

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2011</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information—enter all requested information		
1a	Name of plan <u>THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN</u>	1b	Three-digit plan number (PN) ▶ <u>041</u>
		1c	Effective date of plan <u>01/01/1991</u>
	2a	2b	Employer Identification Number (EIN) <u>74-3213641</u>
			2c
		2d	Business code (see instructions) <u>115210</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/12/2012	KELLY HAYERTZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2012	THOMAS STONTZ
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") ASSOCIATED BENEFITS CORPORATION 1415 28TH STREET, SUITE 100 WEST DES MOINES, IA 50266-1450	3b Administrator's EIN 42-1279416 3c Administrator's telephone number 515-226-0303
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	622
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	417
b Retired or separated participants receiving benefits.....	6b	2
c Other retired or separated participants entitled to future benefits.....	6c	141
d Subtotal. Add lines 6a , 6b , and 6c	6d	560
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	2
f Total. Add lines 6d and 6e	6f	562
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	421
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	39

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2F 2G 2J 2K 2E 2S 2T

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) ☐ Insurance	(1) ☐ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts	(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust	(3) ☒ Trust
(4) ☐ General assets of the sponsor	(4) ☐ General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

A Name of plan <u>THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>041</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SWISS VALLEY FARMS COOPERATIVE</u>	D Employer Identification Number (EIN) <u>74-3213641</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>THE VANGUARD GROUP, INC.</u>	<u>PO BOX 2600</u> <u>VALLEY FORGE, PA 19482</u>
<u>23-1945930</u>	

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation	
<u>GALLIARD CAPITAL MANAGEMENT, INC.</u>	
<u>41-1813702</u>	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>RUSSELL TRUST COMPANY</u>	
<u>91-1116938</u>	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
<u>MONUMENTAL LIFE INSURANCE CO.</u>	<u>4333 EDGEWOOD RD NE</u> <u>CEDAR RAPIDS, IA 52499</u>

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

BANK OF AMERICA, N.A.

100 NORTH TYRON ST.
SUITE 220
CHARLOTTE, NC 28202-4031

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

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

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

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

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

WELLS FARGO BANK, N.A.

41-6257133

(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?
21 24 37 64 65	TRUSTEE BANK	24406	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

ASSOCIATED BENEFITS CORPORATION

42-1279416

(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?
14	PLAN ADMINISTRATOR	5832	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PIMCO LLC

840 NEWPORT CENTER DR.
SUITE 100
NEWPORT BEACH, CA 92660

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	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)

COLUMBIA WANGER ASSET MANAGE., LLC

W MONROE ST STE 3000
CHICAGO, IL 60606

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

COLUMBIA MANAGEMENT ADVISORS, LLC

100 FEDERAL ST
BOSTON, MA 02110

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

INVESCO ADVISORS, INC.

98-0557567

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	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)

JP MORGAN INVESTMENT MANAGEMENT INC

13-3200244

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

MASSACHUSETTS FINANCIAL SERVICES CO

04-2747644

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

PRINCIPAL GLOBAL INVESTORS LLC

801 GRAND AVENUE
DES MOINES, IA 50392-0490

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	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)

CAPITAL RESEARCH & MANAGEMENT CO.

95-1411037

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

ARTIO GLOBAL MANAGEMENT LLC

26-1421410

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

WELLS FARGO FUNDS MANAGEMENT, LLC

525 MARKET ST, 12TH FLOOR
SAN FRANCISCO, CA 94105

(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?
28 52	NONE	0	Yes ☒ No ☐	Yes ☐ No ☒	0	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

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:

<div>SCHEDULE D (Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div>		<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2011</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011					
A Name of plan THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN				B Three-digit plan number (PN) ▶ 041	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 SWISS VALLEY FARMS COOPERATIVE				D Employer Identification Number (EIN) 74-3213641	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO STABLE RET FUND FOR EBT					
b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.					
c EIN-PN 41-6202499-001		d Entity code C		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1110092	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code		e Dollar value	

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

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 <u>01/01/2011</u> and ending <u>12/31/2011</u>		
A Name of plan <u>THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>041</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SWISS VALLEY FARMS COOPERATIVE</u>	D Employer Identification Number (EIN) <u>74-3213641</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	294807	277638
(2) U.S. Government securities.....	1c(2)	4484344	4608843
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	828948	882375
(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)	306546	346785
(9) Value of interest in common/collective trusts.....	1c(9)	795859	1110092
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	13655804	12745388
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	2498	4884

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	20368806	19976005

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	20368806	19976005
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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)	1011213	
(B) Participants	2a(1)(B)	839237	
(C) Others (including rollovers)	2a(1)(C)	21195	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1871645
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	2480	
(B) U.S. Government securities	2b(1)(B)	41173	
(C) Corporate debt instruments	2b(1)(C)	7883	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	11295	
(F) Other	2b(1)(F)	44	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		62875
(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)	-3047	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		-3047
(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)		174579
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-134301
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1971751

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1942146	
(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)		1942146
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	5832	
(3) Investment advisory and management fees	2i(3)	24406	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		30238
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1972384

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-633
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		392168

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: **DELOITTE & TOUCHE LLP** (2) EIN: **13-3891517**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		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)

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN

5b(2) EIN(s)	5b(3) PN(s)
80-0573027	041

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

A Name of plan <u>THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>041</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SWISS VALLEY FARMS COOPERATIVE</u>	D Employer Identification Number (EIN) <u>74-3213641</u>

Part I	Distributions
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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	<u>0</u>
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): <u>41-6257133</u>		
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 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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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
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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
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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.
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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): _____

The Swiss Valley Farms Cooperative Employee Retirement Plan

Administered By Associated Benefits Corporation
Employer Identification Number: 74-3213641
Plan Number: 041

Financial Statements — Modified Cash Basis as of
December 31, 2011 and 2010 and for the Years Then
Ended, Supplemental Schedule as of December 31, 2011
and Independent Auditors' Report

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered By Associated Benefits Corporation

TABLE OF CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS AS OF DECEMBER 31, 2011 AND 2010 AND FOR THE YEARS THEN ENDED:	
Statements of Net Assets Available for Benefits — Modified Cash Basis	2
Statements of Changes in Net Assets Available for Benefits — Modified Cash Basis	3
Notes to Financial Statements — Modified Cash Basis	4–13
SUPPLEMENTAL SCHEDULE:	14
Form 5500, Schedule H, Part IV, Line 4i — Schedule of Assets (Held at End of Year)	15–19
NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.	

INDEPENDENT AUDITORS' REPORT

To the Board of Directors
Associated Benefits Corporation
Plan Administrator for The Swiss Valley Farms Cooperative
Employee Retirement Plan and Participants:

We were engaged to audit the financial statements — modified cash basis and supplemental schedule of The Swiss Valley Farms Cooperative Employee Retirement Plan (the Plan) as of December 31, 2011 and 2010, and for the years then ended, listed in the Table of Contents. These financial statements and supplemental schedule are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 8, which was certified by Wells Fargo Bank, n.a., the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. 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 certifications from the trustee that the information as of and for the years ended December 31, 2011 and 2010 provided to the plan administrator by the trustee is complete and accurate.

As described in Note 2 to the financial statements, these financial statements were prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

Because of the significance of the information that we did not audit, we are unable to express, and we do not express, an opinion on the accompanying financial statements - modified cash basis and supplemental schedule. The supplemental schedule is presented for the purposes of additional analysis and is not a required part of the financial statements - modified cash basis but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements - modified cash basis and supplemental schedule, 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.

Deloitte & Touche LLP

September 21, 2012

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered by Associated Benefits Corporation

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS — MODIFIED CASH BASIS
DECEMBER 31, 2011 AND 2010

	2011	2010
ASSETS		
PARTICIPANT-DIRECTED INVESTMENTS:		
At fair value as determined by quoted market price	\$ 12,745,388	\$ 13,655,804
At estimated fair value	<u>6,883,832</u>	<u>6,406,456</u>
Participant-directed investments	19,629,220	20,062,260
NOTES RECEIVABLE FROM PARTICIPANTS	<u>346,785</u>	<u>306,546</u>
NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE	19,976,005	20,368,806
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS	<u>(367,520)</u>	<u>(202,858)</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 19,608,485</u>	<u>\$ 20,165,948</u>

See notes to financial statements — modified cash basis.

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered By Associated Benefits Corporation

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS —
MODIFIED CASH BASIS
FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010**

	2011	2010
ADDITIONS:		
Investment income	\$ -	\$ 1,905,075
Interest income on notes receivable from participants	11,295	15,404
Contributions:		
Employer's	1,011,213	1,111,929
Participants'	839,237	861,822
Net rollover assets transferred	<u>21,195</u>	<u>54,430</u>
Total additions	<u>1,882,940</u>	<u>3,948,660</u>
DEDUCTIONS:		
Investment loss	75,851	
Benefits paid to participants	1,942,146	2,155,962
Spin-off of assets	392,168	
Administrative expenses	<u>30,238</u>	<u>28,110</u>
Total deductions	<u>2,440,403</u>	<u>2,184,072</u>
NET CHANGE	(557,463)	1,764,588
NET ASSETS AVAILABLE FOR BENEFITS:		
BEGINNING OF YEAR	<u>20,165,948</u>	<u>18,401,360</u>
END OF YEAR	<u>\$ 19,608,485</u>	<u>\$ 20,165,948</u>

See notes to financial statements — modified cash basis.

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN

Administered By Associated Benefits Corporation

NOTES TO FINANCIAL STATEMENTS — MODIFIED CASH BASIS AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010

1. DESCRIPTION OF THE PLAN

The Swiss Valley Farms Cooperative Employee Retirement Plan (Participating Employer – Swiss Valley Farms, Co.) (“Plan”) is a defined contribution plan administered by Associated Benefits Corporation (“Plan Administrator”). The following description of the Plan provides only general information. Participants should refer to the Plan document for more complete information.

General — The Plan is a defined contribution plan available to all full-time employees of the participating employer who have attained age 18 and completed 60 days of service. Wells Fargo Bank, n.a. (“Trustee”) serves as the trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions — Each year, participants may contribute up to 80 percent of their compensation on a pre-tax basis, as defined in the Plan, subject to certain Internal Revenue Code (IRC) limitations. In addition, after-tax contributions to the Plan are permitted up to the limits allowed by law. The participating employer contributes 50 percent of the first 6 percent of base compensation that a participant contributes to the Plan. An additional contribution is made into the accounts of those participants who were participants in the employer’s pension plan that was frozen on December 31, 2003. This additional contribution has two components. The first component is computed at various percentages of the participants’ compensation based on the age of each participant. The second component is computed at various percentages of the participants’ compensation based on the age and years of service of each participant as of December 31, 2003.

Participant Accounts — Individual accounts are maintained for each Plan participant. Each participant’s account is credited with the participant’s and employer contributions and an allocation of Plan earnings (losses) and charged with withdrawals and an allocation of administrative expenses. Allocations are based on participant account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Investments — Participants direct the investment of their contributions and employer contributions into any combination of the investment alternatives offered by the Plan in multiples of one percent. Plan participants may transfer funds from one investment fund to another. Transfers are effective the day made or the next business day.

Vesting — Participants are immediately vested in their contributions and earnings (losses) thereon. Participants hired prior to October 1, 2009 are immediately vested in the employer contributions and earnings (losses) thereon. Participants hired subsequent to October 1, 2009 become vested in the employer contributions and earnings thereon at a rate of 20 percent per year.

Notes Receivable from Participants — Participants may borrow from their fund accounts, subject to balance limitations. The repayment period for the loans is not to exceed five years, or fifteen years if the loan is for the purchase of the participant’s principal residence. The loans are secured by the balance in the participant’s account. The interest rate charged on the loans is one percentage point above the prime rate. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits — On termination of service, a participant may elect to receive either a lump-sum payment equal to the value of his or her vested account, or installment payments over various periods as elected by the participant.

Forfeited Accounts — At December 31, 2011 and 2010, forfeited nonvested accounts totaled \$1,799 and \$2,066, respectively. These accounts will be used to reduce future employer contributions. During the year ended December 31, 2011 and 2010, employer contributions were reduced by \$30,034 and \$31,786, respectively, from forfeited nonvested accounts.

Spin-off of Assets — Effective July 1, 2011, a plan for White Hill Cheese Company, LLC (Shullsburg, Wisconsin) was formed with assets of \$392,168 spun out of the Plan, shown as spin-off of assets

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting — The accompanying financial statements have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). Under the modified cash basis of accounting, transactions are recorded in the financial statements on the cash receipts and disbursement basis; however, investments are adjusted to fair value. Accordingly, these statements are not intended to present the Plan's financial position or changes in financial position in conformity with GAAP. The principal differences in the Plan's statements relate to investment income and contributions, which are not recorded until received.

Use of Estimates — The preparation of financial statements in conformity with the modified cash basis of accounting, which is a comprehensive basis of accounting other than GAAP, requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties — The Plan utilizes various investment securities, including U.S. government securities, corporate debt instruments, and mutual funds. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

Investment Valuation and Income Recognition — Investments are stated at fair value. Fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for a description of valuation methods. Purchases and sales of securities are recorded on a trade-date basis. Dividend and interest income are recorded as received. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

The general fund is a stabilized fixed income portfolio managed by the Trustee. The objective of the general fund is to produce stable returns that are usually higher than traditional money market investments. The general fund usually experiences little or no fluctuation in principal value as it is invested predominately in direct obligations of the U.S. Government and U.S. Government Agencies. The general fund is stated at fair value and then adjusted to contract value as described below.

In accordance with GAAP, the general fund is included at fair value in participant-directed investments in the statements of net assets available for benefits, and an additional line item is presented representing the adjustment from fair value to contract value. The statements of changes in net assets available for benefits are presented on a contract value basis.

Management fees and operating expenses charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of investment return for such investments.

Valuation of Investments (Investment Contracts) — The Plan's investment contracts with Bank of America, N.A. and Monumental Life Insurance Co. included in the general fund are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations.

Notes Receivable from Participants — Notes receivable from participants are valued at unpaid principal balance plus accrued but unpaid interest. Delinquent notes receivable from participants are recorded as distributions based on the terms of the Plan document.

Administrative Expenses — Administrative expenses of the Plan are paid by the Plan as provided in the Plan document. Certain fees are paid by the Plan Sponsor which are not reflected in the statements of changes in net assets available for benefits.

Payment of Benefits — Benefit payments to participants are recorded upon distribution. As of December 31, 2011 and 2010, net assets available for benefits included no benefits due to participants who had withdrawn from participation in the Plan but have not yet been paid.

New Accounting Standards — The accounting standard initially adopted in 2011 is described below.

ASU No. 2010-06 — In January 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2010-06, *Fair Value Measurements and Disclosures*, which amends ASC 820, *Fair Value Measurements and Disclosures*, adding a new disclosure requirement to provide Level 3 activity of purchases, sales, issuances, and settlements on a gross basis. This requirement is effective for fiscal years beginning after December 15, 2010. The adoption in 2011 did not materially affect the Plan's financial statements.

New Accounting Standards Not Yet Effective

ASU No. 2011-04 — In May 2011, the FASB issued ASU No. 2011-04, *Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRSs*, which amends ASC 820. ASU 2011-04 also requires the categorization by level for items that are only required to be disclosed at fair value and information about transfers between Level 1 and Level 2. In addition, the ASU provides guidance on measuring the fair value of financial instruments managed within a portfolio and the application of premiums and discounts on fair value measurements. The ASU requires additional disclosure for Level 3 measurements regarding the sensitivity of fair value to changes in unobservable inputs and any interrelationships between those inputs. The new guidance is effective for reporting periods beginning after December 15, 2011. The adoption will not have a material effect on the statement of net assets available for benefits and statement of changes in net assets available for benefits. Plan management has not determined the impact on the disclosures in the financial statements.

3. FAIR VALUE MEASUREMENTS

ASC 820, *Fair Value Measurements and Disclosures*, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value, as follows: Level 1, which refers to securities valued using unadjusted quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to

securities valued based on significant unobservable inputs. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

The Plan's policy is to recognize significant transfers between levels at the actual date of the event or change in circumstances that caused the transfer. For the years ended December 31, 2011 and 2010, there were no significant transfers in or out of Levels 1, 2 or 3.

Asset Valuation Techniques — Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

Shares of registered investment companies held are primarily categorized as Level 1; they are valued at quoted market prices that represent the net asset value of shares held at plan year-end.

U.S. common stocks are categorized as Level 1 if the securities trade on national or international exchanges and are valued at their last reported closing price.

The general fund is a stabilized fixed income portfolio managed by the Trustee. The underlying investments in the general fund are stated at estimated fair value based upon quoted market prices as of year end or yields available on comparable investments as determined and certified by the Trustee. The investment in the general fund is categorized as Level 2. The following table provides examples of inputs that are commonly relevant for valuing particular classes of fixed-income securities in which the Plan invests through the general fund. These classifications are not exclusive, and any of the inputs may be used to value any other class of fixed-income security.

Fixed-Income Class	Examples of Standard Inputs
Corporate bonds	Standard inputs and events affecting market sectors and individual issuer credit worthiness
U.S. Treasuries, U.S. government agencies, state and local obligations, non-US government securities	Standard inputs and Treasury curves and spreads
Mortgage backed securities, asset backed securities	Prepayment speeds, actual pool, and collateral information
All	Trade execution data, live trading levels, cash flows, bids, offers, quotes, spreads, indices, Treasury curves, observed market movements, volatility, specific terms and conditions (collectively referred to as "standard inputs")

The following tables set forth by level within the fair value hierarchy a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2011 and 2010.

Fair Value Measurements at December 31, 2011, Using				
	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
Mutual Funds:				
Domestic stock funds	\$ 8,575,486	\$ -	\$ -	\$ 8,575,486
International stock funds	947,603			947,603
Fixed income funds	998,438			998,438
Target retirement date funds	<u>2,223,861</u>			<u>2,223,861</u>
Total mutual funds	12,745,388	-	-	12,745,388
General fund		<u>6,883,832</u>		<u>6,883,832</u>
Total	<u>\$ 12,745,388</u>	<u>\$ 6,883,832</u>	<u>\$ -</u>	<u>\$ 19,629,220</u>

Fair Value Measurements at December 31, 2010, Using				
	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
Mutual Funds:				
Domestic stock funds	\$ 9,360,461	\$ -	\$ -	\$ 9,360,461
International stock funds	1,302,544			1,302,544
Fixed income funds	914,425			914,425
Target retirement date funds	<u>2,078,374</u>			<u>2,078,374</u>
Total mutual funds	13,655,804	-	-	13,655,804
General fund		<u>6,406,456</u>		<u>6,406,456</u>
Total	<u>\$ 13,655,804</u>	<u>\$ 6,406,456</u>	<u>\$ -</u>	<u>\$ 20,062,260</u>

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

4. INVESTMENTS

The Plan's investments that represented five percent or more of the Plan's net assets available for benefits as of December 31, 2011 and 2010, are as follows:

	2011	2010
Vanguard Institutional Index Fund	\$1,836,321	\$1,932,837
Artio International Equity Fund	*	1,302,544
MFS Value	1,132,175	1,277,184
American Funds Growth Fund of America — R6	2,472,324	2,919,038
Wells Fargo Stable Return Fund	1,110,092	*
JP Morgan Mid Cap Value Fund	1,014,620	1,109,304
PIMCO Total Return Institutional	998,438	*

* Balance did not exceed 5%.

General Fund — The general fund primarily invests in traditional guaranteed investment contracts (GICs) and security backed contracts issued by insurance companies and other financial institutions.

Traditional GICs are backed by the general account of the contract issuer. The general fund deposits a lump sum with the issuer and receives a guaranteed interest rate for a specified period. Interest is accrued on either a simple or fully compounded basis, and is paid either periodically or at the end of the contract term. The issuer guarantees that all qualified participant withdrawals will be at contract value (principal plus accrued interest).

A security backed contract is an investment contract issued by an insurance company or other financial institution, backed by a portfolio of bonds that are owned by the general fund. Security-backed contracts are considered either “targeted benchmark” (underlying investments are managed to a specific benchmark) or “targeted duration” (underlying investments are managed to a specific duration). The portfolio underlying the contract is maintained separately from the contract issuer's general assets, usually by a third party custodian. The interest crediting rate of a security-backed contract is based on the contract value, and the fair value, duration, and yield to maturity of the underlying portfolio. These contracts typically allow for realized and unrealized gains and losses on the underlying assets to be amortized, usually over the duration of the underlying investments, through adjustments to the future interest crediting rate, rather than reflected immediately in the net assets of the general fund. The issuer guarantees that all qualified participant withdrawals will be at contract value.

Risks arise when entering into any investment contract due to the potential inability of the issuer to meet the terms of the contract. In addition, security backed contracts have the risk of default or the lack of liquidity of the underlying portfolio assets.

The primary variables impacting the future crediting rates of security backed contracts include:

- The current yield of the assets underlying the contract
- The duration of the assets underlying the contract
- The existing difference between the fair value and contract value of the assets within the contract.

GICs provide a fixed rate of interest over the term to maturity of the contract, and therefore do not experience fluctuating crediting rates. The security backed contracts are designed to reset their respective crediting rates on a quarterly basis. GIC crediting rates are not reset. Security backed contracts cannot credit an interest rate that is less than 0%.

The crediting rate of security backed contracts will track current market yields on a trailing basis. The rate reset allows the contract value to converge with the fair value of the underlying portfolio over time, assuming the portfolio continues to earn the current yield for a period of time equal to the current portfolio duration.

To the extent that the underlying portfolio of a security backed contract has unrealized and/or realized losses, a positive adjustment is made to the adjustment from fair value to contract value under contract value accounting. As a result, the future crediting rate may be lower over time than the then current market rates. Similarly, if the underlying portfolio generates unrealized and/or realized gains, a negative adjustment is made to the adjustment from fair value to contract value, and the future crediting rate may be higher than the then current market rates.

Average Yields — The yield earned by the general fund at December 31, 2011 and 2010 was 3.41% and 3.59%, respectively. This represents the annualized earnings of all investments in the general fund divided by the fair value of all investments in the general fund at December 31, 2011 and 2010.

The yield earned by the general fund with an adjustment to reflect the actual interest rate credited to participants in the general fund at December 31, 2011 and 2010 was 1.93% and 2.74%, respectively. This represents the annualized earnings credited to participants in the general fund divided by the fair value of all investments in the general fund at December 31, 2011 and 2010.

Limitations on the Ability of the GIC to Transact at Contract Value — GICs and security backed contracts generally provide for withdrawals associated with certain events which are not in the ordinary course of the general fund operations. These withdrawals are paid with a market value adjustment applied to the withdrawal as defined in the investment contract. Each contract issuer specifies the events which may trigger a market value adjustment; however, such events may include all or a portion of the following:

- Material amendments to the general fund's structure or administration;
- Changes to the participating plans' competing investment options including the elimination of equity wash provisions;
- Complete or partial termination of the general fund, including a merger with another fund;
- The failure of the general fund to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA;
- The redemption of all or a portion of the interests in the general fund held by a participating plan at the direction of the participating plan sponsor, including withdrawals due to the removal of a specifically identifiable group of employees from coverage under the participating plan (such as a group layoff or early retirement incentive program), the closing or sale of a subsidiary, employing unit, or affiliate, the bankruptcy or insolvency of a plan sponsor, the merger of the plan with another plan, or the plan sponsor's establishment of another tax qualified defined contribution plan;
- Any change in law, regulation, ruling, administrative or judicial position, or accounting requirement, applicable to the general fund or participating plans;
- The delivery of any communication to plan participants designed to influence a participant not to invest in the general fund.

GICs generally do not permit issuers to terminate the agreement prior to the scheduled maturity date. Security backed contracts generally are evergreen contracts that contain termination provisions, allowing the general fund or the contract issuer to terminate with notice, at any time at fair value, and providing for automatic termination of the contract if the contract value or the fair value of the underlying portfolio equals zero. The issuer is obligated to pay the excess contract value when the fair value of the underlying portfolio equals zero.

In addition, if the general fund defaults in its obligations under the security-backed contract (including the issuer's determination that the agreement constitutes a non-exempt prohibited transaction as defined under ERISA), and such default is not corrected within the time permitted by the contract, then the contract may be terminated by the issuer and the general fund will receive the fair value as of the date of termination.

5. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Wells Fargo Bank, n.a. Wells Fargo Bank, n.a. is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for the investment management services are included as a reduction of the return earned on each fund.

6. PLAN TERMINATION

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

7. FEDERAL INCOME TAX STATUS

The Internal Revenue Service has determined and informed the Plan Administrator by a letter dated December 8, 2011, that the Plan and related Trust were designed in accordance with applicable regulations of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter; however, the Plan Administrator believes that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC and the Plan and related Trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plans' financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

8. INFORMATION CERTIFIED BY THE TRUSTEE

The following is a summary of the unaudited information regarding the Plan as of December 31, 2011 and 2010, and for the years then ended, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from information prepared by Wells Fargo Bank, n.a., the trustee of the Plan, and furnished to the Plan administrator. The Plan administrator has obtained certifications from the trustee that such information is complete and accurate.

	2011	2010
Statements of Net Assets Available for Benefits — Modified Cash Basis:		
Participant-directed investments at fair value as determined by quoted market price	\$ 12,745,388	\$ 13,655,804
Participant-directed investments at estimated fair value	6,883,832	6,406,456
Adjustment from fair value to contract value for fully benefit responsive investment contracts	(367,520)	(202,858)

During the years ended December 31, 2011 and 2010, investment income, as certified by the Trustee, includes interest and dividend income and net appreciation (depreciation) on investments. Net appreciation (depreciation) on investments includes gains and losses on investments bought and sold, as well as held during the year. Investment income is as follows:

	2011	2010
Statements of Changes in Net Assets Available for Benefits — Modified Cash Basis:		
Investment income (loss)	\$ (75,851)	\$ 1,905,075

Supplemental schedule: All investment balances and information included in the supplemental schedule of assets (held at end of year).

Notes 3 and 4: All investment balances and investment information in the notes, except for the classification of investments into levels within the fair value hierarchy.

9. SUBSEQUENT EVENTS

Subsequent events related to the financial statements — modified cash basis have been evaluated through September 21, 2012, which is the date the financial statements — modified cash basis were available to be issued, and the Plan has determined that there are no material events that required adjustment to or disclosure in these financial statements — modified cash basis.

10. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

A reconciliation of net assets available for benefits per the financial statements — modified cash basis to the total net assets per the Form 5500 as of December 31, 2011 and 2010, and the net change in net assets per the financial statements to the net income per the Form 5500 for the years ended December 31, 2011 and 2010, are as follows:

	2011	2010
Net assets available for benefits per the financial statements — modified cash basis	\$ 19,608,485	\$ 20,165,948
Adjustment from contract value to fair value for fully benefit responsive stable value fund investment contracts	<u>367,520</u>	<u>202,858</u>
Total net assets per the Form 5500	<u>\$ 19,976,005</u>	<u>\$ 20,368,806</u>
Net change in net assets per the financial statements — modified cash basis	\$ (557,463)	\$ 1,764,588
Adjustment from contract value to fair value for fully benefit responsive investment contracts — December 31, 2011 and 2010	<u>164,662</u>	<u>202,858</u>
Net income per Form 5500	<u>\$ (392,801)</u>	<u>\$ 1,967,446</u>

* * * * *

SUPPLEMENTAL SCHEDULE

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN

Administered By Associated Benefits Corporation

EIN NUMBER: 74-3213641

PLAN NUMBER: 041

FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR) 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	(e) Current Value
	COMMON STOCK AND EQUITY FUNDS:		
	Vanguard Value Index Fund — Admiral	25,328 shares	\$ 498,570
	PIMCO Total Return Inst	92,774 shares	998,438
	Vanguard Institutional Index Fund	16,320 shares	1,836,321
	JP Morgan Mid Cap Value Fund	43,324 shares	1,014,620
	MFS Value	51,011 shares	1,132,175
	Columbia Acorn Fund	19,582 shares	539,683
	Columbia Small Cap Fund	60,050 shares	887,933
	American Funds Growth Fund of America — R6	91,628 shares	2,472,324
	Artio International Equity Fund	41,892 shares	947,601
	Principal Mid Cap S&P 400	10,986 shares	143,585
	Wells Fargo Advantage Small Cap Value Fund	1,675 shares	35,737
	Invesco Van Kampen Small Cap Growth Fund	1,522 shares	14,539
	Vanguard Target Retirement	12,164 shares	140,249
	Vanguard Target Retirement 2005	228 shares	2,731
	Vanguard Target Retirement 2010	426 shares	9,549
	Vanguard Target Retirement 2015	16,184 shares	199,057
	Vanguard Target Retirement 2020	44,941 shares	974,770
	Vanguard Target Retirement 2025	19,706 shares	241,799
	Vanguard Target Retirement 2030	9,545 shares	199,688
	Vanguard Target Retirement 2035	10,758 shares	134,580
	Vanguard Target Retirement 2040	5,935 shares	121,669
	Vanguard Target Retirement 2045	6,631 shares	85,345
	Vanguard Target Retirement 2050	5,306 shares	108,300
	Vanguard Target Retirement 2055	280 shares	6,125
	Total Common Stock and Equity Funds		<u>12,745,388</u>
	GENERAL FUND:		
	Cash and Short-term Investments		
*	Wells Fargo ST Investments	Money Market Fund	<u>277,638</u>
	Total Cash and Short-term Investments		<u>277,638</u>
	Wrapper Contracts:		
	Bank of America (A2/A)	3.41% contract	1,831
	Monumental Life Insurance Company (A1/AA-)	4.17% contract	3,053
	Total Wrapper Contracts		<u>4,884</u>

(Continued)

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered By Associated Benefits Corporation
EIN NUMBER: 74-3213641
PLAN NUMBER: 041

FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR)
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	(e) Current Value
	United States Government Obligations:		
	United States Treasury Inflation Indexed Bonds	\$119,254 par, maturity 7/15/2021, 0.63%	\$ 128,161
	United States Treasury Note/Bond	\$126,374 par, maturity 8/15/2020, 2.63%	136,297
	US Central Federal Credit Union	\$55,177 par, maturity 2/15/2021, 3.63%	64,062
	USDA - Govt Guar Private Loans	\$133,494 par, maturity 2/15/2020, 3.63%	154,822
	United States Treasury Inflation Indexed Bonds	\$12,459 par, maturity 1/15/2021, 1.13%	14,382
	United States Treasury Inflation Indexed Bonds	\$69,417 par, maturity 7/15/2020, 1.25%	81,518
	United States Treasury Inflation Indexed Bonds	\$97,895 par, maturity 1/15/2020, 1.38%	116,707
	United States Treasury Inflation Indexed Bonds	\$7,120 par, maturity 7/15/2019, 1.88%	8,895
	United States Treasury Note/Bond	\$147,733 par, maturity 5/31/2015, 2.13%	155,962
	United States Treasury Note/Bond	\$167,312 par, maturity 8/15/2021, 2.13%	171,600
	United States Treasury Note/Bond	\$119,254 par, maturity 3/31/2016, 2.38%	127,705
	NCUA Guaranteed Notes	\$22,986 par, maturity 3/6/2020, 0.65%	22,986
	NCUA Guaranteed Notes	\$80,986 par, maturity 6/12/2017, 2.35%	83,722
	NCUA Guaranteed Notes	\$68,893 par, maturity 10/29/2020, 2.65%	72,003
	NCUA Guaranteed Notes	\$56,957 par, maturity 10/29/2020, 2.9%	60,136
	Ginnie Mae I pool	\$188,086 par, maturity 6/15/2040, 5%	208,546
	Ginnie Mae I pool	\$19,099 par, maturity 5/15/2033, 5%	21,285
	Ginnie Mae I pool	\$34,264 par, maturity 11/15/2033, 5%	38,173
	Ginnie Mae I pool	\$45,460 par, maturity 2/15/2035, 5.5%	51,220
	Ginnie Mae I pool	\$62,911 par, maturity 5/15/2038, 5.5%	70,666
	Ginnie Mae I pool	\$63,336 par, maturity 6/15/2034, 5.5%	71,461
	Ginnie Mae I pool	\$44,837 par, maturity 12/15/2033, 6%	51,027
	Ginnie Mae I pool	\$58,528 par, maturity 1/15/2034, 6%	66,535
	Ginnie Mae II pool	\$39,326 par, maturity 5/20/2058, 0.86%	37,691
	Ginnie Mae II pool	\$106,576 par, maturity 11/20/2041, 2.5%	110,147
	Ginnie Mae II pool	\$310,730 par, maturity 7/20/2040, 3.5%	328,246
	Ginnie Mae II pool	\$27,785 par, maturity 12/20/2060, 4.3%	29,979
	Ginnie Mae II pool	\$26,465 par, maturity 11/20/2060, 4.81%	28,879
	Ginnie Mae II pool	\$30,271 par, maturity 6/20/2060, 5.01%	33,323
	Ginnie Mae II pool	\$37,115 par, maturity 7/20/2059, 5.46%	40,731
	Ginnie Mae II pool	\$38,486 par, maturity 8/20/2059, 5.46%	41,890
	Ginnie Mae II pool	\$76,058 par, maturity 7/20/2059, 5.46%	82,729
	Ginnie Mae II pool	\$31,047 par, maturity 1/20/2060, 5.5%	34,128
	Ginnie Mae II pool	\$28,504 par, maturity 9/20/2059, 5.54%	30,950
	Total U.S. Government Obligations		<u>2,776,564</u>

(Continued)

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered By Associated Benefits Corporation
EIN NUMBER: 74-3213641
PLAN NUMBER: 041

FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR)
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	(e) Current Value
	SBA Loans:		
	SBA - Govt Guar Private Loans	\$8,375 par, maturity 5/15/2016, 6.1%	\$ 8,403
	SBA - Govt Guar Private Loans	\$446 par, maturity 6/1/2012, 6.22%	466
	SBA - Govt Guar Private Loans	\$7,776 par, maturity 11/15/2012, 6.22%	7,839
	SBA - Govt Guar Private Loans	\$1,920 par, maturity 3/8/2027, 6.25%	1,882
	SBA - Govt Guar Private Loans	\$37,284 par, maturity 6/15/2016, 6.27%	38,030
	SBA - Govt Guar Private Loans	\$2,607 par, maturity 2/1/2013, 7.09%	2,664
	SBA - Govt Guar Private Loans	\$4,124 par, maturity 9/9/2016, 3%	3,979
	SBA - Govt Guar Private Loans	\$8,156 par, maturity 5/11/2017, 3%	8,095
	SBA - Govt Guar Private Loans	\$947 par, maturity 11/12/2017, 3%	958
	SBA - Govt Guar Private Loans	\$39,508 par, maturity 9/20/2019, 5.11%	39,212
	SBA - Govt Guar Private Loans	\$54,317 par, maturity 4/30/2026, 6%	54,874
	Small Business Administration Participation Certificates	\$67,640 par, maturity 12/1/2027, 5.29%	75,442
	Small Business Administration Participation Certificates	\$1,970 par, maturity 11/1/2027, 5.51%	2,208
	Small Business Administration Participation Certificates	\$75,347 par, maturity 9/1/2026, 5.54%	84,412
	Small Business Administration Participation Certificates	\$117,364 par, maturity 3/1/2026, 5.57%	132,371
	Small Business Administration Participation Certificates	\$51,630 par, maturity 10/1/2028, 5.63%	58,448
	Small Business Administration	\$23,247 par, maturity 3/10/2013, 4.63%	23,996
	Small Business Administration	\$32,765 par, maturity 8/10/2014, 4.75%	34,673
	Small Business Administration	\$41,678 par, maturity 9/10/2015, 4.94%	44,946
	Small Business Administration	\$23,989 par, maturity 8/10/2013, 5.14%	25,097
	Small Business Administration	\$16,277 par, maturity 2/10/2016, 5.41%	17,685
	Small Business Administration	\$64,797 par, maturity 2/10/2017, 5.46%	70,085
	Small Business Administration	\$35,829 par, maturity 8/10/2016, 5.68%	39,184
	Small Business Administration	\$98,859 par, maturity 8/10/2017, 5.79%	109,799
	Small Business Administration	\$76,762 par, maturity 2/10/2018, 5.9%	87,066
	Small Business Administration	\$66,527 par, maturity 8/10/2018, 5.94%	74,230
	Total SBA Loans		<u>1,046,044</u>

(Continued)

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN
Administered By Associated Benefits Corporation
EIN NUMBER: 74-3213641
PLAN NUMBER: 041

FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR)
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	(e) Current Value
	Farmers Home Mortgage Administration:		
	FMHA — Govt Guar Private Loans	\$4,209 par, maturity 1/15/2030, 3.75%	\$ 4,322
	FMHA — Govt Guar Private Loans	\$11,922 par, maturity 1/8/2018, 4.72%	11,922
	FMHA — Govt Guar Private Loans	\$2,073 par, maturity 8/20/2012, 4.96%	2,037
	FMHA — Govt Guar Private Loans	\$30 par, maturity 1/1/2015, 5.38%	29
	FMHA — Govt Guar Private Loans	\$897 par, maturity 1/16/2017, 6.25%	892
	FMHA — Govt Guar Private Loans	\$1,262 par, maturity 5/1/2012, 6.33%	1,252
	FMHA — Govt Guar Private Loans	\$3,558 par, maturity 2/1/2015, 6.63%	3,647
	Total Farmers Home Mortgage Administration		<u>24,101</u>
	Other Government Obligations:		
	US Gov Gtd Overseas Private Investment Corp	\$81,876 par, maturity 7/7/2015, 1.51%	87,977
	US Gov Gtd Overseas Private Investment Corp	\$34,681 par, maturity 5/15/2021, 3.37%	36,731
	US Gov Gtd Overseas Private Investment Corp	\$33,286 par, maturity 2/27/2027, 4.44%	37,186
	US Gov Gtd US Department of Housing and Urban Development	\$59,449 par, maturity 8/1/2020, 2.45%	60,308
	US Gov Gtd US Department of Housing and Urban Development	\$53,398 par, maturity 8/1/2017, 2.91%	57,890
	US Gov Gtd US Department of Housing and Urban Development	\$53,398 par, maturity 8/1/2018, 3.12%	57,977
	US Gov Gtd US Department of Housing and Urban Development	\$85,258 par, maturity 8/1/2014, 4.14%	92,980
	US Gov Gtd US Department of Housing and Urban Development	\$88,996 par, maturity 8/1/2016, 4.48%	102,411
	USDA — Govt Guar Private Loans	\$10,884 par, maturity 12/18/2016, 4.97%	10,775
	USDA — Govt Guar Private Loans	\$8,237 par, maturity 9/15/2028, 5.72%	8,242
	USDA — Govt Guar Private Loans	\$9,251 par, maturity 10/23/2019, 6.13%	9,298
	US Treasury Note/Bond	\$126,374 par, maturity 8/15/2020, 2.63%	136,297
	US Treasury Note/Bond	\$55,177 par, maturity 2/15/2021, 3.63%	64,062
	Total Other Government Obligations		<u>762,134</u>
	Total United States Government Agency Obligations		<u>4,608,843</u>

(Continued)

THE SWISS VALLEY FARMS COOPERATIVE EMPLOYEE RETIREMENT PLAN

Administered By Associated Benefits Corporation

EIN NUMBER: 74-3213641

PLAN NUMBER: 041

FORM 5500, SCHEDULE H, PART IV, LINE 4i — SCHEDULE OF ASSETS (HELD AT END OF YEAR) 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	(e) Current Value
	Other:		
	Sovereign Bank/Wyomissing PA	\$17,799 par, maturity 1/17/2012, 2.75%	\$ 17,816
	Tricahue Leasing LLC	\$93,291 par, maturity 12/17/2021, 3.35%	96,955
	Goldman Sachs Group Inc/The	\$17,799 par, maturity 3/15/2012, 2.15%	17,871
	Goldman Sachs Group Inc/The	\$16,019 par, maturity 6/15/2012, 3.25%	16,247
	John Deere Capital Corp	\$17,799 par, maturity 6/19/2012, 2.88%	18,030
	King International Leasing LLC	\$29,679 par, maturity 10/15/2022, 2.75%	30,178
	Purple Chen 2011 LLC	\$26,699 par, maturity 8/1/2023, 2.73%	27,001
	FDIC Structured Sale Guaranteed Notes	\$88,996 par, maturity 10/25/2012, 0.01%	88,292
	Rowan Cos Inc	\$59,329 par, maturity 7/15/2021, 3.16%	61,334
	Rowan Cos Inc	\$82,519 par, maturity 5/1/2020, 3.52%	86,171
	San Clemente Leasing LLC	\$63,625 par, maturity 6/7/2022, 3.35%	66,674
	Ally Financial Inc	\$64,077 par, maturity 12/19/2012, 2.2%	65,299
	Amal Ltd/Cayman Islands	\$22,460 par, maturity 8/21/2021, 3.46%	23,614
	Bank of America Corp	\$26,699 par, maturity 6/15/2012, 3.13%	27,058
	Citigroup Funding Inc	\$16,909 par, maturity 10/22/2012, 1.88%	17,142
	Citigroup Funding Inc	\$21,359 par, maturity 11/15/2012, 1.88%	21,667
	Citigroup Funding Inc	\$14,239 par, maturity 12/10/2012, 2.25%	14,504
	Egypt Government AID Bonds	\$71,197 par, maturity 9/15/2015, 4.45%	79,649
	Gate Capital Cayman Two Ltd	\$64,317 par, maturity 12/2/2021, 2.64%	64,955
	General Electric Capital Corp	\$40,938 par, maturity 12/28/2012, 2.63%	41,918
	Total other		<u>882,375</u>
	* WELLS FARGO STABLE RETURN FUND		<u>1,110,092</u>
	TOTAL GENERAL FUND		<u>6,883,832</u>
	* VARIOUS PARTICIPANTS	Notes receivable from participants — maturing 2012–2024 at interest rates of 3.5% to 6.3%	<u>346,785</u>
	Adjustment from fair value to contract value		<u>(367,520)</u>
	Total investments		<u>\$ 19,608,485</u>

* Known to be a party-in-interest.

Note: column (d) is not applicable for participant directed investments and therefore has been omitted.

See accompanying Independent Auditors' Report.

(Concluded)

Plan Name: The Swiss Valley Farms Cooperative Employee Retirement Plan
Plan Sponsor EIN: 74-3213641
ERISA 3-digit Plan #: 041
Plan Year Ending: 12/31/2011

The required attachment marked with an "X" in the Attachment column is included within the Accountant's Opinion attachment to Schedule H, Part III, Line 3, which consists of the entire audit report issued by the plan's Independent Qualified Public Accountant ("IQPA").

Form/Schedule	Line #	Description	Attachment
5500 Sch. H	Line 3	Financial Statements used in formulating the IQPA's opinion	X
5500 Sch. H	Line 4i	Schedule of Assets (Held at End of Year)	X
5500 Sch. H	Line 4i	Schedule of Assets (Acquired and Disposed of Within Year)	
5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	

Plan Name: The Swiss Valley Farms Cooperative Employee Retirement Plan
Plan Sponsor EIN: 74-3213641
ERISA 3-digit Plan #: 041
Plan Year Ending: 12/31/2011

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5500 Sch. H	Line 4j	Schedule of Reportable Transactions	
5500 Sch. H	Line 4a	Schedule of Delinquent Participant Contributions	

Name or Source of Eligible Indirect Compensation	Fund	Description of Services	Basis Points
Wells Fargo Bank, N.A.	Not Applicable	Trustee Fee	10
Columbia Wanger Asset Management, LLC	Columbia Acorn Fund (Z)	Investment Management of the Fund	25
Columbia Management Advisors, LLC	Columbia Small Cap Core (Z)	Investment Management of the Fund	25
Invesco Advisors, Inc.	Invesco Van Kampen Sm Cp Gro A	Investment Management of the Fund	50
JP Morgan Investment Management Inc.	JP Morgan Mid Cap Value (Instl)	Investment Management of the Fund	10
Massachusetts Financial Services Co.	MFS Value R4	Investment Management of the Fund	15
Pimco LLC	Pimco Total Return	Investment Management of the Fund	25
Capital Research & Management Co.	American Fund Growth R6	Investment Management of the Fund	0
Artio Global Management LLC	Artio International Equity	Investment Management of the Fund	40
Wells Fargo Bank, N.A.	WF Advantage Cash Inv Mmkt	Investment Management of the Fund	16
Wells Fargo Bank, N.A.	WF Advtg Small Cap Value I	Investment Management of the Fund	35
Principal Global Investors LLC	Principal Mid Cap S&P 400	Investment Management of the Fund	27