Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

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

OMB Nos. 1210-0110
1210-0089

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/15/2004

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

SAV-MORE DRUG, INC

411 MAIN STREET
SULPHUR SPRINGS, TX 75482

2b Employer Identification Number (EIN) 75-2047264

2c Sponsor's telephone number 903-885-0821

2d Business code (see instructions) 446110

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2012	DOUGLAS MOORE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2012	DOUGLAS MOORE
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
SAV-MORE DRUG, INC

411 MAIN STREET
SULPHUR SPRINGS, TX 75482

3b Administrator's EIN
75-2047264

3c Administrator's telephone number
903-885-0821

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

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	438
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	414
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	29
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	443
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	443
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	248
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

A Name of plan
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SAV-MORE DRUG, INC

D Employer Identification Number (EIN)
75-2047264

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	30941	248	01/01/2011	12/31/2011

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
32116	6984

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MORGAN STANLEY DW
821 ESE LOOP 323
SUITE 100
TYLER, TX 75701

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
32116	116	OTHER ALLOWANCES	4

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
TRAVIS WOLFF
15950 N. DALLAS PARKWAY
SUITE 600
DALLAS, TX 75248

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
	6729	TPA COMPENSATION & FEES	5

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

VANGUARD GROUP, INC.

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
	139	REDEMPTION FEES	6

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	281259
5	Current value of plan's interest under this contract in separate accounts at year end	5	6326175

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GUARANTEED INTEREST

b	Balance at the end of the previous year			7b	204387
c	Additions: (1) Contributions deposited during the year	7c(1)	67554		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	5626		
	(4) Transferred from separate account	7c(4)	7635		
	(5) Other (specify below)	7c(5)	1245		
	▶ LOAN PAYMENTS				
	(6) Total additions			7c(6)	82060
d	Total of balance and additions (add **b** and **c(6)**)			7d	286447
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)	1536		
	(3) Transferred to separate account	7e(3)	1877		
	(4) Other (specify below)	7e(4)	1775		
	▶ PARTICIPANT LOANS				
	(5) Total deductions			7e(5)	5188
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	281259

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

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

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

m ☐ Other (specify) ▶

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

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

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

A Name of plan	**B** Three-digit plan number (PN) ▶	
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN		001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
SAV-MORE DRUG, INC	75-2047264	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

JOHN HANCOCK USA

01-0233346

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

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

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

JOHN HANCOCK USA

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 28 59 60 62 63 67	RECORDKEEPER	1206	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SAV-MORE DRUG, INC

D Employer Identification Number (EIN)
75-2047264

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
01-0233346-000	P	12387

a Name of MTIA, CCT, PSA, or 103-12 IE: ALL CAP VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
01-0233346-000	P	2248

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
01-0233346-000	P	60416

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
01-0233346-000	P	12468

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
01-0233346-000	P	32901

a Name of MTIA, CCT, PSA, or 103-12 IE: BLUE CHIP GROWTH FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
01-0233346-000	P	22734

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103- 12 IE at end of year (see instructions)
01-0233346-000	P	7417

a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA VALUE & RESTRUCTURING

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19295

a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NEW YORK VENTURE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 57611

a Name of MTIA, CCT, PSA, or 103-12 IE: DFA U.S. SMALL CAP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 61668

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 348

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79085

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 64109

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20924

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12055

a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN SMALL-MID GROWTH

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 887

a Name of MTIA, CCT, PSA, or 103-12 IE: FUNDAMENTAL LARGE CAP VALUE

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15726

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18564

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2437

a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29216

a Name of MTIA, CCT, PSA, or 103-12 IE: INTL SMALL CAP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11108

a Name of MTIA, CCT, PSA, or 103-12 IE: INV SMALL CAP GROWTH

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 565

a Name of MTIA, CCT, PSA, or 103-12 IE: INVESTMENT COMPANY OF AMERICA

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43223

a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK STABLE VAL

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 406362

a Name of MTIA, CCT, PSA, or 103-12 IE: JPM MIDCAP VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30576

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 461020

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1186904

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONSERVATIVE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 222544
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1505571
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE MODERATE		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 344578
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS UTILITIES		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59957
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 35911
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 52799
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL BEACON		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15959
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31561
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER DEVELOPING MKT		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39897
a Name of MTIA, CCT, PSA, or 103-12 IE: OPPENHEIMER GLOBAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4484

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21545

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 85785

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 250296

a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15586

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2015

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27310

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2020

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 229543

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2025

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 58245

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2030

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 136040

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2035

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50056

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2040

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40472

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2045

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24265

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING AT 2050

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 833

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 57955

a Name of MTIA, CCT, PSA, or 103-12 IE: SCIENCE & TECHNOLOGY FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 267

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30851

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27773

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP OPPORTUNITIES FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4080

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11001

a Name of MTIA, CCT, PSA, or 103-12 IE: STRATEGIC INCOME OPP FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12571

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE EQUITY INC

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41011

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE HEALTH SCI

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27814

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SCI & TECH

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12929

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE SPECTRUM INC

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41975

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9876

a Name of MTIA, CCT, PSA, or 103-12 IE: THE GROWTH FUND OF AMERICA

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 60147

a Name of MTIA, CCT, PSA, or 103-12 IE: TOTAL STOCK MARKET INDEX FUND

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10690

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

b Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51745

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

A Name of plan
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SAV-MORE DRUG, INC

D Employer Identification Number (EIN)
75-2047264

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	
(2) Participant contributions	1b(2)	0	
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	149386	165571
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	5454684	6326175
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	204387	281259
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	5808457	6773005
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	5808457	6773005

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	450182	
	(B) Participants	2a(1)(B)	832055	
	(C) Others (including rollovers)	2a(1)(C)	39168	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1321405
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	6305	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		6305
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-195744
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		5626
d Total income. Add all **income** amounts in column (b) and enter total	2d		1137592
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	195474	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		195474
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		1243
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	3542	
(2) Contract administrator fees	2i(2)	42412	
(3) Investment advisory and management fees	2i(3)	139	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		46093
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		242810
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		894782
l Transfers of assets:			
(1) To this plan	2l(1)		69766
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: KNAPP & COMPANY, P.C. (2) EIN: 75-2713030

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
	4a		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
	4d		X	
e	Was this plan covered by a fidelity bond?			
	4e	X		300000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)			
	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?			
	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
	4n			

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

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
SAV-MORE DRUG, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SAV-MORE DRUG, INC

D Employer Identification Number (EIN)
75-2047264

Part I Distributions

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

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

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

EIN(s): 01-0233346 _____

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

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

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

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

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

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

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

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SAV-MORE DRUG, INC.
401(k) PROFIT SHARING PLAN
EIN 75-2047264

FINANCIAL STATEMENTS
AND
INDEPENDENT AUDITOR'S REPORT

AS OF
December 31, 2011 and 2010

KNAPP & Company, P.C.
(CERTIFIED PUBLIC ACCOUNTANTS)

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN

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KNAPP & COMPANY, P.C.
P.O. BOX 820669
DALLAS, TEXAS 75382
(214) 343-3777 // (214) 343-8233 FAX // RICK_KNAPP@SBCGLOBAL.NET

INDEPENDENT AUDITOR'S REPORT

October 3, 2012

To the Administrative Committee of
Sav-More Drug, Inc. 401(k) Profit Sharing Plan (EIN 75-2047264)
Sulphur Springs, Texas

We were engaged to audit the financial statements of Sav-More Drug, Inc. 401(k) Profit Sharing Plan as of December 31, 2011 and 2010, and for the year ended December 31, 2011 and the supplementary schedules as of and for the year ended December 31, 2011 as listed in the accompanying table of contents. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Notes 3 and 4, which was certified by John Hancock Life Insurance Company, Retirement Services, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the trustee is complete and accurate.

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

Knapp & Company, P.C.
Dallas, Texas

SAV-MORE DRUG, INC. 401(k)
PROFIT SHARING PLAN
EIN 75-2047264
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2011 AND 2010

	2011	2010
ASSETS		
Investments	$ 6,607,434	$ 5,659,071
Participant Loans	165,571	149,386
TOTAL ASSETS	6,773,005	5,808,457
LIABILITIES		
None	-	-
TOTAL LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 6,773,005	$ 5,808,457

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

SAV-MORE DRUG, INC. 401(k)
PROFIT SHARING PLAN
EIN 75-2047264
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2011

ADDITIONS:	
INCOME (Loss)	
Interest on Participant Loans	$ 6,305
Investment income (losses)	(190,118)
CONTRIBUTIONS:	
Participant	832,055
Participant roll over	39,168
Transfers from other sponsor plan	69,766
Employer	450,182
TOTAL ADDITIONS	1,207,358
DEDUCTIONS	
Benefits paid to Participants	172,709
Loan Defaults deemed as distributions	22,765
Deemed distribution of loans	1,243
Administrative and other expenses	46,093
TOTAL DEDUCTIONS	242,810
NET INCREASE	964,548
NET ASSETS AVAILABLE FOR BENEFITS	
BEGINNING OF YEAR	5,808,457
END OF YEAR	$6,773,005

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

NOTES TO FINANCIAL STATEMENTS

NOTE 1: *DESCRIPTION OF PLAN*

The following description of the Sav-More Drug, Inc. ("Company") 401(k) Profit Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions, which is available by request at the Company's offices located at 411 Main Street, Sulphur Springs, Texas 75482.

General. The Plan is a defined contribution plan covering all full-time employees of the Company who have one year of service and are age twenty-one or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions. Each year, participants may contribute up to the statutory limit of pretax annual compensation, as defined by the Internal Revenue Tax Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers seventy-three mutual fund investment options for participants. The Company matches employee contributions at a rate of 100% of the first 3% of compensation and 50% of the next 2% of compensation for a maximum contribution of 4% of compensation. Profit sharing amounts may be contributed at the option of the Company's board of directors and are distributed to participating employees on a prorated basis and invested in accordance with each employee's respective investment elections. Contributions are subject to certain limitations. The Plan sponsor directly pays most administration costs.

Participant Accounts. Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution (if any) and, (b) Plan earnings. The Company has historically paid all administrative expenses of the plan, however, the plan earnings are charged with an allocation of administrative expenses if incurred by the plan. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting. Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. A participant is 100% vested after one year of credited service.

Participant Loans. Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of $50,000 or 50% of their account balance, whichever is less. Participant accounts are secured by accrued participant benefits and therefore present no significant risk to the plan as a whole. The carrying value of the uncollected loans are estimated to approximate Level III fair value assets.

Payment of Benefits. On termination of service due to death, disability or retirement, a participant may receive a lump-sum distribution.

NOTES TO FINANCIAL STATEMENTS

NOTE 2—SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Forfeited Accounts. If a contribution is forfeited, the amount will be reallocated to participants in the same manner as employer contributions.

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

Fair Value Measurement - Starting in 2011, it is the Plan's policy to disclose the source of fair value information used in the preparation of the financial statements using the fair value hierarchy, Level I through III, as defined in the FASB ACS (Financial Accounting Standards Board Accounting Standards Codification). Level I valuation is given the highest priority to observable inputs which are based on quoted prices in active markets for identical assets or liabilities. Level II valuation is based upon quoted prices of similar assets and liabilities in active markets or derived from or corroborated by observable market data. Level III valuation is based in part or whole upon unobservable inputs for valuation of assets and liabilities. Unobservable inputs are developed based on the best information available in the circumstances. The estimates of fair value and assumptions that affect the reported amounts of assets and liabilities could and will differ from actual amounts realized in the future. Plan investments are valued and reported at fair value. Valuation sources of Common and collective investments are considered Level I. Participant loan values are considered Level III.

Investment Valuation and Income Recognition The Plan's investments are stated at fair value. Quoted market prices are used to value investments. Shares of mutual funds are valued at quoted market prices which represent the net asset value of shares held by the Plan at year-end. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date.

IRS Determination Status The Plan is an IRS approved prototype plan which is amended from time to time to comply with changes in law relative to contribution limits, withdrawal provisions, and/or other administrative features.

Subsequent Events Review ï Management has reviewed and considered the effect of subsequent events through the date of the audit report.

NOTE 3: INVESTMENTS

In accordance with DOL rule 29 CFR 2520.103-5 (c) the plan administrator certified the accuracy and completeness of information relative to plan investments which was not subjected to audit. The following presents investments certified at December 31, 2011 and 2010:

NOTES TO FINANCIAL STATEMENTS

NOTE 3 - INVESTMENTS - continued

As of December 31, 2011:	Amortized Cost	Unrealized Gain	Unrealized Loss	Market Value	Fair value Source
Investments 5% or > of plan assets:					
Lifestyle Growth	1,375,014	130,561	-	1,505,575	Level I
Lifestyle Balanced	1,052,782	134,121	-	1,186,903	Level I
Lifestyle Aggressive	426,405	34,614	-	461,019	Level I
John Hancock Stable Val	395,946	10,417	-	406,363	Level I
Lifestyle Moderate	290,824	53,753	-	344,577	Level I
Investments < 5% of plan assets:					
10 Yr Comp	281,259	-	-	281,259	Level II
PIMCO Total Return	234,429	15,867	-	250,296	Level I
Lifecycle 2020	172,707	56,836	-	229,543	Level I
Lifestyle Conservative	196,422	26,122	-	222,544	Level I
Lifecycle 2030	112,146	23,894	-	136,040	Level I
PIMCO Global Bond	75,071	10,714	-	85,785	Level I
Energy	76,299	2,786	-	79,085	Level I
EuroPacific Growth Fund	68,358	-	4,249	64,109	Level I
US Small Cap	52,296	9,372	-	61,668	Level I
American Balanced Fund	56,602	3,814	-	60,416	Level I
The Growth Fund of America	57,362	2,785	-	60,147	Level I
MFS Utilities	53,265	6,692	-	59,957	Level I
Lifecycle 2025	54,543	3,702	-	58,245	Level I
Royce Opportunity	55,564	2,391	-	57,955	Level I
Davis New York Venture	53,760	3,851	-	57,611	Level I
Mid Cap Stock Fund	53,221	-	422	52,799	Level I
Washington Mutual Investors	44,964	6,781	-	51,745	Level I
Lifecycle 2035	49,493	563	-	50,056	Level I
Investment Company of America	41,022	2,201	-	43,223	Level I
T. Rowe Price Spectrum Inc	38,845	3,130	-	41,975	Level I
TRP EQ Inc.	37,997	3,014	-	41,011	Level I
Lifecycle 2040	38,576	1,896	-	40,472	Level I
Oppenheimer Development Mkt	38,072	1,824	-	39,896	Level I
Mid Cap Index Fund	29,348	6,563	-	35,911	Level I
BRGLEBALL	33,739	-	838	32,901	Level I
Mutual Discovery	29,117	2,444	-	31,561	Level I
Small Cap Growth Index	32,073	-	1,223	30,850	Level I
Lord Abbett Mid Cap Value (JPM Mc	28,270	2,306	-	30,576	Level I
Intl Equity Index Fund	29,738	-	522	29,216	Level I
T. Rowe Price Health Sci	24,217	3,596	-	27,813	Level I
Small Cap Index Fund	25,222	2,551	-	27,773	Level I
Lifecycle 2015	25,153	2,157	-	27,310	Level I
Lifecycle 2045	24,328	-	63	24,265	Level I
VS Blu Chip	20,403	2,331	-	22,734	Level I
PIMCO All Asset	19,267	2,278	-	21,545	Level I
Explorer	20,011	913	-	20,924	Level I
Columbia Value & Restructuring	19,050	245	-	19,295	Level I
VS High Yield	19,285	-	721	18,564	Level I
Mutual Beacon	15,600	359	-	15,959	Level I

NOTES TO FINANCIAL STATEMENTS

As of December 31, 2011:	Amortized Cost	Unrealized Gain	Unrealized Loss	Market Value	Fair value Source
Optimized Value Fund	13,832	1,894	-	15,726	Level I
Real Est. Securities Fund	11,716	3,870	-	15,586	Level I
VS Str Inc	12,815	-	244	12,571	Level I
Heritage	14,029	-	1,561	12,468	Level I
500 Index Fund	11,372	1,015	-	12,387	Level I
VS Financial	12,694	-	639	12,055	Level I
Intl Small Cap Fund	9,903	1,205	-	11,108	Level I
VS Small Val	9,737	1,264	-	11,001	Level I
Total Stock Market Index Fund	8,348	2,342	-	10,690	Level I
Templeton World	10,723	-	847	9,876	Level I
Sci Tech	8,683	706	-	9,389	Level I
VS Cap App	7,200	217	-	7,417	Level I
Oppenheimer Global	4,282	202	-	4,484	Level I
Small Cap Opportunities Fund	3,085	995	-	4,080	Level I
VS SC Tec	4,227	-	421	3,806	Level I
International Value Fund	2,716	-	279	2,437	Level I
VS ALLCPVL	2,229	20	-	2,249	Level I
SM-MD GRTH	880	7	-	887	Level I
RL at 2050	828	5	-	833	Level I
Small Growth	537	28	-	565	Level I
Domini Social Equity	354	-	6	348	Level I
	$ 6,028,255	$ 591,214	$ 12,035	$ 6,607,434	

As of December 31, 2010:	Amortized Cost	Unrealized Gain	Unrealized Loss	Market Value	Fair value Source
Investments 5% or > of plan assets:					
Lifestyle Growth	1,138,547	227,878	-	1,366,425	Level I
Lifestyle Balanced	880,450	175,504	-	1,055,954	Level I
Lifestyle Aggressive	351,107	71,817	-	422,924	Level I
Lifestyle Moderate	255,796	55,128	-	310,924	Level I
Investments < 5% of plan assets:			-		
Lifecycle 2020	172,234	92,276	-	264,510	Level I
10 Yr Comp	204,387	-	-	204,387	Level II
Lifestyle Conservative	165,393	22,672	-	188,065	Level I
PIMCO Total Return	160,307	11,424	-	171,731	Level I
John Hancock Stable Val	144,168	5,323	-	149,491	Level I
Lifecycle 2030	69,756	31,840	-	101,596	Level I
Lifecycle 2025	64,694	32,618	-	97,312	Level I

NOTES TO FINANCIAL STATEMENTS

NOTE 3 - INVESTMENTS - continued

As of December 31, 2010:	Amortized Cost	Unrealized Gain	Unrealized Loss	Market Value	Fair value Source
EuroPacific Growth Fund	88,188	9,111	-	97,299	Level I
Oppenheimer Development Mkt	63,455	25,449	-	88,904	Level I
The Growth Fund of America	74,404	10,221	-	84,625	Level I
Energy	59,018	7,243	-	66,261	Level I
LM Partners Glb High Yield	52,788	9,949	-	62,737	Level I
Oppenheimer Global	47,681	9,244	-	56,925	Level I
Davis New York Venture	46,173	7,523	-	53,696	Level I
Intl Equity Index Fund	40,589	7,183	-	47,772	Level I
Mid Cap Stock Fund	40,291	6,415	-	46,706	Level I
VS Mid Val	36,913	8,423	-	45,336	Level I
US Small Cap	28,415	12,237	-	40,652	Level I
Washington Mutual Investors	35,570	4,563	-	40,133	Level I
PIMCO Global Bond	32,075	6,960	-	39,035	Level I
Investment Company of America	34,160	3,511	-	37,671	Level I
Mutual Discovery	28,499	4,477	-	32,976	Level I
Lifecycle 2040	26,397	4,464	-	30,861	Level I
Royce Opportunity	22,483	7,889	-	30,372	Level I
PIMCO All Asset	25,511	3,644	-	29,155	Level I
Small Cap Index Fund	17,715	5,626	-	23,341	Level I
Mid Cap Index Fund	13,351	7,542	-	20,893	Level I
Mutual Beacon	19,328	1,198	-	20,526	Level I
MFS Utilities	15,005	4,342	-	19,347	Level I
Lifecycle 2045	16,526	2,639	-	19,165	Level I
Intl Small Cap Fund	12,340	6,444	-	18,784	Level I
American Balanced Fund	16,244	2,393	-	18,637	Level I
Lifecycle 2015	15,522	2,535	-	18,057	Level I
TRP EQ Inc.	12,509	4,547	-	17,056	Level I
Columbia Value & Restructuring	14,523	2,397	-	16,920	Level I
VS Str Inc	14,510	1,059	-	15,569	Level I
VS Blu Chip	13,166	2,249	-	15,415	Level I
T. Rowe Price Spectrum Inc	13,065	2,128	-	15,193	Level I
Real Estate Securities fund	10,408	3,194	-	13,602	Level I
Optimized Value Fund	11,034	1,682	-	12,716	Level I
T. Rowe Price Health Sci	9,811	2,157	-	11,968	Level I
Lord Abbett Mid Cap Value (JPM Mc	9,875	2,062	-	11,937	Level I
VS SC Tec	9,052	2,595	-	11,647	Level I
Total Stock Market Index Fund	7,830	2,327	-	10,157	Level I
Sci Tech	7,903	1,742	-	9,645	Level I
Lifecycle 2035	8,042	1,356	-	9,398	Level I
VS Financial	8,778	456	-	9,234	Level I
500 Index Fund	7,303	942	-	8,245	Level I
VS Small Val	6,022	1,178	-	7,200	Level I
BlackRock Large Value	5,665	798	-	6,463	Level I
Small Cap Growth Index	4,343	1,704	-	6,047	Level I
Explorer	4,204	1,631	-	5,835	Level I

NOTES TO FINANCIAL STATEMENTS

NOTE 3 - INVESTMENTS - continued

As of December 31, 2010:	Amortized Cost	Unrealized Gain	Unrealized Loss	Market Value	Fair value Source
VS Cap App	4,807	328	-	5,135	Level I
International Value Fund	4,224	90	-	4,314	Level I
Templeton World	3,953	160	-	4,113	Level I
Small Cap Opportunities Fund	2,318	1,115	-	3,433	Level I
BRGLEBALL	2,246	140	-	2,386	Level I
VS ALLCPVL	1,327	157	-	1,484	Level I
Domini Social Equity	356	(9)	-	347	Level I
Small Growth	286	47	-	333	Level I
Vista	56	-	-	56	Level I
Lifecycle 2010	35	3	-	38	Level I
	$ 4,713,131	$ 945,940	$ -	$ 5,659,071	

NOTE 4: RECONGNIZED GAINS AND LOSSES ON INVESTMENTS

In accordance with DOL rule 29 CFR 2520.103-5 (c) the plan administrator certified the accuracy and completeness of information relative to plan investments which was not subjected to audit. During 2011, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) increased in value as follows:

Common/ Collective Funds	Recognized Gains (Losses)
Lifecycle 2010	(38)
Lifecycle 2015	(528)
Lifecycle 2020	(4,285)
Lifecycle 2025	920
Lifecycle 2030	(8,525)
Lifecycle 2035	(3,120)
Lifecycle 2040	(3,212)
Lifecycle 2045	(1,635)
RL at 2050	(7)
Lifestyle Conservative	3,364
Lifestyle Moderate	267
Lifestyle Balanced	(36,132)
Lifestyle Growth	(87,602)
Lifestyle Aggressive	(35,413)
John Hancock Stable Val	3,990
PIMCO Total Return	5,072
PIMCO Global Bond	3,864
T. Rowe Price Spectrum Inc	815
John Hancock Strategic Inc	-
LM Partners Glb High Yield	3,199
PIMCO All Asset	359
American Balanced Fund	996
Washington Mutual Investors	2,413
Investment Company of America	(1,922)
Davis New York Venture	(3,772)
Mutual Beacon	(1,098)

NOTES TO FINANCIAL STATEMENTS

NOTE 4: RECONGNIZED GAINS AND LOSSES ON INVESTMENTS – continued

Common/ Collective Funds	Recognized Gains (Losses)
TRP EQ Inc.	(1,648)
Mutual Discovery	(618)
Lord Abbett Mid Cap Value (JPM Mcvalu)	219
MFS Utilities	2,155
BlackRock Large Value	691
Columbia Value & Restructuring	(2,249)
The Growth Fund of America	(5,836)
Templeton World	(1,421)
Oppenheimer Global	(3,274)
EuroPacific Growth Fund	(12,768)
SM-MD GRTH	(5)
Heritage	(5,214)
Energy	(1,348)
Small Cap Growth Index	(4,805)
US Small Cap	(2,754)
Sci Tech	(440)
Royce Opportunity	(5,513)
Explorer	(835)
T. Rowe Price Health Sci	1,443
Oppenheimer Development Mkt	(14,802)
Optimized Value Fund	140
500 Index Fund	51
Small Cap Opportunities Fund	(136)
VS Small Val	92
Real Est. Securities Fund	1,224
Total Stock Market Index Fund	(30)
VS Blu Chip	(15)
Mid Cap Index Fund	(1,180)
VS Mid Val	2,042
International Value Fund	(641)
Intl Equity Index Fund	(4,893)
Intl Small Cap Fund	(2,319)
VS SC Tec	(3,020)
VS Financial	(1,134)
VS High Yield	(1,183)
VS ALLCPVL	(67)
VS Cap App	(111)
Small Growth	(23)
Vista	533
VS Str Inc	240
BRGLEBALL	(1,032)
Mid Cap Stock Fund	(6,750)
Small Cap Index Fund	(1,034)
10 yr Comp	4,087
Net recognized valuation losses and fees	(236,211)
Transaction fees	46,093
Net recognized valuation losses	$ (190,118)

NOTES TO FINANCIAL STATEMENTS

NOTE 5: FAIR VALUE MEASUREMENT

In accordance with DOL rule 29 CFR 2520.103-5 (c) the plan administrator certified the accuracy and completeness of information relative to plan investments which was not subjected to audit. During the year ended December 31, 2011 there were no transfers between fair value classifications. Following is a tabular format table of changes in fair value classifications:

	Value based on Active Market Quotes (Level I)	Significant Observable inputs (Level II)	Significant Unobservable inputs (Level III)	Total
As of December 31, 2010				
Investments in Common Collective funds	$ 5,454,684	$ 204,387	$ -	$ 5,659,071
Participant loans	-	-	149,386	149,386
Total as of December 31, 2010	5,454,684	204,387	149,386	5,808,457
Purchases	1,633,874	72,784	145,786	1,852,444
Sales/ redemptions	(568,177)	-	(105,593)	(673,770)
Loan defaults deemed as distributions	-	-	(22,765)	(22,765)
Settlement of loans by distribution	-	-	(1,243)	(1,243)
Recognized gains (losses)	(194,205)	4,087	-	(190,118)
As of December 31, 2011				
Investments in Common Collective funds	6,326,176	281,258	-	6,607,434
Participant loans	-	-	165,571	165,571
Total as of December 31, 2011	$ 6,326,176	$ 281,258	$ 165,571	$ 6,773,005

NOTE 6: PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts with respect to Company contributions. It is management's intention to continue the Plan.

NOTE 7: RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following table reconciles the investment income reported in the financial statements to Schedule H of the Form 5500:

	Per Finacial Statement	Per 5500 Sch H
Net investment loss	(190,118)	(195,744)
Other income	-	5,626
	(190,118)	(190,118)

NOTE 8: 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 risks 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 the participantsô account balances and the amounts reported in the statement of net assets available for benefits.

See Note 3 for concentrations of plan investment securities.

NOTE 9: TAX STATUS

The Internal Revenue Service has determined and informed the Company by letter dated October 29, 2001, that the Plan is designed in accordance with applicable sections of the Internal Revenue Code. 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.

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS HELD FOR INVESTMETNS
AS OF DECEMBER 31, 2011

a)	b) Identity of issue, borrower, lessor, or similar party	c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	d) Cost	e) Current Value
	Lifestyle Growth	Common/Collective fund	1,375,014	1,505,575
	Lifestyle Balanced	Common/Collective fund	1,052,782	1,186,903
	Lifestyle Aggressive	Common/Collective fund	426,405	461,019
	John Hancock Stable Val	Common/Collective fund	395,946	406,363
	Lifestyle Moderate	Common/Collective fund	290,824	344,577
	10 Yr Comp	Common/Collective fund	281,259	281,259
	PIMCO Total Return	Common/Collective fund	234,429	250,296
	Lifecycle 2020	Common/Collective fund	172,707	229,543
	Lifestyle Conservative	Common/Collective fund	196,422	222,544
	Lifecycle 2030	Common/Collective fund	112,146	136,040
	PIMCO Global Bond	Common/Collective fund	75,071	85,785
	Energy	Common/Collective fund	76,299	79,085
	EuroPacific Growth Fund	Common/Collective fund	68,358	64,109
	US Small Cap	Common/Collective fund	52,296	61,668
	American Balanced Fund	Common/Collective fund	56,602	60,416
	The Growth Fund of America	Common/Collective fund	57,362	60,147
	MFS Utilities	Common/Collective fund	53,265	59,957
	Lifecycle 2025	Common/Collective fund	54,543	58,245
	Royce Opportunity	Common/Collective fund	55,564	57,955
	Davis New York Venture	Common/Collective fund	53,760	57,611
	Mid Cap Stock Fund	Common/Collective fund	53,221	52,799
	Washington Mutual Investors	Common/Collective fund	44,964	51,745
	Lifecycle 2035	Common/Collective fund	49,493	50,056
	Investment Company of America	Common/Collective fund	41,022	43,223
	T. Rowe Price Spectrum Inc	Common/Collective fund	38,845	41,975
	TRP EQ Inc.	Common/Collective fund	37,997	41,011
	Lifecycle 2040	Common/Collective fund	38,576	40,472
	Oppenheimer Development Mkt	Common/Collective fund	38,072	39,896
	Mid Cap Index Fund	Common/Collective fund	29,348	35,911
	BRGLEBALL	Common/Collective fund	33,739	32,901
	Mutual Discovery	Common/Collective fund	29,117	31,561
	Small Cap Growth Index	Common/Collective fund	32,073	30,850
	Lord Abbett Mid Cap Value (JPM Mcvalu)	Common/Collective fund	28,270	30,576
	Intl Equity Index Fund	Common/Collective fund	29,738	29,216
	T. Rowe Price Health Sci	Common/Collective fund	24,217	27,813
	Small Cap Index Fund	Common/Collective fund	25,222	27,773
	Lifecycle 2015	Common/Collective fund	25,153	27,310
	Lifecycle 2045	Common/Collective fund	24,328	24,265
	VS Blu Chip	Common/Collective fund	20,403	22,734
	PIMCO All Asset	Common/Collective fund	19,267	21,545
	Explorer	Common/Collective fund	20,011	20,924
	Columbia Value & Restructuring	Common/Collective fund	19,050	19,295
	VS High Yield	Common/Collective fund	19,285	18,564
	Mutual Beacon	Common/Collective fund	15,600	15,959
	Optimized Value Fund	Common/Collective fund	13,832	15,726
	Real Est. Securities Fund	Common/Collective fund	11,716	15,586

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS HELD FOR INVESTMETNS
AS OF DECEMBER 31, 2011

a)	b) Identity of issue, borrower, lessor, or similar party	c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	d) Cost	e) Current Value
	VS Str Inc	Common/Collective fund	12,815	12,571
	Heritage	Common/Collective fund	14,029	12,468
	500 Index Fund	Common/Collective fund	11,372	12,387
	VS Financial	Common/Collective fund	12,694	12,055
	Intl Small Cap Fund	Common/Collective fund	9,903	11,108
	VS Small Val	Common/Collective fund	9,737	11,001
	Total Stock Market Index Fund	Common/Collective fund	8,348	10,690
	Templeton World	Common/Collective fund	10,723	9,876
	Sci Tech	Common/Collective fund	8,683	9,389
	VS Cap App	Common/Collective fund	7,200	7,417
	Oppenheimer Global	Common/Collective fund	4,282	4,484
	Small Cap Opportunities Fund	Common/Collective fund	3,085	4,080
	VS SC Tec	Common/Collective fund	4,227	3,806
	International Value Fund	Common/Collective fund	2,716	2,437
	VS ALLCPVL	Common/Collective fund	2,229	2,249
	SM-MD GRTH	Common/Collective fund	880	887
	RL at 2050	Common/Collective fund	828	833
	Small Growth	Common/Collective fund	537	565
	Domini Social Equity	Common/Collective fund	354	348
	Save-More Drug Inc. 401(k) plan loans secured by participant accrued benefits	Participant loans, 4.25 --8.25, bi monthly payments from payroll dedection	165,571	165,571
	Total		$ 6,193,826	$ 6,773,005

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF
FOR THE YEAR ENDED DECEMBER 31, 2011

a) Identity of issue, borrower, lessor, or similar party	d) Cost of Acquisition	e) Proceeds of Dispositions
Lifecycle 2010	$ -	$ 30
Lifecycle 2015	9,253	-
Lifecycle 2020	23,923	58,890
Lifecycle 2025	15,918	54,985
Lifecycle 2030	34,444	-
Lifecycle 2035	40,658	-
Lifecycle 2040	12,961	3,350
Lifecycle 2045	14,948	9,848
RL at 2050	833	-
Lifestyle Conservative	37,956	3,478
Lifestyle Moderate	46,617	12,963
Lifestyle Balanced	187,065	56,116
Lifestyle Growth	221,450	82,305
Lifestyle Aggressive	55,594	17,498
John Hancock Stable Val	269,441	12,569
PIMCO Total Return	96,948	18,383
PIMCO Global Bond	46,749	-
T. Rowe Price Spectrum Inc	26,782	-
LM Partners Glb High Yield	6,594	69,331
PIMCO All Asset	4,748	12,358
American Balanced Fund	41,779	-
Washington Mutual Investors	21,094	9,482
Investment Company of America	11,766	6,214
Davis New York Venture	14,920	11,005
Mutual Beacon	4,321	8,887
TRP EQ Inc.	23,955	-
Mutual Discovery	7,673	9,087
Lord Abbett Mid Cap Value (JPM Mcvalu)	22,003	3,365
MFS Utilities	40,610	-
BlackRock Large Value	1,891	8,924
Columbia Value & Restructuring	2,375	-
The Growth Fund of America	16,958	41,436
Templeton World	5,762	-
Oppenheimer Global	1,719	54,160
EuroPacific Growth Fund	5,208	38,398
SM-MD GRTH	887	-
Heritage	12,468	-
Energy	15,255	2,431
Small Cap Growth Index	24,803	-
US Small Cap	21,015	-
Sci Tech	980	1,235
Royce Opportunity	27,583	-
Explorer	15,089	-
T. Rowe Price Health Sci	15,845	-
Oppenheimer Development Mkt	5,324	54,333
Optimized Value Fund	3,011	-
500 Index Fund	4,142	-

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF
FOR THE YEAR ENDED DECEMBER 31, 2011

a) Identity of issue, borrower, lessor, or similar party	d) Cost of Acquisition	e) Proceeds of Dispositions
Small Cap Opportunities Fund	647	-
VS Small Val	4,025	224
Real Est. Securities Fund	3,420	1,436
Total Stock Market Index Fund	534	-
VS Blu Chip	7,318	-
Mid Cap Index Fund	15,018	-
VS Mid Val	5,015	50,352
International Value Fund	474	2,350
Intl Equity Index Fund	1,454	20,010
Intl Small Cap Fund	999	8,675
VS SC Tec	-	7,841
VS Financial	3,016	195
VS High Yield	18,564	-
VS ALLCPVL	978	213
VS Cap App	2,282	-
Small Growth	280	48
Vista	906	962
VS Str Inc	6,016	9,015
BRGLEBALL	31,085	-
Mid Cap Stock Fund	6,093	-
Small Cap Index Fund	4,432	-
10 Yr Comp	76,871	-
Participant loans 1	145,787	129,601
	$ 1,856,532	$ 891,983

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS HELD FOR INVESTMETNS
AS OF DECEMBER 31, 2011

a)	b) Identity of issue, borrower, lessor, or similar party	c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	d) Cost	e) Current Value
	Lifestyle Growth	Common/Collective fund	1,375,014	1,505,575
	Lifestyle Balanced	Common/Collective fund	1,052,782	1,186,903
	Lifestyle Aggressive	Common/Collective fund	426,405	461,019
	John Hancock Stable Val	Common/Collective fund	395,946	406,363
	Lifestyle Moderate	Common/Collective fund	290,824	344,577
	10 Yr Comp	Common/Collective fund	281,259	281,259
	PIMCO Total Return	Common/Collective fund	234,429	250,296
	Lifecycle 2020	Common/Collective fund	172,707	229,543
	Lifestyle Conservative	Common/Collective fund	196,422	222,544
	Lifecycle 2030	Common/Collective fund	112,146	136,040
	PIMCO Global Bond	Common/Collective fund	75,071	85,785
	Energy	Common/Collective fund	76,299	79,085
	EuroPacific Growth Fund	Common/Collective fund	68,358	64,109
	US Small Cap	Common/Collective fund	52,296	61,668
	American Balanced Fund	Common/Collective fund	56,602	60,416
	The Growth Fund of America	Common/Collective fund	57,362	60,147
	MFS Utilities	Common/Collective fund	53,265	59,957
	Lifecycle 2025	Common/Collective fund	54,543	58,245
	Royce Opportunity	Common/Collective fund	55,564	57,955
	Davis New York Venture	Common/Collective fund	53,760	57,611
	Mid Cap Stock Fund	Common/Collective fund	53,221	52,799
	Washington Mutual Investors	Common/Collective fund	44,964	51,745
	Lifecycle 2035	Common/Collective fund	49,493	50,056
	Investment Company of America	Common/Collective fund	41,022	43,223
	T. Rowe Price Spectrum Inc	Common/Collective fund	38,845	41,975
	TRP EQ Inc.	Common/Collective fund	37,997	41,011
	Lifecycle 2040	Common/Collective fund	38,576	40,472
	Oppenheimer Development Mkt	Common/Collective fund	38,072	39,896
	Mid Cap Index Fund	Common/Collective fund	29,348	35,911
	BRGLEBALL	Common/Collective fund	33,739	32,901
	Mutual Discovery	Common/Collective fund	29,117	31,561
	Small Cap Growth Index	Common/Collective fund	32,073	30,850
	Lord Abbett Mid Cap Value (JPM Mcvalu)	Common/Collective fund	28,270	30,576
	Intl Equity Index Fund	Common/Collective fund	29,738	29,216
	T. Rowe Price Health Sci	Common/Collective fund	24,217	27,813
	Small Cap Index Fund	Common/Collective fund	25,222	27,773
	Lifecycle 2015	Common/Collective fund	25,153	27,310
	Lifecycle 2045	Common/Collective fund	24,328	24,265
	VS Blu Chip	Common/Collective fund	20,403	22,734
	PIMCO All Asset	Common/Collective fund	19,267	21,545
	Explorer	Common/Collective fund	20,011	20,924
	Columbia Value & Restructuring	Common/Collective fund	19,050	19,295
	VS High Yield	Common/Collective fund	19,285	18,564
	Mutual Beacon	Common/Collective fund	15,600	15,959
	Optimized Value Fund	Common/Collective fund	13,832	15,726
	Real Est. Securities Fund	Common/Collective fund	11,716	15,586

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS HELD FOR INVESTMETNS
AS OF DECEMBER 31, 2011

a)	b) Identity of issue, borrower, lessor, or similar party	c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	d) Cost	e) Current Value
	VS Str Inc	Common/Collective fund	12,815	12,571
	Heritage	Common/Collective fund	14,029	12,468
	500 Index Fund	Common/Collective fund	11,372	12,387
	VS Financial	Common/Collective fund	12,694	12,055
	Intl Small Cap Fund	Common/Collective fund	9,903	11,108
	VS Small Val	Common/Collective fund	9,737	11,001
	Total Stock Market Index Fund	Common/Collective fund	8,348	10,690
	Templeton World	Common/Collective fund	10,723	9,876
	Sci Tech	Common/Collective fund	8,683	9,389
	VS Cap App	Common/Collective fund	7,200	7,417
	Oppenheimer Global	Common/Collective fund	4,282	4,484
	Small Cap Opportunities Fund	Common/Collective fund	3,085	4,080
	VS SC Tec	Common/Collective fund	4,227	3,806
	International Value Fund	Common/Collective fund	2,716	2,437
	VS ALLCPVL	Common/Collective fund	2,229	2,249
	SM-MD GRTH	Common/Collective fund	880	887
	RL at 2050	Common/Collective fund	828	833
	Small Growth	Common/Collective fund	537	565
	Domini Social Equity	Common/Collective fund	354	348
	Save-More Drug Inc. 401(k) plan loans secured by participant accrued benefits	Participant loans, 4.25 --8.25, bi monthly payments from payroll dedection	165,571	165,571
	Total		$ 6,193,826	$ 6,773,005

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF
FOR THE YEAR ENDED DECEMBER 31, 2011

a) Identity of issue, borrower, lessor, or similar party	d) Cost of Acquisition	e) Proceeds of Dispositions
Lifecycle 2010	$ -	$ 30
Lifecycle 2015	9,253	-
Lifecycle 2020	23,923	58,890
Lifecycle 2025	15,918	54,985
Lifecycle 2030	34,444	-
Lifecycle 2035	40,658	-
Lifecycle 2040	12,961	3,350
Lifecycle 2045	14,948	9,848
RL at 2050	833	-
Lifestyle Conservative	37,956	3,478
Lifestyle Moderate	46,617	12,963
Lifestyle Balanced	187,065	56,116
Lifestyle Growth	221,450	82,305
Lifestyle Aggressive	55,594	17,498
John Hancock Stable Val	269,441	12,569
PIMCO Total Return	96,948	18,383
PIMCO Global Bond	46,749	-
T. Rowe Price Spectrum Inc	26,782	-
LM Partners Glb High Yield	6,594	69,331
PIMCO All Asset	4,748	12,358
American Balanced Fund	41,779	-
Washington Mutual Investors	21,094	9,482
Investment Company of America	11,766	6,214
Davis New York Venture	14,920	11,005
Mutual Beacon	4,321	8,887
TRP EQ Inc.	23,955	-
Mutual Discovery	7,673	9,087
Lord Abbett Mid Cap Value (JPM Mcvalu)	22,003	3,365
MFS Utilities	40,610	-
BlackRock Large Value	1,891	8,924
Columbia Value & Restructuring	2,375	-
The Growth Fund of America	16,958	41,436
Templeton World	5,762	-
Oppenheimer Global	1,719	54,160
EuroPacific Growth Fund	5,208	38,398
SM-MD GRTH	887	-
Heritage	12,468	-
Energy	15,255	2,431
Small Cap Growth Index	24,803	-
US Small Cap	21,015	-
Sci Tech	980	1,235
Royce Opportunity	27,583	-
Explorer	15,089	-
T. Rowe Price Health Sci	15,845	-
Oppenheimer Development Mkt	5,324	54,333
Optimized Value Fund	3,011	-
500 Index Fund	4,142	-

SAV-MORE DRUG, INC. 401(k) PROFIT SHARING PLAN
EIN 75-2047264

SCHEDULE OF ASSETS ACQUIRED AND DISPOSED OF
FOR THE YEAR ENDED DECEMBER 31, 2011

a) Identity of issue, borrower, lessor, or similar party	d) Cost of Acquisition	e) Proceeds of Dispositions
Small Cap Opportunities Fund	647	-
VS Small Val	4,025	224
Real Est. Securities Fund	3,420	1,436
Total Stock Market Index Fund	534	-
VS Blu Chip	7,318	-
Mid Cap Index Fund	15,018	-
VS Mid Val	5,015	50,352
International Value Fund	474	2,350
Intl Equity Index Fund	1,454	20,010
Intl Small Cap Fund	999	8,675
VS SC Tec	-	7,841
VS Financial	3,016	195
VS High Yield	18,564	-
VS ALLCPVL	978	213
VS Cap App	2,282	-
Small Growth	280	48
Vista	906	962
VS Str Inc	6,016	9,015
BRGLEBALL	31,085	-
Mid Cap Stock Fund	6,093	-
Small Cap Index Fund	4,432	-
10 Yr Comp	76,871	-
Participant loans 1	145,787	129,601
	$ 1,856,532	$ 891,983