Part III Accountant's Opinion			
3 Complete lines 3a through 3c if the opinion of an independent qualified public attached.	accountant is at	tached to this Form 5500. Com	plete line 3d if an opinion is not
a The attached opinion of an independent qualified public accountant for this pla	an is (see instruc	ctions):	
(1) Unqualified (2) Qualified (3) Disclaimer (4)	Adverse		
b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103	3-8 and/or 103-	12(d)?	X Yes No
C Enter the name and EIN of the accountant (or accounting firm) below:			
(1) Name: DOTY, BEARDSLEY, ROSENGREN & CO.,		(2) EIN: 20-5018267	
d The opinion of an independent qualified public accountant is not attached bed			
(1) This form is filed for a CCT, PSA, or MTIA. (2) It will be attact	ched to the next	Form 5500 pursuant to 29 CFF	R 2520.104-50.

Pai	t IV	Compliance Questions					
4	CCTs 103-12	and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 2 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.	4f, 4g,	4h, 4k, 4	m, 4n, or 5	5.	
	During	the plan year:		Yes	No	Amo	unt
а	period	nere a failure to transmit to the plan any participant contributions within the time described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures illy corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X		
b	close o	any loans by the plan or fixed income obligations due the plan in default as of the of the plan year or classified during the year as uncollectible? Disregard participant loans and by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is ed.)	4b		X		
С	Were	any leases to which the plan was a party in default or classified during the year as ectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X		
d	reporte	there any nonexempt transactions with any party-in-interest? (Do not include transactions ed on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is ed.)	4d		X		
		'		X			1000000
e		nis plan covered by a fidelity bond?	4e				1000000
f	by frau	e plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused ud or dishonesty?	4f		X		
g		e plan hold any assets whose current value was neither readily determinable on an ished market nor set by an independent third party appraiser?	4g		X		
h		e plan receive any noncash contributions whose value was neither readily ninable on an established market nor set by an independent third party appraiser?	4h		X		
i		e plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, ee instructions for format requirements.)	4i	X			
j	value	any plan transactions or series of transactions in excess of 5% of the current of plan assets? (Attach schedule of transactions if "Yes" is checked, and structions for format requirements.)	4j		X		
k		all the plan assets either distributed to participants or beneficiaries, transferred to another or brought under the control of the PBGC?	4k		X		
ı	Has th	e plan failed to provide any benefit when due under the plan?	41		X		
m	If this i	is an individual account plan, was there a blackout period? (See instructions and 29 CFR 101-3.)	4m		X		
n		was answered "Yes," check the "Yes" box if you either provided the required notice or one exceptions to providing the notice applied under 29 CFR 2520.101-3	4n		X		
5a		esolution to terminate the plan been adopted during the plan year or any prior plan year? "enter the amount of any plan assets that reverted to the employer this year	Yes	No X	Amou	nt:	
5b	transfe	ng this plan year, any assets or liabilities were transferred from this plan to another plan(s) erred. (See instructions.)	, identi	fy the pla	ın(s) to wh	ich assets or liabi	lities were
	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

sion Renefit 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.

	rension benefit dualanty corporation					
For	calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and e	nding	12/31/2	011		
A N BAR	Name of plan GREEN-ELLINGSON, INC. 401(K) PLAN	pla	ree-digit an numbe PN)	er •	002	
	Plan sponsor's name as shown on line 2a of Form 5500 GREEN-ELLINGSON, INC.		ployer Ide		ion Number (El	N)
Pa	art I Distributions	1				
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 dur payors who paid the greatest dollar amounts of benefits):	ng the ye	ar (if more	e than t	wo, enter EINs	of the two
	EIN(s): 04-6568107 91-6307995					
	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 year.	•	. 3			
Pa	Funding Information (If the plan is not subject to the minimum funding requirements of ERISA section 302, skip this Part)	of section	of 412 of	the Inte	rnal Revenue (Code or
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 6	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: Mon If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the real Enter the minimum required contribution for this plan year (include any prior year accumulated fundeficiency not waived)	nainder d ding	of this sc	y hedule.		
	Enter the amount contributed by the employer to the plan for this plan year 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)					
	If you completed line 6c, skip lines 8 and 9.		1			
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 cauthority providing automatic approval for the change or a class ruling letter, does the plan sponsor or administrator agree with the change?	plan		Yes	☐ No	□ N/A
Pa	art 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.	ase	Decre	ase	Both	☐ No
Pa	rt IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(skip this Part.	e)(7) of th	ne Internal	Reven	ue Code,	
10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repa	y any exe	empt 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 " (See instructions for definition of "back-to-back" loan.)				Yes	No No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?				Yes	. □ No

Pa	art V Additional Information for Multiemployer Defined Benefit Pension Plans							
13		ter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in blars). See instructions. Complete as many entries as needed to report all applicable employers.						
	а	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						
	е	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):						
	а	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						
	е	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):						
	а	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						
	е	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):						
	а	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						
	е	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):						
	а	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						
	е	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):						
	а	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						
	е	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):						

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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 ma employer contribution during the current plan year to:	ke an				
	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	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.					
Р	art VI Additional Information for Single-Employer and Multiemployer Defined Benef	t Pens	ion Plans			
18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see in information to be included as an attachment	struction	ns regarding supplemental			
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					
	C What duration measure was used to calculate item 19(b)? ☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):					

Audited Financial Statements and Supplemental Financial Information

December 31, 2011

Audited Financial Statements and Supplemental Financial Information

December 31, 2011

INDEPENDENT AUDITOR'S REPORT 1-2
AUDITED FINANCIAL STATEMENTS
Statements of Net Assets Available for Benefits
Statement of Changes in Net Assets Available for Benefits
Notes to Financial Statements
SUPPLEMENTAL FINANCIAL INFORMATION
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)



Doty, Beardsley, Rosengren & Co., P.S.

Certified Public Accountants

Independent Auditor's Report

To the Administrative Committee of Bargreen-Ellingson, Inc. 401(k) Plan Fife, Washington

We have audited the accompanying statements of net assets available for benefits of Bargreen-Ellingson, Inc. 401(k) Plan (the Plan) as of December 31, 2011 and 2010, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Bargreen-Ellingson, Inc. 401(k) Plan as of December 31, 2011 and 2010, and the changes in its net assets available for benefits for the year ended December 31, 2011, in conformity with accounting principles generally accepted in the United States of America.

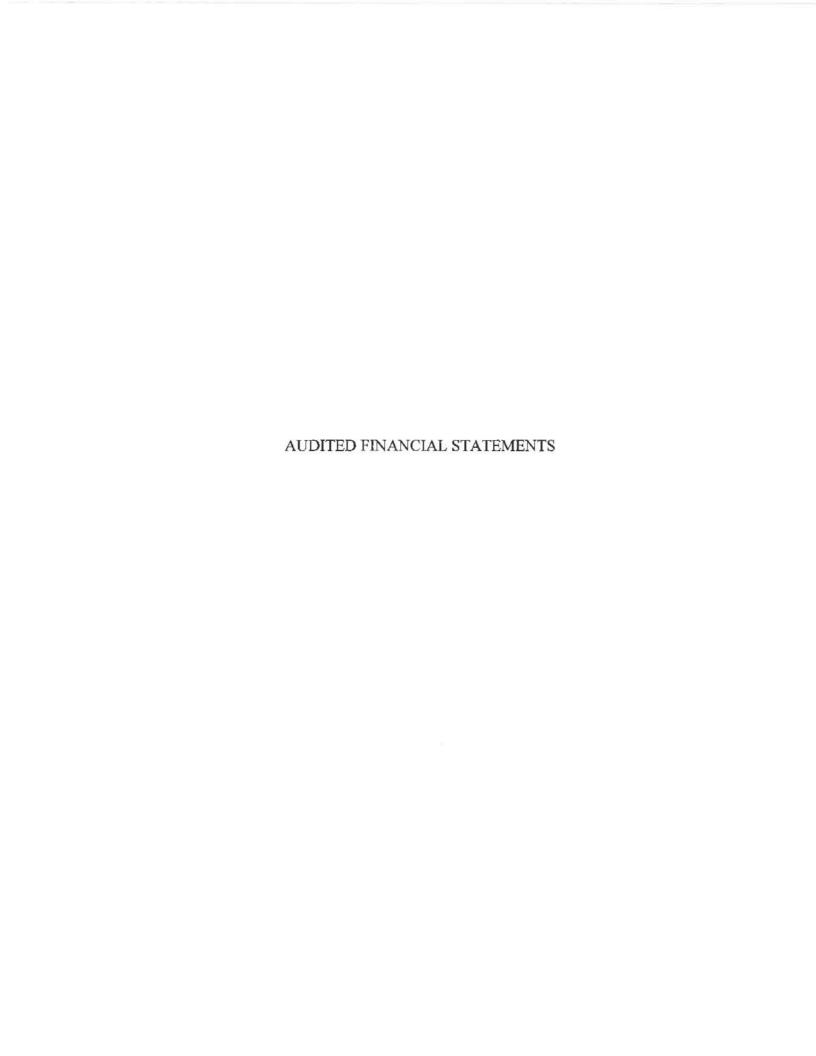
Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedule of Assets Held for Investment at End of Year, referred to as "supplemental information", is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements, and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In our opinion, the information is fairly stated in all material respects in relation to the financial statements taken as a whole.

Doty, Beardsley, Rosengren & Co., P.S.

Doty, Beardsley, Rosengren & Co., P.S.

September 21, 2012



STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2011 and 2010

	2011	2010
ASSETS		
Investments, at fair value: Cash Mutual funds Common or collective trust Money market fund Limited partnership	\$ 47,485 20,482,509 943,508 242,454 350,457	\$ 16,703 21,195,037 1,048,754 281,989 373,039
Total Investments	22,066,413	22,915,522
Notes receivable from participants	208,676	181,866
Net Assets Available for Benefits, at Fair Value	22,275,089	23,097,388
Adjustment from fair value to contract value for fully benefit-responsive investment contract	(30,121)	(19,613)
Net Assets Available for Benefits	\$ 22,244,968	\$ <u>23,077,775</u>

The accompanying notes are an integral part of these financial statements.

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31, 2011

ADDITIONS TO NET ASSETS ATTRIBUTED TO: Investment income: Net appreciation in contract value of common or collective trust Interest, dividends, and capital gain distributions	\$ 13,297 770,011
Total Investment Income	783,308
Contributions: Participant Employer Rollovers from qualified plans	1,067,842 486,979 43,366
Total Contributions	1,598,187
Total Additions	2,381,495
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO: Net depreciation in fair value of mutual funds Benefits paid to participants Administrative expenses	1,482,725 1,657,387 74,190
Total Deductions	3,214,302
Net Decrease	(832,807)
NET ASSETS AVAILABLE FOR BENEFITS AT BEGINNING OF YEAR	23,077,775
Net Assets Available for Benefits at End of Year	\$ <u>22,244,968</u>

The accompanying notes are an integral part of these financial statements.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Bargreen-Ellingson, Inc. 401(K) 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 employees of Bargreen-Ellingson, Inc. who have attained the age of 21, completed three months of service by the end of a twelve month period, and are not covered under a collective bargaining agreement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participants may contribute up to 100% of their eligible compensation through salary reductions. Participants direct their contributions to any or all of the investment choices available to them. The Company makes pretax safe harbor matching contributions to the Plan equal to 100% of the employee's salary deferral that do not exceed 3% of their compensation, plus 50% of the employee's salary deferral between 3% and 5% of their compensation. Participants must be 21 years of age and complete 1 year of service by the end of a twelve month period to be eligible for the match. Participants are 100% vested in the safe harbor match. The Plan may also elect to make an annual discretionary employer contribution to participants that have completed 1,000 hours of service and be employed on the last day of the year (unless the participant dies, becomes disabled, or retires during the year).

Participant Accounts

Each participant's account is credited with the participant's contribution, allocation of the Company's contribution and Plan earnings and losses. Allocations are based on participant compensation or account balances, as defined in the Plan agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their 401(k) salary reduction contribution and the employer safe harbor matching contribution. Participants become vested in any employer discretionary matching contributions, nonelective contributions, and any earnings thereon based on their years of service, as follows:

Years of Service	Vesting Percentage
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Normal Retirement

Normal retirement age is 60.

Payment of Benefits

On termination of service, a participant (or beneficiary) may elect to receive the value of his or her account either as a lump-sum cash distribution, a direct rollover distribution or a combination of the two. Distribution of account balances in excess of \$1,000 may be deferred, but not later than the date under law that minimum required distributions must commence.

Death or Disability

In the event of death of a participant before his or her retirement benefit commences, the participant becomes vested in any unvested balances, and 100% of the participant's account balance will be paid to the named beneficiary. If a participant becomes permanently disabled while a company employee, 100% of his or her account will become vested and be distributed in the same manner as if the participant had retired.

Hardship Withdrawals

While still employed by the Company, participants are permitted to withdraw a single lumpsum up to their total vested account balance, under certain conditions. These conditions include unreimbursed medical expenses, the purchase of a participant's principal residence, the payment of post-secondary education tuition, funeral or burial expenses, or to prevent eviction or foreclosure from the participant's principal residence. A participant's right to make pretax deferrals to the Plan will be suspended for six months after the receipt of a hardship withdrawal.

Rollovers from Other Qualified Plans

Participants who have an interest in any other qualified employee benefit plan (as described in Section 401(a) of the Internal Revenue Code) may transfer the lump-sum values of their accrued benefits directly into the Plan if such transfer meets the requirements of the Internal Revenue Code.

Notes Receivable from Participants

Participants may borrow from their fund accounts the lesser of 50% of the Plan participant's vested balance as of the most recent valuation date or \$50,000. The minimum principal amount is \$1,000. Note repayment terms, including interest rate, and the length of the notes are determined at the time the note is made. The notes are secured by the balance in the participant's account and bear interest ranging from 5.25% to 6% at December 31, 2011. Principal and interest are paid ratably through payroll deductions.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Forfeitures

Forfeitures of matching contributions by nonvested terminated participants are retained by the Plan and are first used to reduce administrative expenses and then used to reduce future employer contributions.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Income Tax

The Plan is exempt from income taxes under Internal Revenue Code Section 401(k).

Expenses

Administrative expenses not paid by the Plan are paid by the Company. Administrative expenses recorded in the Plan represent trustee fees and other recordkeeping fees paid directly from the Plan to the Plan's trustee.

Use of Estimates

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

Valuation of Assets

Investments are carried at fair market value as determined by fair value measurement (see Note 3). The limited partnership investment consists of an investment in the Bank of New York Partners Fund II, LLC (the Fund). Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Gains and losses (realized and unrealized) are reported in the net appreciation (depreciation) for common or collective trusts and mutual funds.

Fully Benefit-Responsive Investment

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 Statements 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.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (Continued)

Evaluation of Subsequent Events

Subsequent events were evaluated through September 21, 2012, the date that the financial statements were available to be issued, which is the date of the audit report. There were no material subsequent events that required recognition or additional disclosure in these financial statements.

NOTE 3 - FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The Fair Value Measurements topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) established a fair value hierarchy for reporting that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable units other than quoted prices for identical assets; and Level 3 inputs have the lowest priority.

Level 1 Fair Value Measurements

The fair values of the mutual funds and money market funds are based on quoted net asset values of the shares held by the Plan at year-end. These funds are classified as Level 1 of the valuation hierarchy.

Level 2 Fair Value Measurements

The investment in common or collective trust consists of a single fund, the Fidelity Advisor Stable Value Fund. The fund is accounted for in accordance with the FASB ASC subtopic on Fully Benefit-Responsive Investment Contracts.

Level 3 Fair Value Measurements

The fair value of the limited partnership is determined annually by an audit of the Fund. The fair value of the investments was determined using unobservable inputs that cannot be corroborated by current market data, based on the audit for the Fund's year-end.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011 and 2010:

	Assets at	at Fair Value at December 31, 2011			
	Level 1	Level 2	Level 3	2011 Total	
Mutual funds:					
Multisector bond	\$ 3,113,951			\$ 3,113,951	
Large blend	2,399,780			2,399,780	
Intermediate term bond	2,255,880			2,255,880	
Small blend	2,170,352			2,170,352	
Balanced	2,001,152			2,001,152	
Large growth	1,911,538			1,911,538	
Foreign large growth	1,418,703			1,418,703	
Foreign large blend	1,116,524			1,116,524	
Mid-cap blend	852,059			852,059	
Mid-cap growth	804,302			804,302	
Mid-cap value	676,289			676,289	
Large value	539,332			539,332	
Diversified emerging markets	443,078			443,078	
Real estate	349,978			349,978	
Money market	242,454			242,454	
Retirement income	199,638			199,638	
Other	190,447			190,447	
Cash	47,485			47,485	
Small growth	39,506			39,506	
Common or collective trust		\$ 943,508		943,508	
Limited partnership			\$ 350,457	350,457	
Total Assets at Fair Value	\$ 20,772,448	\$ <u>943,508</u>	\$ <u>350,457</u>	\$ 22,066,413	

	Assets at Fair Value at December 31, 2010			
	Level 1	Level 2	Level 3	2010 Total
Mutual funds:				
Small blend	\$ 2,645,331			\$ 2,645,331
Multisector bond	2,507,249			2,507,249
Large blend	2,419,296			2,419,296
Intermediate term bond	2,267,656			2,267,656
Large growth	2,026,283			2,026,283
Foreign large growth	1,814,998			1,814,998
Balanced	1,676,759			1,676,759
Foreign large blend	1,184,608			1,184,608
Mid-cap growth	941,577			941,577
Mid-cap value	918,155			918,155

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

	Assets at Fair Value at December 31, 2010					
		Level 1	Level 2	Level 3	_20	10 Total
Mutual Funds (Continued):						
Mid-cap blend	\$	750,516			\$	750,516
Large value		692,792				692,792
Diversified emerging markets		577,688				577,688
Money market		281,989				281,989
Retirement income		240,683				240,683
Real estate		206,315				206,315
Other		325,131				325,131
Cash		16,703				16,703
Common or collective trust			\$ 1,048,754			1,048,754
Limited partnership	=			\$ 373,039	-	373,039
Total Assets at Fair Value	\$ 2	1,493,729	\$ <u>1,048,754</u>	\$ <u>373,039</u>	\$ <u>2</u>	<u>2,915,522</u>

NOTE 4 - INVESTMENTS

The following investments represent 5% or more of the Plan's net assets at December 31:

	2011	2010
FA Strat Income I	\$ 3,034,012	\$ 2,402,595
WFA Tot Rtn Bd Adm	*	\$ 2,230,338
ALL/Bern Intl Gr Adv	*	\$ 1,784,917
FA New Insights I	\$ 1,514,844	\$ 1,574,381
IVK Small Cap Value Y	\$ 1,204,662	\$ 1,536,988
Opphmr Intl Grth Y	\$ 1,394,635	*
WFA Total Rtn Bd I	\$ 2,200,448	*

^{*} Less than 5% of net assets

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 5 - NONPARTICIPANT DIRECTED INVESTMENTS

The investments that were merged into the Plan as of January 1, 2010 (see Note 11) include certain nonparticipant directed investments. Information about the net assets and the significant components of the change in net assets related to the nonparticipant directed investments is as follows:

	2011	2010
Beginning of year Transfer of Plan assets due to merger (see Note 11) Interest and dividend income Net appreciation (depreciation) Benefits paid Administrative expenses	\$ 927,342 90,286 (33,472) (45,937) (4,640)	\$ 0 870,958 16,420 78,779 (33,465) _(5,350)
Total Nonparticipant Directed Investments	\$ <u>933,579</u>	\$ <u>927,342</u>
These investments are comprised of the following:	2011	2010
Cash Mutual funds Limited Partnership	\$ 47,485 535,637 350,457	16,703 537,600 <u>373,039</u>
Total Nonparticipant Directed Investments	\$ 933,579	\$ <u>927,342</u>

NOTE 6 - INCOME TAX STATUS

The Company adopted a Fidelity Prototype 401(k) Plan document in September 2003. The Plan obtained its latest determination letter in October 2003, in which the Internal Revenue Service stated that the plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax counsel believe that the plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income tax has been included in the Plan's financial statements.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 6 - INCOME TAX STATUS (Continued)

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service or Department of Labor. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded as of December 31, 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Company has filed its Form 5500 return timely. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

NOTE 7 - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue their 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 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2011 and 2010:

	2011	2010
Net assets available for benefits per the financial statements Adjustment from contract value to fair value for fully benefit-responsive investment contracts	\$ 22,244,968 30,121	\$ 23,077,775 19,613
Net assets available for benefit per Form 5500, Schedule H, part 1, line L	\$ <u>22,275,089</u>	\$ <u>23,097,388</u>

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 8 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (Continued)

The following is a reconciliation of net increase in net assets per the financial statements to the Form 5500 for the year ended December 31, 2011:

	2011
Net decrease in net assets per the financial statements Change in adjustment from contract value to fair value	\$ (832,807)
for fully benefit-responsive investment contracts	10,508
Net loss per Form 5500, Schedule H, Part II	\$ (822,299)

NOTE 9 - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participant's account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 10 - COMMITMENT

The Participatory Plan which was merged into the Plan on January 1, 2010 (see Note 11) entered into an agreement with a Fund (see Note 2) to invest a total of \$500,000 over a number of years. The Fund is a venture capital fund which seeks to invest in merger and acquisitions, as well as initial public offerings (IPOs). A capital call of \$62,500 was made during the year ending December 31, 2010 in order for the Plan to fund its remaining commitment for cumulative capital calls. There is no remaining commitment at December 31, 2011 and 2010. The Plan could sell its interest in the Fund to a third party with prior approval from the Fund.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 11 - PLAN MERGER

On January 1, 2010, the Bargreen-Ellingson, Inc. 401(k) Participatory Profit Sharing Plan (Participatory Plan) was merged into the Bargreen-Ellingson, Inc. 401(k) Plan. Prior to the merger, the Participatory Plan covered eligible employees of Bargreen-Ellingson, Inc. The transferred net assets have been recognized in the accounts of the Bargreen-Ellingson, Inc. 401(k) Plan as of January 1, 2010, at their balances as previously carried in the accounts of the Bargreen-Ellingson, Inc. 401(k) Participatory Profit Sharing Plan of \$870,958. The changes in net assets of the combined plans are included in the accompanying statement of changes in net assets available for benefits from January 1, 2010.



SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

EIN: 91-0715309

Plan: 002

Plan: 002		()		
(a) * Party in Interest	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Blrk Cap Appr Br	15,415 Shares, Mutual fund	**	\$ 334,655
*	Pru Global Re Z	1,604 Shares, Mutual fund	**	28,290
*	ABF Large Cap Val Y	26,208 Shares, Mutual fund	**	484,583
*	Thornburg Value R5	23,161 Shares, Mutual fund	**	691,573
*	Nuveen Real Estate I	18,449 Shares, Mutual fund	**	349,978
*	Drey Basic S&P 500	29,518 Shares, Mutual fund	**	758,625
*	Col Mid Cap Idx Z	45,948 Shares, Mutual fund	**	490,268
*	IVK Small Cap Val Y	77,024 Shares, Mutual fund	**	1,204,662
*	Mainsty ICap Seleq I	24,211 Shares, Mutual fund	**	822,208
*	Blkrk Intl Opp Inst	18,641 Shares, Mutual fund	**	548,405
*	Blkrk Midcap Val IS	61,147 Shares, Mutual fund	**	676,289
*	Opphmr Intl Grth Y	54,649 Shares, Mutual fund	**	1,394,635
*	WFA Total Rtn Bd I	171,241 Shares, Mutual fund	**	2,200,448
*	JPM Emrg Mkts Eq Is	20,671 Shares Mutual fund	**	422,105
*	FA Lev Co Stock I	11,564 Shares, Mutual fund	**	356,170
*	FA Small Cap I	42,485 Shares, Mutual fund	**	965,690
*	FID Ret Govt MM	Money market fund	**	242,454
*	FA Strat Income I	248,486 Shares, Mutual fund	**	3,034,012
*	FA Stable Value	Common/collective trust	**	943,508
*	FA INFLA Protet BD I	8,041 Shares, Mutual fund	**	102,522
*	FA Freedom 2010 I	13,678 Shares, Mutual fund	**	153,329
*	FA Freedom 2020 I	33,995 Shares, Mutual fund	**	392,643
*	FA Freedom 2030 I	30,803 Shares, Mutual fund	**	353,615
*	FA Freedom 2040 I	13,207 Shares, Mutual fund	**	151,352
*	FA Freedom Inc I	18,710 Shares, Mutual fund	**	199,638
*	FA New Insights I	75,894 Shares, Mutual fund	**	1,514,844
*	FA Freedom 2005 I	2,195 Shares, Mutual fund	**	23,995
*	FA Freedom 2015 I	19,441 Shares, Mutual fund	**	217,348
*	FA Freedom 2025 I	12,468 Shares, Mutual fund	**	137,395
*	FA Freedom 2035 I	16,592 Shares, Mutual fund	**	178,374
*	FA Mid Cap II I	49,495 Shares, Mutual fund	**	804,302
*	FA Small Cap Gr Inst	2,644 Shares, Mutual fund	**	39,506
*	FA Intl Discovery I	18,952 Shares, Mutual fund	**	522,312
*	FA Freedom 2045 I	14,622 Shares, Mutual fund	**	129,847
*	FA Freedom 2050 I	30,294 Shares, Mutual fund	**	263,254
		Subtotal Participant Directed	**	21,132,834
* 0	4			,102,007

^{*} Party in Interest

^{**} Participant Directed

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (Continued)

December 31, 2011

EIN: 91-0715309

Plan: 002

Plan: 002		(c)		
(a) * Party in Interest	(b) Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Cash	Cash	\$ 47,485	\$ 47,485
*	AQR Divers Arbitrage N	2,532 Shares, Mutual fund	28,259	27,470
*	Artisan Opport Value	5,480 Shares, Mutual fund	51,809	54,749
*	BNY Partners Fund II, LLC	Limited Partnership	437,500	350,457
*	BBH Core Select Retail	2,805 Shares, Mutual fund	25,421	27,823
*	DoubleLine Total Return Bd N	1,499 Shares, Mutual fund	16,589	16,515
*	FMI Large Cap	3,453 Shares, Mutual fund	51,995	52,666
*	Harbor Capital Appreciation In	809 Shares, Mutual fund	28,808	29,472
*	Harbor Int'l Inv	467 Shares, Mutual fund	27,522	24,276
*	Lazard Int'l Strat Equity	2,259 Shares, Mutual fund	23,837	21,530
*	Loomis Sayles Bond Retail	1,991 Shares, Mutual fund	28,738	27,633
*	PIMCO Emerg Local Bond D	3,201 Shares, Mutual fund	35,571	32,168
*	PIMCO Total Return D	3,580 Shares, Mutual fund	41,039	38,917
*	PIMCO Unconstrained Bond	4,803 Shares, Mutual fund	54,297	52,305
*	SSgA Energing Markets	1,166 Shares, Mutual fund	20,737	20,973
*	Selected American Shs S	1,188 Shares, Mutual fund	47,545	46,885
*	Thornburg Int'l Value A	1,000 Shares, Mutual fund	27,371	24,068
*	Touch Sand Cap Sel Grow Z	3,196 Shares, Mutual fund	30,859	32,566
*	Westport Select Cap R	249 Shares, Mutual fund	5,673	5,621
		Subtotal Nonparticipant		
		Directed Investments	1,031,055	933,579
*	Participant Loans	Loans to participants, Maturity dates ranging from June 2012 – April 2019;		
		5.25% - 6% interest rate	0	208,676
		Total	\$ <u>1.031.055</u>	\$ 22,275,089

^{*} Party in Interest

^{**} Participant Directed

Audited Financial Statements and Supplemental Financial Information

December 31, 2011

Audited Financial Statements and Supplemental Financial Information

December 31, 2011

INDEPENDENT AUDITOR'S REPORT	2
AUDITED FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Notes to Financial Statements	4
SUPPLEMENTAL FINANCIAL INFORMATION	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	6



Doty, Beardsley, Rosengren & Co., P.S.

Certified Public Accountants

Independent Auditor's Report

To the Administrative Committee of Bargreen-Ellingson, Inc. 401(k) Plan Fife, Washington

We have audited the accompanying statements of net assets available for benefits of Bargreen-Ellingson, Inc. 401(k) Plan (the Plan) as of December 31, 2011 and 2010, and the related statement of changes in net assets available for benefits for the year ended December 31, 2011. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Bargreen-Ellingson, Inc. 401(k) Plan as of December 31, 2011 and 2010, and the changes in its net assets available for benefits for the year ended December 31, 2011, in conformity with accounting principles generally accepted in the United States of America.

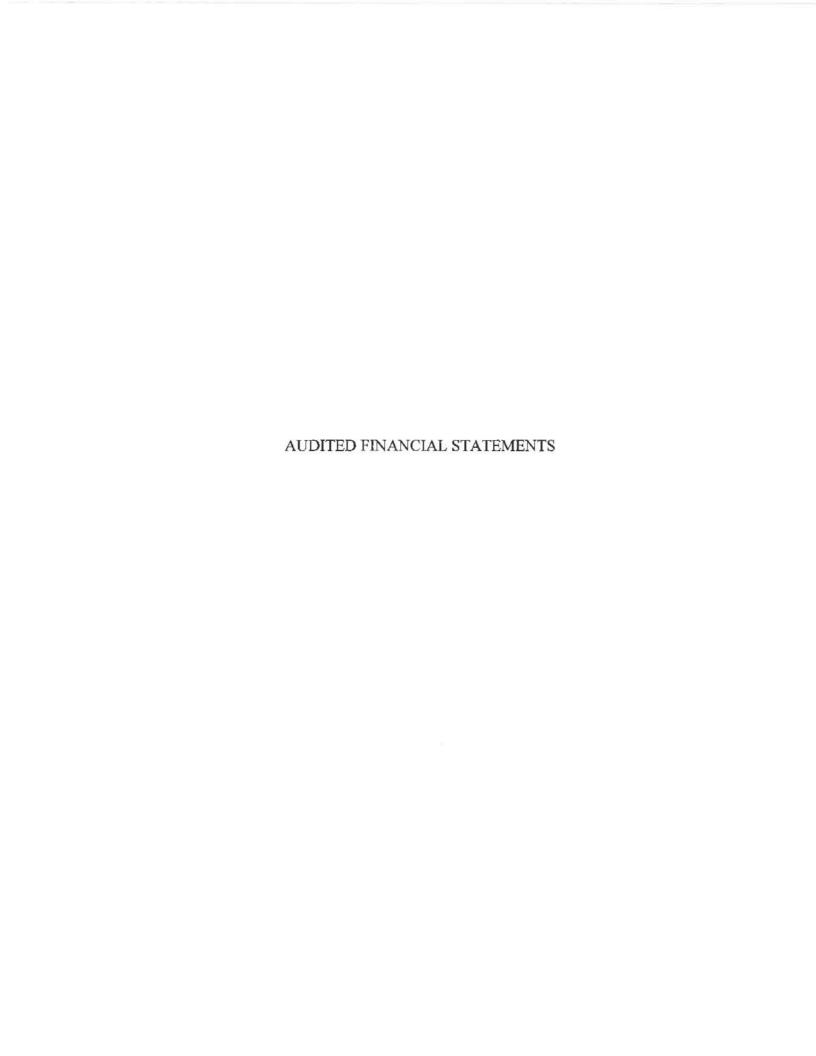
Our audit was conducted for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedule of Assets Held for Investment at End of Year, referred to as "supplemental information", is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements, and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In our opinion, the information is fairly stated in all material respects in relation to the financial statements taken as a whole.

Doty, Beardsley, Rosengren & Co., P.S.

Doty, Beardsley, Rosengren & Co., P.S.

September 21, 2012



STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2011 and 2010

	2011	2010
ASSETS		
Investments, at fair value: Cash Mutual funds Common or collective trust Money market fund Limited partnership	\$ 47,485 20,482,509 943,508 242,454 350,457	\$ 16,703 21,195,037 1,048,754 281,989 373,039
Total Investments	22,066,413	22,915,522
Notes receivable from participants	208,676	181,866
Net Assets Available for Benefits, at Fair Value	22,275,089	23,097,388
Adjustment from fair value to contract value for fully benefit-responsive investment contract	(30,121)	(19,613)
Net Assets Available for Benefits	\$ 22,244,968	\$ <u>23,077,775</u>

The accompanying notes are an integral part of these financial statements.

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31, 2011

ADDITIONS TO NET ASSETS ATTRIBUTED TO: Investment income: Net appreciation in contract value of common or collective trust Interest, dividends, and capital gain distributions	\$ 13,297 770,011
Total Investment Income	783,308
Contributions: Participant Employer Rollovers from qualified plans	1,067,842 486,979 43,366
Total Contributions	1,598,187
Total Additions	2,381,495
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO: Net depreciation in fair value of mutual funds Benefits paid to participants Administrative expenses	1,482,725 1,657,387 74,190
Total Deductions	3,214,302
Net Decrease	(832,807)
NET ASSETS AVAILABLE FOR BENEFITS AT BEGINNING OF YEAR	23,077,775
Net Assets Available for Benefits at End of Year	\$ <u>22,244,968</u>

The accompanying notes are an integral part of these financial statements.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Bargreen-Ellingson, Inc. 401(K) 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 employees of Bargreen-Ellingson, Inc. who have attained the age of 21, completed three months of service by the end of a twelve month period, and are not covered under a collective bargaining agreement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participants may contribute up to 100% of their eligible compensation through salary reductions. Participants direct their contributions to any or all of the investment choices available to them. The Company makes pretax safe harbor matching contributions to the Plan equal to 100% of the employee's salary deferral that do not exceed 3% of their compensation, plus 50% of the employee's salary deferral between 3% and 5% of their compensation. Participants must be 21 years of age and complete 1 year of service by the end of a twelve month period to be eligible for the match. Participants are 100% vested in the safe harbor match. The Plan may also elect to make an annual discretionary employer contribution to participants that have completed 1,000 hours of service and be employed on the last day of the year (unless the participant dies, becomes disabled, or retires during the year).

Participant Accounts

Each participant's account is credited with the participant's contribution, allocation of the Company's contribution and Plan earnings and losses. Allocations are based on participant compensation or account balances, as defined in the Plan agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their 401(k) salary reduction contribution and the employer safe harbor matching contribution. Participants become vested in any employer discretionary matching contributions, nonelective contributions, and any earnings thereon based on their years of service, as follows:

Years of Service	Vesting Percentage
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Normal Retirement

Normal retirement age is 60.

Payment of Benefits

On termination of service, a participant (or beneficiary) may elect to receive the value of his or her account either as a lump-sum cash distribution, a direct rollover distribution or a combination of the two. Distribution of account balances in excess of \$1,000 may be deferred, but not later than the date under law that minimum required distributions must commence.

Death or Disability

In the event of death of a participant before his or her retirement benefit commences, the participant becomes vested in any unvested balances, and 100% of the participant's account balance will be paid to the named beneficiary. If a participant becomes permanently disabled while a company employee, 100% of his or her account will become vested and be distributed in the same manner as if the participant had retired.

Hardship Withdrawals

While still employed by the Company, participants are permitted to withdraw a single lumpsum up to their total vested account balance, under certain conditions. These conditions include unreimbursed medical expenses, the purchase of a participant's principal residence, the payment of post-secondary education tuition, funeral or burial expenses, or to prevent eviction or foreclosure from the participant's principal residence. A participant's right to make pretax deferrals to the Plan will be suspended for six months after the receipt of a hardship withdrawal.

Rollovers from Other Qualified Plans

Participants who have an interest in any other qualified employee benefit plan (as described in Section 401(a) of the Internal Revenue Code) may transfer the lump-sum values of their accrued benefits directly into the Plan if such transfer meets the requirements of the Internal Revenue Code.

Notes Receivable from Participants

Participants may borrow from their fund accounts the lesser of 50% of the Plan participant's vested balance as of the most recent valuation date or \$50,000. The minimum principal amount is \$1,000. Note repayment terms, including interest rate, and the length of the notes are determined at the time the note is made. The notes are secured by the balance in the participant's account and bear interest ranging from 5.25% to 6% at December 31, 2011. Principal and interest are paid ratably through payroll deductions.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Forfeitures

Forfeitures of matching contributions by nonvested terminated participants are retained by the Plan and are first used to reduce administrative expenses and then used to reduce future employer contributions.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Income Tax

The Plan is exempt from income taxes under Internal Revenue Code Section 401(k).

Expenses

Administrative expenses not paid by the Plan are paid by the Company. Administrative expenses recorded in the Plan represent trustee fees and other recordkeeping fees paid directly from the Plan to the Plan's trustee.

Use of Estimates

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

Valuation of Assets

Investments are carried at fair market value as determined by fair value measurement (see Note 3). The limited partnership investment consists of an investment in the Bank of New York Partners Fund II, LLC (the Fund). Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Gains and losses (realized and unrealized) are reported in the net appreciation (depreciation) for common or collective trusts and mutual funds.

Fully Benefit-Responsive Investment

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 Statements 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.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (Continued)

Evaluation of Subsequent Events

Subsequent events were evaluated through September 21, 2012, the date that the financial statements were available to be issued, which is the date of the audit report. There were no material subsequent events that required recognition or additional disclosure in these financial statements.

NOTE 3 - FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The Fair Value Measurements topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) established a fair value hierarchy for reporting that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable units other than quoted prices for identical assets; and Level 3 inputs have the lowest priority.

Level 1 Fair Value Measurements

The fair values of the mutual funds and money market funds are based on quoted net asset values of the shares held by the Plan at year-end. These funds are classified as Level 1 of the valuation hierarchy.

Level 2 Fair Value Measurements

The investment in common or collective trust consists of a single fund, the Fidelity Advisor Stable Value Fund. The fund is accounted for in accordance with the FASB ASC subtopic on Fully Benefit-Responsive Investment Contracts.

Level 3 Fair Value Measurements

The fair value of the limited partnership is determined annually by an audit of the Fund. The fair value of the investments was determined using unobservable inputs that cannot be corroborated by current market data, based on the audit for the Fund's year-end.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2011 and 2010:

	Assets at	Fair Value at	December 31	1,2011
	Level 1	Level 2	Level 3	2011 Total
Mutual funds:				
Multisector bond	\$ 3,113,951			\$ 3,113,951
Large blend	2,399,780			2,399,780
Intermediate term bond	2,255,880			2,255,880
Small blend	2,170,352			2,170,352
Balanced	2,001,152			2,001,152
Large growth	1,911,538			1,911,538
Foreign large growth	1,418,703			1,418,703
Foreign large blend	1,116,524			1,116,524
Mid-cap blend	852,059			852,059
Mid-cap growth	804,302			804,302
Mid-cap value	676,289			676,289
Large value	539,332			539,332
Diversified emerging markets	443,078			443,078
Real estate	349,978			349,978
Money market	242,454			242,454
Retirement income	199,638			199,638
Other	190,447			190,447
Cash	47,485			47,485
Small growth	39,506			39,506
Common or collective trust		\$ 943,508		943,508
Limited partnership			\$ 350,457	350,457
Total Assets at Fair Value	\$ 20,772,448	\$ <u>943,508</u>	\$ <u>350,457</u>	\$ 22,066,413

	Assets at Fair Value at December 31, 2010			
	Level 1	Level 2	Level 3	2010 Total
Mutual funds:				
Small blend	\$ 2,645,331			\$ 2,645,331
Multisector bond	2,507,249			2,507,249
Large blend	2,419,296			2,419,296
Intermediate term bond	2,267,656			2,267,656
Large growth	2,026,283			2,026,283
Foreign large growth	1,814,998			1,814,998
Balanced	1,676,759			1,676,759
Foreign large blend	1,184,608			1,184,608
Mid-cap growth	941,577			941,577
Mid-cap value	918,155			918,155

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

	Assets at Fair Value at December 31, 2010					
		Level 1	Level 2	Level 3	_20	10 Total
Mutual Funds (Continued):						
Mid-cap blend	\$	750,516			\$	750,516
Large value		692,792				692,792
Diversified emerging markets		577,688				577,688
Money market		281,989				281,989
Retirement income		240,683				240,683
Real estate		206,315				206,315
Other		325,131				325,131
Cash		16,703				16,703
Common or collective trust			\$ 1,048,754			1,048,754
Limited partnership	1,5			\$ 373,039	-	373,039
Total Assets at Fair Value	\$ 2	1,493,729	\$ <u>1,048,754</u>	\$ <u>373,039</u>	\$ <u>2</u>	<u>2,915,522</u>

NOTE 4 - INVESTMENTS

The following investments represent 5% or more of the Plan's net assets at December 31:

	2011	2010
FA Strat Income I	\$ 3,034,012	\$ 2,402,595
WFA Tot Rtn Bd Adm	*	\$ 2,230,338
ALL/Bern Intl Gr Adv	*	\$ 1,784,917
FA New Insights I	\$ 1,514,844	\$ 1,574,381
IVK Small Cap Value Y	\$ 1,204,662	\$ 1,536,988
Opphmr Intl Grth Y	\$ 1,394,635	*
WFA Total Rtn Bd I	\$ 2,200,448	*

^{*} Less than 5% of net assets

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 5 - NONPARTICIPANT DIRECTED INVESTMENTS

The investments that were merged into the Plan as of January 1, 2010 (see Note 11) include certain nonparticipant directed investments. Information about the net assets and the significant components of the change in net assets related to the nonparticipant directed investments is as follows:

	2011	2010
Beginning of year Transfer of Plan assets due to merger (see Note 11) Interest and dividend income Net appreciation (depreciation) Benefits paid Administrative expenses	\$ 927,342 90,286 (33,472) (45,937) (4,640)	\$ 0 870,958 16,420 78,779 (33,465) _(5,350)
Total Nonparticipant Directed Investments	\$ <u>933,579</u>	\$ <u>927,342</u>
These investments are comprised of the following:	2011	2010
Cash Mutual funds Limited Partnership	\$ 47,485 535,637 350,457	16,703 537,600 <u>373,039</u>
Total Nonparticipant Directed Investments	\$ 933,579	\$ <u>927,342</u>

NOTE 6 - INCOME TAX STATUS

The Company adopted a Fidelity Prototype 401(k) Plan document in September 2003. The Plan obtained its latest determination letter in October 2003, in which the Internal Revenue Service stated that the plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax counsel believe that the plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income tax has been included in the Plan's financial statements.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 6 - INCOME TAX STATUS (Continued)

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service or Department of Labor. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded as of December 31, 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Company has filed its Form 5500 return timely. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

NOTE 7 - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue their 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 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2011 and 2010:

	2011	2010
Net assets available for benefits per the financial statements Adjustment from contract value to fair value for fully benefit-responsive investment contracts	\$ 22,244,968 30,121	\$ 23,077,775
Net assets available for benefit per Form 5500, Schedule H, part 1, line L	\$ <u>22,275,089</u>	\$ <u>23,097,388</u>

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 8 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (Continued)

The following is a reconciliation of net increase in net assets per the financial statements to the Form 5500 for the year ended December 31, 2011:

	2011
Net decrease in net assets per the financial statements Change in adjustment from contract value to fair value	\$ (832,807)
for fully benefit-responsive investment contracts	10,508
Net loss per Form 5500, Schedule H, Part II	\$ (822,299)

NOTE 9 - RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participant's account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 10 - COMMITMENT

The Participatory Plan which was merged into the Plan on January 1, 2010 (see Note 11) entered into an agreement with a Fund (see Note 2) to invest a total of \$500,000 over a number of years. The Fund is a venture capital fund which seeks to invest in merger and acquisitions, as well as initial public offerings (IPOs). A capital call of \$62,500 was made during the year ending December 31, 2010 in order for the Plan to fund its remaining commitment for cumulative capital calls. There is no remaining commitment at December 31, 2011 and 2010. The Plan could sell its interest in the Fund to a third party with prior approval from the Fund.

NOTES TO FINANCIAL STATEMENTS

December 31, 2011

NOTE 11 - PLAN MERGER

On January 1, 2010, the Bargreen-Ellingson, Inc. 401(k) Participatory Profit Sharing Plan (Participatory Plan) was merged into the Bargreen-Ellingson, Inc. 401(k) Plan. Prior to the merger, the Participatory Plan covered eligible employees of Bargreen-Ellingson, Inc. The transferred net assets have been recognized in the accounts of the Bargreen-Ellingson, Inc. 401(k) Plan as of January 1, 2010, at their balances as previously carried in the accounts of the Bargreen-Ellingson, Inc. 401(k) Participatory Profit Sharing Plan of \$870,958. The changes in net assets of the combined plans are included in the accompanying statement of changes in net assets available for benefits from January 1, 2010.



SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2011

EIN: 91-0715309

Plan: 002

Plan: 002		()		
(a) * Party in Interest	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Blrk Cap Appr Br	15,415 Shares, Mutual fund	**	\$ 334,655
*	Pru Global Re Z	1,604 Shares, Mutual fund	**	28,290
*	ABF Large Cap Val Y	26,208 Shares, Mutual fund	**	484,583
*	Thornburg Value R5	23,161 Shares, Mutual fund	**	691,573
*	Nuveen Real Estate I	18,449 Shares, Mutual fund	**	349,978
*	Drey Basic S&P 500	29,518 Shares, Mutual fund	**	758,625
*	Col Mid Cap Idx Z	45,948 Shares, Mutual fund	**	490,268
*	IVK Small Cap Val Y	77,024 Shares, Mutual fund	**	1,204,662
*	Mainsty ICap Seleq I	24,211 Shares, Mutual fund	**	822,208
*	Blkrk Intl Opp Inst	18,641 Shares, Mutual fund	**	548,405
*	Blkrk Midcap Val IS	61,147 Shares, Mutual fund	**	676,289
*	Opphmr Intl Grth Y	54,649 Shares, Mutual fund	**	1,394,635
*	WFA Total Rtn Bd I	171,241 Shares, Mutual fund	**	2,200,448
*	JPM Emrg Mkts Eq Is	20,671 Shares Mutual fund	**	422,105
*	FA Lev Co Stock I	11,564 Shares, Mutual fund	**	356,170
*	FA Small Cap I	42,485 Shares, Mutual fund	**	965,690
*	FID Ret Govt MM	Money market fund	**	242,454
*	FA Strat Income I	248,486 Shares, Mutual fund	**	3,034,012
*	FA Stable Value	Common/collective trust	**	943,508
*	FA INFLA Protet BD I	8,041 Shares, Mutual fund	**	102,522
*	FA Freedom 2010 I	13,678 Shares, Mutual fund	**	153,329
*	FA Freedom 2020 I	33,995 Shares, Mutual fund	**	392,643
*	FA Freedom 2030 I	30,803 Shares, Mutual fund	**	353,615
*	FA Freedom 2040 I	13,207 Shares, Mutual fund	**	151,352
*	FA Freedom Inc I	18,710 Shares, Mutual fund	**	199,638
*	FA New Insights I	75,894 Shares, Mutual fund	**	1,514,844
*	FA Freedom 2005 I	2,195 Shares, Mutual fund	**	23,995
*	FA Freedom 2015 I	19,441 Shares, Mutual fund	**	217,348
*	FA Freedom 2025 I	12,468 Shares, Mutual fund	**	137,395
*	FA Freedom 2035 I	16,592 Shares, Mutual fund	**	178,374
*	FA Mid Cap II I	49,495 Shares, Mutual fund	**	804,302
*	FA Small Cap Gr Inst	2,644 Shares, Mutual fund	**	39,506
*	FA Intl Discovery I	18,952 Shares, Mutual fund	**	522,312
*	FA Freedom 2045 I	14,622 Shares, Mutual fund	**	129,847
*	FA Freedom 2050 I	30,294 Shares, Mutual fund	**	263,254
		Subtotal Participant Directed	**	21,132,834
* D				21,132,037

^{*} Party in Interest

^{**} Participant Directed

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (Continued)

December 31, 2011

EIN: 91-0715309

Plan: 002

(a) * Party in Interest	(b) Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Cash	Cash	\$ 47,485	\$ 47,485
*	AQR Divers Arbitrage N	2,532 Shares, Mutual fund	28,259	27,470
*	Artisan Opport Value	5,480 Shares, Mutual fund	51,809	54,749
*	BNY Partners Fund II, LLC	Limited Partnership	437,500	350,457
*	BBH Core Select Retail	2,805 Shares, Mutual fund	25,421	27,823
*	DoubleLine Total Return Bd N	1,499 Shares, Mutual fund	16,589	16,515
*	FMI Large Cap	3,453 Shares, Mutual fund	51,995	52,666
*	Harbor Capital Appreciation In	809 Shares, Mutual fund	28,808	29,472
*	Harbor Int'l Inv	467 Shares, Mutual fund	27,522	24,276
*	Lazard Int'l Strat Equity	2,259 Shares, Mutual fund	23,837	21,530
*	Loomis Sayles Bond Retail	1,991 Shares, Mutual fund	28,738	27,633
*	PIMCO Emerg Local Bond D	3,201 Shares, Mutual fund	35,571	32,168
*	PIMCO Total Return D	3,580 Shares, Mutual fund	41,039	38,917
*	PIMCO Unconstrained Bond	4,803 Shares, Mutual fund	54,297	52,305
*	SSgA Energing Markets	1,166 Shares, Mutual fund	20,737	20,973
*	Selected American Shs S	1,188 Shares, Mutual fund	47,545	46,885
*	Thornburg Int'l Value A	1,000 Shares, Mutual fund	27,371	24,068
*	Touch Sand Cap Sel Grow Z	3,196 Shares, Mutual fund	30,859	32,566
*	Westport Select Cap R	249 Shares, Mutual fund	5,673	5,621
		Subtotal Nonparticipant		
		Directed Investments	1,031,055	933,579
*	Participant Loans	Loans to participants, Maturity dates ranging from June 2012 – April 2019; 5.25% - 6% interest rate	0	208,676
		Total	\$ <u>1.031.055</u>	\$ <u>22,275,089</u>

(c)

^{*} Party in Interest

^{**} Participant Directed