

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089
		2011
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <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>MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan <u>01/01/1989</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>MIDDLE ATLANTIC PRODUCTS, INC.</u> <u>300 FAIRFIELD ROAD</u> <u>FAIRFIELD, NJ 07004</u>	2b Employer Identification Number (EIN) <u>22-2355572</u> 2c Sponsor's telephone number <u>973-839-1011</u> 2d Business code (see instructions) <u>332900</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	<u>Filed with authorized/valid electronic signature.</u>	<u>10/17/2012</u>	<u>WILLIAM C. PETERS</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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") MIDDLE ATLANTIC PRODUCTS, INC. 300 FAIRFIELD ROAD FAIRFIELD, NJ 07004	3b Administrator's EIN 22-2355572 3c Administrator's telephone number 973-839-1011
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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	597
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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	524
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	22
d Subtotal. Add lines 6a , 6b , and 6c	6d	546
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	546
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	279
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	3

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:

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

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

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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) ☒ 1 **A** (Insurance Information)
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE A (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration</small> <hr/> <small>Pension Benefit Guaranty Corporation</small>	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 <hr/> 2011 <hr/> 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>MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MIDDLE ATLANTIC PRODUCTS, INC.</u>	D Employer Identification Number (EIN) <u>22-2355572</u>	

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

(a) Name of insurance carrier

JOHN HANCOCK LIFE INSURANCE COMPANY USA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
<u>01-0233346</u>	<u>65838</u>	<u>68546</u>	<u>0</u>	<u>01/01/2011</u>	<u>02/28/2011</u>

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

(a) Total amount of commissions paid <u>4500</u>	(b) Total amount of fees paid <u>968</u>
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

WELLS FARGO ADVISORS LLC
ONE NORTH JEFFERSON
ST LOUIS, MO 63103

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
<u>4500</u>		<u>COMMISSION</u>	<u>3</u>

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

ALTIGRO PENSION SERVICES
THREE ROUTE 46 WEST
FAIRFIELD, NJ 07004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	<u>728</u>	<u>TPA COMPENSATION</u>	<u>5</u>

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

ALTIGRO PENSION SERVICES

THREE ROUTE 46 WEST
FIARFIELD, NJ 07004

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end	4	0
5 Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

e Type of contract: (1) ☐ individual policies (2) ☒ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

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

b Balance at the end of the previous year	7b	126601
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c Additions: (1) Contributions deposited during the year	7c(1)	3260	
(2) Dividends and credits	7c(2)		
(3) Interest credited during the year	7c(3)	391	
(4) Transferred from separate account	7c(4)		
(5) Other (specify below)	7c(5)	282	

▶ LOAN REPAY

(6) Total additions	7c(6)	3933
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d Total of balance and additions (add b and c(6))	7d	130534
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
(2) Administration charge made by carrier	7e(2)	2	
(3) Transferred to separate account	7e(3)	1509	
(4) Other (specify below)	7e(4)	129023	

▶ TRANSFER TO NEW RECORDKEEPER

(5) Total deductions	7e(5)	130534
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f Balance at the end of the current year (subtract e(5) from d)	7f	0
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.	10b	

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) 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 MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MIDDLE ATLANTIC PRODUCTS, INC.	D Employer Identification Number (EIN) 22-2355572

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
JOHN HANCOCK LIFE INSURANCE COMPANY

01-0233346

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

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

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

JP MORGAN RETIREMENT PLAN SERVICES

71-0930784

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 49 50 52 60 63 64 65 71 72 99	N/A	2605	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

MORNINGSTAR ASSOCIATES, LLC

34-6317381

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

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

RELIANCE TRUST COMPANY

58-1428634

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 99	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	405	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)

HARTFORD RETIREMENT SERVICES, LLC

26-1589907

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 49 64 65 99	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	27703	Yes ☐ No ☒

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

GPC SECURITIES, INC

58-1517899

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 64 65	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	1044	Yes ☐ No ☒

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

JOHN HANCOCK LIFE INSURANCE COMPANY

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKEEPER	208	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
JP MORGAN RETIREMENT PLAN SERVICES	52 59 60 63	0
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>SEE ATTACHED FEE DISCLOSURE REPORT</p> <p>12-3456789</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>SEE ATTACHED FEE & DISCLOSURE REPORT</p> </div> </div>		
MORNINGSTAR ASSOCIATES	49	44
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>HARTFORD LIFE INSURANCE COMPANY</p> <p>06-0974148</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>SEE ATTACHED FEE & DISCLOSURE REPORT</p> </div> </div>		
RELIANCE TRUST COMPANY	19 99	405
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>HARTFORD RETIREMENT SERVICES</p> <p>26-1589907</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>SEE ATTACHED FEE & DISCLOSURE REPORT</p> </div> </div>		

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
HARTFORD RETIREMENT SERVICES, LLC	15 37 38 49 64 65 99	27703
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>JP MORGAN RETIREMENT PLAN SERVICES</p> <p>71-0930784</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>SEE ATTACHED FEE & DISCLOSURE REPORT</p> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) Enter service provider name as it appears on line 2</p> <p>GPC SECURITIES, INC</p> </div> <div style="width: 20%;"> <p>(b) Service Codes (see instructions)</p> <p>15 64 65</p> </div> <div style="width: 20%;"> <p>(c) Enter amount of indirect compensation</p> <p style="text-align: right;">1044</p> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>HARTFORD RETIREMENT SERVICES, LLC</p> <p>26-1589907</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>SEE ATTACHED FEE & DISCLOSURE REPORT</p> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(a) Enter service provider name as it appears on line 2</p> </div> <div style="width: 20%;"> <p>(b) Service Codes (see instructions)</p> </div> <div style="width: 20%;"> <p>(c) Enter amount of indirect compensation</p> </div> </div>		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>(d) Enter name and EIN (address) of source of indirect compensation</p> </div> <div style="width: 40%;"> <p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> </div> </div>		

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:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="border: 1px solid black; padding: 5px; font-size: 1.2em; font-weight: bold;">2011</div> 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>MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>MIDDLE ATLANTIC PRODUCTS, INC.</u>	D Employer Identification Number (EIN) <u>22-2355572</u>	

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: <u>RETIREMENT LIVING 2045</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2040</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2040</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233460-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2030</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233460-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2030</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233460-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2020</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233460-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RETIREMENT LIVING 2015</u>			
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK USA</u>			
c EIN-PN <u>01-0233460-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>	

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING 2015**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE AGGRESSIVE**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE GROWTH**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE BALANCED**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE MODERATE**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONSERVATIVE**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: REAL EST. SECURITIES FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: NATURAL RESOURCES FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INTL SMALL CAP FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL OPPS FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL VALUE FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP STOCK FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: DFA UNS SMALL CAP FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH INDEX**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INTL EQUITY INDEX FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INTERNATIONAL CORE FIND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: SCIENCE & TECHNOLOGY FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: FINANCIAL SERVICES FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAO INDEX FUND**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN CENTURY VISTA**b** Name of sponsor of entity listed in (a): JOHN HANCOCK USA

c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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a Name of MTIA, CCT, PSA, or 103-12 IE: INV SMALL CAP GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PROCE HEALTH SCI		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP OPPORTUNITIES FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL COMPANY VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP VALUE FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK USA		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE ASSET INCOME		
b Name of sponsor of entity listed in (a): JP MORGAN CHASE BANK, N.A.		
c EIN-PN 20-1978950-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 235305

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

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

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2011
		This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011		
A Name of plan MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 MIDDLE ATLANTIC PRODUCTS, INC.	D Employer Identification Number (EIN) 22-2355572	

Part I	Asset and Liability Statement
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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)	10649	
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	495582	480997
(9) Value of interest in common/collective trusts.....	1c(9)	0	235305
(10) Value of interest in pooled separate accounts.....	1c(10)	8044775	
(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)	126601	8635375
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

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	8677607	9351677

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	8677607	9351677
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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)	150815	
(B) Participants	2a(1)(B)	862600	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1013415
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	21569	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		21569
(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)	221016	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		221016
(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)		1689
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		257372
(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)		-600954
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		914107

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	236975	
(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)		236975
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	3062	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		3062
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		240037

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		674070
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ 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: SCHULMAN WOLFSON & ABRUZZO, LLP

(2) EIN: 22-2840651

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.		X	

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ Yes ☐ No Amount:

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

5b(1) Name of plan(s)

5b(2) EIN(s)	5b(3) PN(s)

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>MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MIDDLE ATLANTIC PRODUCTS, INC.</u>	D Employer Identification Number (EIN) <u>22-2355572</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>06-0974148</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)
----------------	--

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

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

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

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

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

Middle Atlantic Products, Inc.
401(k) Savings Plan
Financial Statements
and Supplemental Schedule
December 31, 2011 and 2010

Middle Atlantic Products, Inc. 401(k) Savings Plan
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December 31, 2011 and 2010

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Supplemental Schedule	
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Independent Auditors' Report

To the Plan Administrator of the
Middle Atlantic Products, Inc. 401(k) Savings Plan:

We were engaged to audit the modified cash basis financial statements and supplemental schedule of **MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN** as of December 31, 2011 and 2010, and for the years then ended, as listed in the accompanying index. 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 JPMorgan Chase Bank N.A., the custodian of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that JPMorgan Chase Bank N.A. held the Plan's investment assets and executed investment transactions from February 23, 2011 to December 31, 2011, and that John Hancock Life Insurance Company, held the Plan's investment assets and executed investment transactions as of December 31, 2010 and for the period January 1, 2011 to February 22, 2011. The plan administrator has obtained certifications from the custodians as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the custodians is complete and accurate.

As described in Note 2, 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 were unable to, and do not, express an opinion on these accompanying financial statements and the supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and the supplemental schedule, other than that derived from the information certified by the custodians, 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.

Schulman Wolfson & Abruzzo, LLP
CERTIFIED PUBLIC ACCOUNTANTS

North Brunswick, New Jersey
October 4, 2012

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statements of Net Assets Available for Benefits (Modified Cash Basis)
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value		
Cash	\$ -	\$ 10,649
Mutual funds	8,870,680	8,171,376
Participants' loans	<u>480,997</u>	<u>495,582</u>
 Net assets available for benefits , at fair value	 <u>\$ 9,351,677</u>	 <u>\$ 8,677,607</u>

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statement of Changes in Net Assets Available for Benefits (Modified Cash Basis)
Years Ended December 31, 2011 and 2010

	2011	2010
Additions		
Additions to net assets attributable to:		
Investment loss		
Net (depreciation)/appreciation in fair value of investments	\$ (341,893)	\$ 938,691
Interest and Dividends	242,585	24,466
Total investment loss	(99,308)	963,157
Contributions:		
Employer's	150,815	113,174
Participants'	862,600	802,343
Participant rollovers into plan	0	22,119
Total contributions	1,013,415	937,636
Total additions	914,107	1,900,793
Deductions		
Deductions from net assets attributable to:		
Administrative expenses	3,062	5,949
Benefits paid to participants	236,975	320,354
Total deductions	240,037	326,303
Net increase	674,070	1,574,490
Net assets available for benefits		
Beginning of year	8,677,607	7,103,117
End of year	\$ 9,351,677	\$ 8,677,607

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan

The following brief description of the Middle Atlantic Products, Inc. 401(k) Savings Plan provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees, as defined, of Middle Atlantic Products, Inc. (the "Company") deemed to be employees under Internal Revenue Code (the "Code") Section 414(n) or 414(o) who have three consecutive months of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Additional information concerning the Plan and its provisions can be found in the summary plan description. A copy of that document can be obtained from the Plan Administrator through Middle Atlantic Products, Inc., 300 Fairfield Road, Fairfield, NJ 07004.

Contributions

The Plan provides for a salary reduction plan which is a savings plan that allows participants to defer up to 15% of their annual compensation through contributions to the Plan, subject to an annual limitation set forth in the Code. Contributions to the Plan on behalf of the participants are made by the Company in an amount equal to a discretionary percentage of the participants' salary reduction to be determined by the Company. Such percentage was 50% in both 2011 and 2010. For the years ended December 31, 2011 and 2010 the Company's maximum matching contribution was \$750.

The total of the annual contributions to the Plan on behalf of a participant (including the participant's contribution) is subject to a defined total dollar contribution limit and a defined contribution compensation limit that is based on the participant's annual compensation as set forth in the Code.

A participant may, with the consent of the plan Administrator, make a rollover contribution to the Plan at any time. Rollover contributions are assets transferred to the Plan from a qualified savings plan in which employees participated prior to their employment by the Company.

Investment Options

The Plan's investments are held by JPMorgan Chase Bank N.A. Contributions to the Plan by or on behalf of a Plan participant are invested at the election of the participant in mutual funds.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan - Continued

Participant's Accounts and Vesting

Each participant's account includes the participant's contribution and the Company's contributions plus earnings thereon. Participants' contributions are 100% vested and non-forfeitable at all times. In general, participants become fully vested in the Company's matching contributions after four years of service. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in their account, or in a series of installments or the purchase of an annuity. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Forfeitures of non vested benefits are used to reduce matching Company contributions.

Payment of Benefits

Payments of benefits to participants are recorded upon distribution. There were no benefits payable to former and retired participants at December 31, 2011 or 2010.

Administrative Expenses

All administrative expenses are paid by the Company.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements are prepared on the modified cash basis of accounting; consequently certain income and the related assets are recognized when received rather than when earned and certain obligations are recognized when paid rather than when the obligations are incurred. Accordingly, the accompanying financial statements are not intended to be presented in conformity with accounting principles generally accepted in the United States of America.

Use of Estimates

The preparation of financial statements requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Valuation of investments and investment income

Investments in the mutual funds are stated at fair value. Such fair values are based on the current market prices of the underlying U.S. Government obligations, corporate bonds, short-term investments and common stocks in mutual funds. Participant loans are stated at cost, which approximate fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest and dividend income are recorded on the cash basis.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

3. Investments

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

	<u>2011</u>	<u>2010</u>
John Hancock Mutual Funds:		
JH Lifestyle Growth	\$ -	\$ 1,316,292
JH Lifestyle Balanced	-	1,214,720
500 Index Fund	-	610,642
JH Lifestyle Moderate	-	487,659
JPMorgan Chase Mutual Funds:		
JPMorgan Smartretment 2015-Select	\$ 534,464	\$ -
JPMorgan Smartretment 2020-Select	1,594,867	-
JPMorgan Smartretment 2025-Select	1,299,579	-
JPMorgan Smartretment 2030-Select	1,610,482	-
JPMorgan Smartretment 2035-Select	989,791	-
JPMorgan Smartretment 2040-Select	795,547	-

4. Related Party Transactions

Certain investments are in mutual funds held by the Custodian; therefore these transactions are considered party-in-interest transactions.

5. Participants' Loans

Participants may obtain loans from the Plan, subject to approval by the Plan's Administrator. However, participants may not obtain a loan from the Plan until any existing loan is paid in full. The minimum loan is \$500. The maximum that may be borrowed from the participant's vested account balance is the lesser of \$50,000 or 50% of the participant's vested account balance. Participants can only have one loan outstanding at a time. Loan payments are made through payroll deductions over a period that may not exceed ten years for the purchase of a primary residence and five years for all other loans, from the date the loan was made.

6. Income Tax Status

The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code and that the Plan was qualified and the related trust was tax-exempt as of December 31, 2011.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

7. Plan Termination

The Company intends to continue the Plan indefinitely, but reserves the right to terminate it at any time, subject to the provisions of ERISA. Upon termination of the Plan, all participants will become 100% vested in their account balances under the Plan.

8. Certifications by Custodians

The following account balances and transactions were obtained from data that has been prepared and certified to as complete and accurate by the custodians.

Statements of net assets available for benefits (modified cash basis):
Investments – Mutual funds

Statements of changes in net assets available for benefits (modified cash basis):
Net appreciation (depreciation) in fair value of investments
interest and dividends

Schedule of assets held for investment purposes (modified cash basis)

9. Risks and Uncertainties

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

10. Fair Value Measurements

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques need to maximize the use of observable inputs and minimize the use of unobservable inputs. Valuation techniques used to measure fair value are defined as follows:

- Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 - Inputs to the valuation methodology include: (a) quoted prices for similar assets or liabilities in active markets; (b) quoted prices for identical or similar assets or liabilities in inactive markets; (c) inputs other than quoted prices that are observable for the asset or liability; and (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

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

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

Following is a description of the valuation methodologies used for assets measured at fair value.

- Money market funds: Valued at cost plus accrued interest, which approximates fair value.
- Mutual funds: Valued at net asset value (“NAV”) of shares held by the Plan at year end, which is a practical expedient. The NAV is a quoted price in an active market, which represents the net asset value of the securities held by the Plan at year end.
- Common collective trusts: The fair value of the common collective trusts are determined by the trustees of the common collective trust based on the underlying assets, which represents the net asset value, a practical expedient to fair value, of units held by the Plan.
- Participant loans: Valued at the outstanding balances which approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future 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.

Assets at fair value as of December 31, 2011 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,870,680	\$ -	\$ -	\$ 8,870,680
Participant loans	<u>-</u>	<u>-</u>	<u>480,997</u>	<u>480,997</u>
Total assets at fair value	<u>\$ 8,870,680</u>	<u>\$ -</u>	<u>\$ 480,997</u>	<u>\$ 9,351,677</u>

Assets at fair value as of December 31, 2010 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,171,376	\$ -	\$ -	\$ 8,171,376
Participant loans	<u>-</u>	<u>-</u>	<u>495,582</u>	<u>495,582</u>
Total assets at fair value	<u>\$ 8,171,376</u>	<u>\$ -</u>	<u>\$ 495,582</u>	<u>\$ 8,666,958</u>

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

The following is the summary of changes in the fair value of the Plan's level 3 assets.

December 31, 2011	Participant Loans
Balance, beginning of year	\$ 495,582
Issuances (repayments), net	<u>(14,585)</u>
Balance, end of year	<u>\$ 480,997</u>
 December 31, 2010	 Participant Loans
Balance, beginning of year	\$ 401,366
Issuances (repayments), net	<u>94,216</u>
Balance, end of year	<u>\$ 495,582</u>

Supplemental Schedule

Middle Atlantic Products, Inc. 401(k) Savings Plan**E.I. # 22-235572 Plan # 001****Schedule of Assets (Held at End of Year)****(Modified Cash Basis)****(Schedule H to the 2011 Form 5500)****December 31, 2011**

Identity of Investment	Cost (A)	Value
JPM Mutual Funds		
Alger Capital Appreciation-I	\$	30,281
Amer Cent Inflation Adj Bond A		4,318
American Funds Europacific-R3		12,524
Franklin Age High Income Fund-A		95,560
Goldman Sachs Growth Opps Fund-A		49,256
Hartford Dividend & Growth-R4		254,431
Invesco Small Cap Value A		33,607
JPMCB Stable Asset Inc F-15		235,305
JPMorgan Core Bond Select		127,343
JPMorgan Equity Index Select		66,986
JPMorgan Smartretment 2015-Select		534,464
JPMorgan Smartretment 2020-Select		1,594,867
JPMorgan Smartretment 2025-Select		1,299,579
JPMorgan Smartretment 2030-Select		1,610,482
JPMorgan Smartretment 2035-Select		989,791
JPMorgan Smartretment 2040-Select		795,547
JPMorgan Smartretment 2045-Select		223,443
JPMorgan Smartretment 2050-Select		78,138
JPMorgan Smartretment Income-I		261,855
JPMorgan U.S. Equity Select		38,055
Lord Abbett Developing Growth-A		64,994
Nuveen Mid Cap Index-A		59,639
Oakmark International Fund-I		181,818
Oppenheimer Intl Bond-A		98,716
Pioneer Strategic Income Fund-A		69,730
Ridgeworth Clas Mid-Cap Val Eq-A		21,694
Ridgeworth Small Cp Vlu Eqty-A		38,257
Cash		0
Participants' loans (interest at rates ranging from 4.25% to 9.25%; various maturity dates; collateralized by participant account balances.		480,997
	\$	9,351,677

(A) Cost not required.

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

MIDDLE ATLANTIC PRODUCTS 401K PLAN (824892)

EIN #: 22-2355572

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

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

Total Direct Compensation Paid **\$2,605.25**

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

Recipient: J.P. Morgan EIN: 71-0930784

Service Codes: 15, 37, 38, 49, 52, 59, 60, 63, 64, 65, 71, 72, 99, 50 (if direct compensation amount reflected below)

Direct Compensation **\$2,605.25**

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

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

Please review the detailed breakdown at the end of the report for further information.

Indirect Compensation

Non Monetary Compensation

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

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

Compensation paid with respect to Funds

<i>Investment Option Name</i>	<i>EIN</i>	<i>Fees Received from Funds on your Plan's Menu (rates as of 12/31/2011)</i>	<i>Fund's Total Annual Expenses (as of 12/31/2011)</i>
ALGER CAPITAL APPRECIATION-I	13-2665689	0.55% x assets	1.17%
AMER CENT INFLATION ADJ BOND A	43-0821857	0.50% x assets	0.73%

<i>Investment Option Name</i>	<i>EIN</i>	<i>Fees Received from Funds on your Plan's Menu (rates as of 12/31/2011)</i>	<i>Fund's Total Annual Expenses (as of 12/31/2011)</i>
AMERICAN FUNDS EUROPACIFIC-R3	95-1411037	0.65% x assets	1.13%
FRANKLIN AGE HIGH INCOME FUND-A	94-1693697	0.25% x assets plus \$16/participant	0.75%
GOLDMAN SACHS GROWTH OPPS FD-A	NA ¹	0.55% x assets	1.41%
HARTFORD DIVIDEND & GROWTH-R4	22-2937447	0.65% x assets	1.07%
INVESCO VAN KAMPEN SM CAP VAL-A	84-0933032	0.60% x assets	1.36%
JPMCB STABLE ASSET INC F-15	13-4161079		0.00%
JPMORGAN CORE BOND SELECT	26-3613641	0.25% x assets	0.72%
JPMORGAN EQUITY INDEX SELECT	26-3613641	0.05% x assets	0.69%
JPMORGAN SMARTRETMENT 2015 SEL	33-1043149	0.25% x assets	0.33%
JPMORGAN SMARTRETMENT 2020-SEL	33-1043149	0.25% x assets	0.33%
JPMORGAN SMARTRETMENT 2025-SEL	33-1043149	0.25% x assets	0.34%
JPMORGAN SMARTRETMENT 2030-SEL	33-1043149	0.25% x assets	0.35%
JPMORGAN SMARTRETMENT 2035-SEL	33-1043149	0.25% x assets	0.37%
JPMORGAN SMARTRETMENT 2040-SEL	33-1043149	0.25% x assets	0.37%
JPMORGAN SMARTRETMENT 2045 SEL	33-1043149	0.25% x assets	0.43%
JPMORGAN SMARTRETMENT 2050 SEL	33-1043149	0.25% x assets	0.42%
JPMORGAN SMARTRETMENT INCOME-SEL	33-1043149	0.25% x assets	0.31%
JPMORGAN U.S. EQUITY SELECT	33-1043149	0.25% x assets	0.82%
LORD ABBETT DEVELOPING GROWTH-A	13-2958970	0.25% x assets plus \$16/participant	1.09%
NUVEEN MID CAP INDEX-A	41-1418224	0.50% x assets	0.86%
OAKMARK INTERNATIONAL FUND-I	04-3276558		1.06%
OPPENHEIMER INTL BOND-A	84-1308320	0.55% x assets	0.98%
PIONEER STRATEGIC INCOME FUND-A	04-3453709	0.55% x assets	1.06%
RIDGEWORTH CLAS MID-CAP VAL EQ-A	23-2678674	0.75% x assets	1.35%
RIDGEWORTH SMALL CP VLU EQTY-A	23-2678674	0.75% x assets	1.52%

¹ At the time this report was generated this information was not available.

The list includes any investment option held by the plan on at least one month end during the 2011 calendar year. To arrive at an estimate of the dollar amount that JP Morgan received from each fund, multiply the rate of fees received from each fund by your plan's year-end balance (or if the fund was liquidated prior to year end, the balance on the liquidation date) and, if applicable, the per participant fee by the number of participants in the fund at year end (or the liquidation date if earlier). This will be an estimate because your plan's balance and number of participants will vary over the course of the year, so the year-end balance and number of participants may be higher or lower than the daily balance. In addition, these fees are calculated on a daily basis.

JPMorgan funds are distributed by JPMorgan Distribution Services, Inc., which is an affiliate of J.P. Morgan Retirement Plan Services LLC and JPMorgan Chase & Co. Affiliates of JPMorgan Chase & Co. receive fees for providing various services to JPMorgan funds, including fees for investment management, shareholder servicing, administration, distribution, custody, fund accounting, securities lending and other services.

This amount is the sum of the fund's distribution, management and other fees, which are also identified in the fund's prospectus. Please note that affiliates of Hartford Retirement Services, LLC act as advisor to the Hartford funds. Such affiliates are identified in the fund's prospectus' and receive management fees in the following amounts:

Hartford Dividend & Growth R4	0.62% x assets
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Recipient: Hartford Retirement Services, LLC EIN: 26-1589907**Service Codes: 15, 37, 38, 49, 64, 65, 99****Direct Compensation****\$0.00**

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

Indirect Compensation

Base Fees	Payor: J.P. Morgan EIN: 71-0930784	\$18,228.57
Ancillary Fees	Payor: J.P. Morgan EIN: 71-0930784	\$9,474.25

Recipient: GPC Securities, Inc. EIN: 58-1517899**Service Codes: 15, 64, 65****Indirect Compensation**

Transaction Processing Services	Payor: Hartford Retirement Services, LLC EIN: 26-1589907	\$1,043.79
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GPC Securities, Inc. performed recordkeeping and trading functions through August 22, 2011. These activities were transferred to Hartford Securities Distribution Company, Inc. ("HSD") on August 23, 2011. HSD is a broker-dealer registered with the Securities and Exchange Commission which executes, clears and settles the Plan's purchase, exchange and redemption of shares or units in the funds on an agency basis. It is a wholly-owned affiliate of Hartford Retirement Services, LLC. More information is available in the Fund Fee Disclosure Notice for Retirement Plan Fiduciaries which accompanies the HSD Securities Account Agreement.

This is an estimate based on multiplying actual 2011 month end assets by 0.020%/12 for months January through August and then summing the results.

Recipient: Morningstar Associates, LLC EIN: 36-4317381**Service Code: 49****Indirect Compensation**

"Managed by You" services fee	Payor: Hartford Life Insurance Company EIN: 06-0974148	\$43.60
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This is an estimate determined by dividing a flat annual fee paid to Morningstar by the number of plans to whom this feature is made available.

Recipient: Reliance Trust Company EIN: 58-1428634**Indirect Compensation**

Custodial/Trust service fee		\$405.22
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Service Codes: 19, 25, 99

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

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

Direct Revenue Detail

Recipient: *J.P. Morgan*

<u>Fee Description</u>	<u>Dollar Amount</u>
Loan Set-up Fee	\$2,175.00
One-Time Distribution Fee	\$430.25
Total Direct Revenue:	<hr/> \$2,605.25
Grand Total Direct Fees:	<hr/> \$2,605.25

Middle Atlantic Products, Inc.
401(k) Savings Plan
Financial Statements
and Supplemental Schedule
December 31, 2011 and 2010

Middle Atlantic Products, Inc. 401(k) Savings Plan
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December 31, 2011 and 2010

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Independent Auditors' Report

To the Plan Administrator of the
Middle Atlantic Products, Inc. 401(k) Savings Plan:

We were engaged to audit the modified cash basis financial statements and supplemental schedule of **MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN** as of December 31, 2011 and 2010, and for the years then ended, as listed in the accompanying index. 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 JPMorgan Chase Bank N.A., the custodian of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that JPMorgan Chase Bank N.A. held the Plan's investment assets and executed investment transactions from February 23, 2011 to December 31, 2011, and that John Hancock Life Insurance Company, held the Plan's investment assets and executed investment transactions as of December 31, 2010 and for the period January 1, 2011 to February 22, 2011. The plan administrator has obtained certifications from the custodians as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the custodians is complete and accurate.

As described in Note 2, 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 were unable to, and do not, express an opinion on these accompanying financial statements and the supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and the supplemental schedule, other than that derived from the information certified by the custodians, 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.

Schulman Wolfson & Abruzzo, LLP
CERTIFIED PUBLIC ACCOUNTANTS

North Brunswick, New Jersey
October 4, 2012

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statements of Net Assets Available for Benefits (Modified Cash Basis)
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value		
Cash	\$ -	\$ 10,649
Mutual funds	8,870,680	8,171,376
Participants' loans	<u>480,997</u>	<u>495,582</u>
 Net assets available for benefits , at fair value	 <u>\$ 9,351,677</u>	 <u>\$ 8,677,607</u>

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statement of Changes in Net Assets Available for Benefits (Modified Cash Basis)
Years Ended December 31, 2011 and 2010

	2011	2010
Additions		
Additions to net assets attributable to:		
Investment loss		
Net (depreciation)/appreciation in fair value of investments	\$ (341,893)	\$ 938,691
Interest and Dividends	242,585	24,466
Total investment loss	(99,308)	963,157
Contributions:		
Employer's	150,815	113,174
Participants'	862,600	802,343
Participant rollovers into plan	0	22,119
Total contributions	1,013,415	937,636
Total additions	914,107	1,900,793
Deductions		
Deductions from net assets attributable to:		
Administrative expenses	3,062	5,949
Benefits paid to participants	236,975	320,354
Total deductions	240,037	326,303
Net increase	674,070	1,574,490
Net assets available for benefits		
Beginning of year	8,677,607	7,103,117
End of year	\$ 9,351,677	\$ 8,677,607

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan

The following brief description of the Middle Atlantic Products, Inc. 401(k) Savings Plan provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees, as defined, of Middle Atlantic Products, Inc. (the "Company") deemed to be employees under Internal Revenue Code (the "Code") Section 414(n) or 414(o) who have three consecutive months of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Additional information concerning the Plan and its provisions can be found in the summary plan description. A copy of that document can be obtained from the Plan Administrator through Middle Atlantic Products, Inc., 300 Fairfield Road, Fairfield, NJ 07004.

Contributions

The Plan provides for a salary reduction plan which is a savings plan that allows participants to defer up to 15% of their annual compensation through contributions to the Plan, subject to an annual limitation set forth in the Code. Contributions to the Plan on behalf of the participants are made by the Company in an amount equal to a discretionary percentage of the participants' salary reduction to be determined by the Company. Such percentage was 50% in both 2011 and 2010. For the years ended December 31, 2011 and 2010 the Company's maximum matching contribution was \$750.

The total of the annual contributions to the Plan on behalf of a participant (including the participant's contribution) is subject to a defined total dollar contribution limit and a defined contribution compensation limit that is based on the participant's annual compensation as set forth in the Code.

A participant may, with the consent of the plan Administrator, make a rollover contribution to the Plan at any time. Rollover contributions are assets transferred to the Plan from a qualified savings plan in which employees participated prior to their employment by the Company.

Investment Options

The Plan's investments are held by JPMorgan Chase Bank N.A. Contributions to the Plan by or on behalf of a Plan participant are invested at the election of the participant in mutual funds.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan - Continued

Participant's Accounts and Vesting

Each participant's account includes the participant's contribution and the Company's contributions plus earnings thereon. Participants' contributions are 100% vested and non-forfeitable at all times. In general, participants become fully vested in the Company's matching contributions after four years of service. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in their account, or in a series of installments or the purchase of an annuity. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Forfeitures of non vested benefits are used to reduce matching Company contributions.

Payment of Benefits

Payments of benefits to participants are recorded upon distribution. There were no benefits payable to former and retired participants at December 31, 2011 or 2010.

Administrative Expenses

All administrative expenses are paid by the Company.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements are prepared on the modified cash basis of accounting; consequently certain income and the related assets are recognized when received rather than when earned and certain obligations are recognized when paid rather than when the obligations are incurred. Accordingly, the accompanying financial statements are not intended to be presented in conformity with accounting principles generally accepted in the United States of America.

Use of Estimates

The preparation of financial statements requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Valuation of investments and investment income

Investments in the mutual funds are stated at fair value. Such fair values are based on the current market prices of the underlying U.S. Government obligations, corporate bonds, short-term investments and common stocks in mutual funds. Participant loans are stated at cost, which approximate fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest and dividend income are recorded on the cash basis.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

3. Investments

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

	<u>2011</u>	<u>2010</u>
John Hancock Mutual Funds:		
JH Lifestyle Growth	\$ -	\$ 1,316,292
JH Lifestyle Balanced	-	1,214,720
500 Index Fund	-	610,642
JH Lifestyle Moderate	-	487,659
JPMorgan Chase Mutual Funds:		
JPMorgan Smartretment 2015-Select	\$ 534,464	\$ -
JPMorgan Smartretment 2020-Select	1,594,867	-
JPMorgan Smartretment 2025-Select	1,299,579	-
JPMorgan Smartretment 2030-Select	1,610,482	-
JPMorgan Smartretment 2035-Select	989,791	-
JPMorgan Smartretment 2040-Select	795,547	-

4. Related Party Transactions

Certain investments are in mutual funds held by the Custodian; therefore these transactions are considered party-in-interest transactions.

5. Participants' Loans

Participants may obtain loans from the Plan, subject to approval by the Plan's Administrator. However, participants may not obtain a loan from the Plan until any existing loan is paid in full. The minimum loan is \$500. The maximum that may be borrowed from the participant's vested account balance is the lesser of \$50,000 or 50% of the participant's vested account balance. Participants can only have one loan outstanding at a time. Loan payments are made through payroll deductions over a period that may not exceed ten years for the purchase of a primary residence and five years for all other loans, from the date the loan was made.

6. Income Tax Status

The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code and that the Plan was qualified and the related trust was tax-exempt as of December 31, 2011.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

7. Plan Termination

The Company intends to continue the Plan indefinitely, but reserves the right to terminate it at any time, subject to the provisions of ERISA. Upon termination of the Plan, all participants will become 100% vested in their account balances under the Plan.

8. Certifications by Custodians

The following account balances and transactions were obtained from data that has been prepared and certified to as complete and accurate by the custodians.

Statements of net assets available for benefits (modified cash basis):
Investments – Mutual funds

Statements of changes in net assets available for benefits (modified cash basis):
Net appreciation (depreciation) in fair value of investments
interest and dividends

Schedule of assets held for investment purposes (modified cash basis)

9. Risks and Uncertainties

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

10. Fair Value Measurements

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques need to maximize the use of observable inputs and minimize the use of unobservable inputs. Valuation techniques used to measure fair value are defined as follows:

- Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 - Inputs to the valuation methodology include: (a) quoted prices for similar assets or liabilities in active markets; (b) quoted prices for identical or similar assets or liabilities in inactive markets; (c) inputs other than quoted prices that are observable for the asset or liability; and (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

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

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

Following is a description of the valuation methodologies used for assets measured at fair value.

- Money market funds: Valued at cost plus accrued interest, which approximates fair value.
- Mutual funds: Valued at net asset value (“NAV”) of shares held by the Plan at year end, which is a practical expedient. The NAV is a quoted price in an active market, which represents the net asset value of the securities held by the Plan at year end.
- Common collective trusts: The fair value of the common collective trusts are determined by the trustees of the common collective trust based on the underlying assets, which represents the net asset value, a practical expedient to fair value, of units held by the Plan.
- Participant loans: Valued at the outstanding balances which approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future 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.

Assets at fair value as of December 31, 2011 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,870,680	\$ -	\$ -	\$ 8,870,680
Participant loans	-	-	480,997	480,997
Total assets at fair value	<u>\$ 8,870,680</u>	<u>\$ -</u>	<u>\$ 480,997</u>	<u>\$ 9,351,677</u>

Assets at fair value as of December 31, 2010 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,171,376	\$ -	\$ -	\$ 8,171,376
Participant loans	-	-	495,582	495,582
Total assets at fair value	<u>\$ 8,171,376</u>	<u>\$ -</u>	<u>\$ 495,582</u>	<u>\$ 8,666,958</u>

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

The following is the summary of changes in the fair value of the Plan's level 3 assets.

December 31, 2011	Participant Loans
Balance, beginning of year	\$ 495,582
Issuances (repayments), net	<u>(14,585)</u>
Balance, end of year	<u>\$ 480,997</u>
 December 31, 2010	 Participant Loans
Balance, beginning of year	\$ 401,366
Issuances (repayments), net	<u>94,216</u>
Balance, end of year	<u>\$ 495,582</u>

Supplemental Schedule

Middle Atlantic Products, Inc. 401(k) Savings Plan**E.I. # 22-235572 Plan # 001****Schedule of Assets (Held at End of Year)****(Modified Cash Basis)****(Schedule H to the 2011 Form 5500)****December 31, 2011**

Identity of Investment	Cost (A)	Value
JPM Mutual Funds		
Alger Capital Appreciation-I	\$	30,281
Amer Cent Inflation Adj Bond A		4,318
American Funds Europacific-R3		12,524
Franklin Age High Income Fund-A		95,560
Goldman Sachs Growth Opps Fund-A		49,256
Hartford Dividend & Growth-R4		254,431
Invesco Small Cap Value A		33,607
JPMCB Stable Asset Inc F-15		235,305
JPMorgan Core Bond Select		127,343
JPMorgan Equity Index Select		66,986
JPMorgan Smartretment 2015-Select		534,464
JPMorgan Smartretment 2020-Select		1,594,867
JPMorgan Smartretment 2025-Select		1,299,579
JPMorgan Smartretment 2030-Select		1,610,482
JPMorgan Smartretment 2035-Select		989,791
JPMorgan Smartretment 2040-Select		795,547
JPMorgan Smartretment 2045-Select		223,443
JPMorgan Smartretment 2050-Select		78,138
JPMorgan Smartretment Income-I		261,855
JPMorgan U.S. Equity Select		38,055
Lord Abbett Developing Growth-A		64,994
Nuveen Mid Cap Index-A		59,639
Oakmark International Fund-I		181,818
Oppenheimer Intl Bond-A		98,716
Pioneer Strategic Income Fund-A		69,730
Ridgeworth Clas Mid-Cap Val Eq-A		21,694
Ridgeworth Small Cp Vlu Eqty-A		38,257
Cash		0
Participants' loans (interest at rates ranging from 4.25% to 9.25%; various maturity dates; collateralized by participant account balances.		480,997
	\$	9,351,677

(A) Cost not required.

Middle Atlantic Products, Inc.
401(k) Savings Plan
Financial Statements
and Supplemental Schedule
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Middle Atlantic Products, Inc. 401(k) Savings Plan
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Independent Auditors' Report

To the Plan Administrator of the
Middle Atlantic Products, Inc. 401(k) Savings Plan:

We were engaged to audit the modified cash basis financial statements and supplemental schedule of **MIDDLE ATLANTIC PRODUCTS, INC. 401(K) SAVINGS PLAN** as of December 31, 2011 and 2010, and for the years then ended, as listed in the accompanying index. 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 JPMorgan Chase Bank N.A., the custodian of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that JPMorgan Chase Bank N.A. held the Plan's investment assets and executed investment transactions from February 23, 2011 to December 31, 2011, and that John Hancock Life Insurance Company, held the Plan's investment assets and executed investment transactions as of December 31, 2010 and for the period January 1, 2011 to February 22, 2011. The plan administrator has obtained certifications from the custodians as of and for the years ended December 31, 2011 and 2010, that the information provided to the plan administrator by the custodians is complete and accurate.

As described in Note 2, 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 were unable to, and do not, express an opinion on these accompanying financial statements and the supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and the supplemental schedule, other than that derived from the information certified by the custodians, 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.

Schulman Wolfson & Abruzzo, LLP
CERTIFIED PUBLIC ACCOUNTANTS

North Brunswick, New Jersey
October 4, 2012

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statements of Net Assets Available for Benefits (Modified Cash Basis)
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value		
Cash	\$ -	\$ 10,649
Mutual funds	8,870,680	8,171,376
Participants' loans	<u>480,997</u>	<u>495,582</u>
 Net assets available for benefits , at fair value	 <u>\$ 9,351,677</u>	 <u>\$ 8,677,607</u>

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Statement of Changes in Net Assets Available for Benefits (Modified Cash Basis)
Years Ended December 31, 2011 and 2010

	2011	2010
Additions		
Additions to net assets attributable to:		
Investment loss		
Net (depreciation)/appreciation in fair value of investments	\$ (341,893)	\$ 938,691
Interest and Dividends	242,585	24,466
	<u>(99,308)</u>	<u>963,157</u>
Contributions:		
Employer's	150,815	113,174
Participants'	862,600	802,343
Participant rollovers into plan	0	22,119
	<u>1,013,415</u>	<u>937,636</u>
Total additions	<u>914,107</u>	<u>1,900,793</u>
Deductions		
Deductions from net assets attributable to:		
Administrative expenses	3,062	5,949
Benefits paid to participants	236,975	320,354
	<u>240,037</u>	<u>326,303</u>
Total deductions	<u>240,037</u>	<u>326,303</u>
Net increase	674,070	1,574,490
Net assets available for benefits		
Beginning of year	8,677,607	7,103,117
End of year	<u>\$ 9,351,677</u>	<u>\$ 8,677,607</u>

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

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan

The following brief description of the Middle Atlantic Products, Inc. 401(k) Savings Plan provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees, as defined, of Middle Atlantic Products, Inc. (the "Company") deemed to be employees under Internal Revenue Code (the "Code") Section 414(n) or 414(o) who have three consecutive months of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Additional information concerning the Plan and its provisions can be found in the summary plan description. A copy of that document can be obtained from the Plan Administrator through Middle Atlantic Products, Inc., 300 Fairfield Road, Fairfield, NJ 07004.

Contributions

The Plan provides for a salary reduction plan which is a savings plan that allows participants to defer up to 15% of their annual compensation through contributions to the Plan, subject to an annual limitation set forth in the Code. Contributions to the Plan on behalf of the participants are made by the Company in an amount equal to a discretionary percentage of the participants' salary reduction to be determined by the Company. Such percentage was 50% in both 2011 and 2010. For the years ended December 31, 2011 and 2010 the Company's maximum matching contribution was \$750.

The total of the annual contributions to the Plan on behalf of a participant (including the participant's contribution) is subject to a defined total dollar contribution limit and a defined contribution compensation limit that is based on the participant's annual compensation as set forth in the Code.

A participant may, with the consent of the plan Administrator, make a rollover contribution to the Plan at any time. Rollover contributions are assets transferred to the Plan from a qualified savings plan in which employees participated prior to their employment by the Company.

Investment Options

The Plan's investments are held by JPMorgan Chase Bank N.A. Contributions to the Plan by or on behalf of a Plan participant are invested at the election of the participant in mutual funds.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

1. Description of Plan - Continued

Participant's Accounts and Vesting

Each participant's account includes the participant's contribution and the Company's contributions plus earnings thereon. Participants' contributions are 100% vested and non-forfeitable at all times. In general, participants become fully vested in the Company's matching contributions after four years of service. On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in their account, or in a series of installments or the purchase of an annuity. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Forfeitures of non vested benefits are used to reduce matching Company contributions.

Payment of Benefits

Payments of benefits to participants are recorded upon distribution. There were no benefits payable to former and retired participants at December 31, 2011 or 2010.

Administrative Expenses

All administrative expenses are paid by the Company.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements are prepared on the modified cash basis of accounting; consequently certain income and the related assets are recognized when received rather than when earned and certain obligations are recognized when paid rather than when the obligations are incurred. Accordingly, the accompanying financial statements are not intended to be presented in conformity with accounting principles generally accepted in the United States of America.

Use of Estimates

The preparation of financial statements requires Plan management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Valuation of investments and investment income

Investments in the mutual funds are stated at fair value. Such fair values are based on the current market prices of the underlying U.S. Government obligations, corporate bonds, short-term investments and common stocks in mutual funds. Participant loans are stated at cost, which approximate fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest and dividend income are recorded on the cash basis.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

3. Investments

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

	<u>2011</u>	<u>2010</u>
John Hancock Mutual Funds:		
JH Lifestyle Growth	\$ -	\$ 1,316,292
JH Lifestyle Balanced	-	1,214,720
500 Index Fund	-	610,642
JH Lifestyle Moderate	-	487,659
JPMorgan Chase Mutual Funds:		
JPMorgan Smartretment 2015-Select	\$ 534,464	\$ -
JPMorgan Smartretment 2020-Select	1,594,867	-
JPMorgan Smartretment 2025-Select	1,299,579	-
JPMorgan Smartretment 2030-Select	1,610,482	-
JPMorgan Smartretment 2035-Select	989,791	-
JPMorgan Smartretment 2040-Select	795,547	-

4. Related Party Transactions

Certain investments are in mutual funds held by the Custodian; therefore these transactions are considered party-in-interest transactions.

5. Participants' Loans

Participants may obtain loans from the Plan, subject to approval by the Plan's Administrator. However, participants may not obtain a loan from the Plan until any existing loan is paid in full. The minimum loan is \$500. The maximum that may be borrowed from the participant's vested account balance is the lesser of \$50,000 or 50% of the participant's vested account balance. Participants can only have one loan outstanding at a time. Loan payments are made through payroll deductions over a period that may not exceed ten years for the purchase of a primary residence and five years for all other loans, from the date the loan was made.

6. Income Tax Status

The Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code and that the Plan was qualified and the related trust was tax-exempt as of December 31, 2011.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

7. Plan Termination

The Company intends to continue the Plan indefinitely, but reserves the right to terminate it at any time, subject to the provisions of ERISA. Upon termination of the Plan, all participants will become 100% vested in their account balances under the Plan.

8. Certifications by Custodians

The following account balances and transactions were obtained from data that has been prepared and certified to as complete and accurate by the custodians.

Statements of net assets available for benefits (modified cash basis):
Investments – Mutual funds

Statements of changes in net assets available for benefits (modified cash basis):
Net appreciation (depreciation) in fair value of investments
interest and dividends

Schedule of assets held for investment purposes (modified cash basis)

9. Risks and Uncertainties

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

10. Fair Value Measurements

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques need to maximize the use of observable inputs and minimize the use of unobservable inputs. Valuation techniques used to measure fair value are defined as follows:

- Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 - Inputs to the valuation methodology include: (a) quoted prices for similar assets or liabilities in active markets; (b) quoted prices for identical or similar assets or liabilities in inactive markets; (c) inputs other than quoted prices that are observable for the asset or liability; and (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

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

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

Following is a description of the valuation methodologies used for assets measured at fair value.

- Money market funds: Valued at cost plus accrued interest, which approximates fair value.
- Mutual funds: Valued at net asset value (“NAV”) of shares held by the Plan at year end, which is a practical expedient. The NAV is a quoted price in an active market, which represents the net asset value of the securities held by the Plan at year end.
- Common collective trusts: The fair value of the common collective trusts are determined by the trustees of the common collective trust based on the underlying assets, which represents the net asset value, a practical expedient to fair value, of units held by the Plan.
- Participant loans: Valued at the outstanding balances which approximates fair value.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future 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.

Assets at fair value as of December 31, 2011 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,870,680	\$ -	\$ -	\$ 8,870,680
Participant loans	-	-	480,997	480,997
Total assets at fair value	<u>\$ 8,870,680</u>	<u>\$ -</u>	<u>\$ 480,997</u>	<u>\$ 9,351,677</u>

Assets at fair value as of December 31, 2010 are as follows:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	\$ 8,171,376	\$ -	\$ -	\$ 8,171,376
Participant loans	-	-	495,582	495,582
Total assets at fair value	<u>\$ 8,171,376</u>	<u>\$ -</u>	<u>\$ 495,582</u>	<u>\$ 8,666,958</u>

Middle Atlantic Products, Inc. 401(k) Savings Plan
Notes to Financial Statements
Years Ended December 31, 2011 and 2010

10. Fair Value Measurements - Continued

The following is the summary of changes in the fair value of the Plan's level 3 assets.

December 31, 2011	Participant Loans
Balance, beginning of year	\$ 495,582
Issuances (repayments), net	<u>(14,585)</u>
Balance, end of year	<u>\$ 480,997</u>
 December 31, 2010	 Participant Loans
Balance, beginning of year	\$ 401,366
Issuances (repayments), net	<u>94,216</u>
Balance, end of year	<u>\$ 495,582</u>

Supplemental Schedule

Middle Atlantic Products, Inc. 401(k) Savings Plan**E.I. # 22-235572 Plan # 001****Schedule of Assets (Held at End of Year)****(Modified Cash Basis)****(Schedule H to the 2011 Form 5500)****December 31, 2011**

Identity of Investment	Cost (A)	Value
JPM Mutual Funds		
Alger Capital Appreciation-I	\$	30,281
Amer Cent Inflation Adj Bond A		4,318
American Funds Europacific-R3		12,524
Franklin Age High Income Fund-A		95,560
Goldman Sachs Growth Opps Fund-A		49,256
Hartford Dividend & Growth-R4		254,431
Invesco Small Cap Value A		33,607
JPMCB Stable Asset Inc F-15		235,305
JPMorgan Core Bond Select		127,343
JPMorgan Equity Index Select		66,986
JPMorgan Smartretment 2015-Select		534,464
JPMorgan Smartretment 2020-Select		1,594,867
JPMorgan Smartretment 2025-Select		1,299,579
JPMorgan Smartretment 2030-Select		1,610,482
JPMorgan Smartretment 2035-Select		989,791
JPMorgan Smartretment 2040-Select		795,547
JPMorgan Smartretment 2045-Select		223,443
JPMorgan Smartretment 2050-Select		78,138
JPMorgan Smartretment Income-I		261,855
JPMorgan U.S. Equity Select		38,055
Lord Abbett Developing Growth-A		64,994
Nuveen Mid Cap Index-A		59,639
Oakmark International Fund-I		181,818
Oppenheimer Intl Bond-A		98,716
Pioneer Strategic Income Fund-A		69,730
Ridgeworth Clas Mid-Cap Val Eq-A		21,694
Ridgeworth Small Cp Vlu Eqty-A		38,257
Cash		0
Participants' loans (interest at rates ranging from 4.25% to 9.25%; various maturity dates; collateralized by participant account balances.		480,997
	\$	9,351,677

(A) Cost not required.