

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2011</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☐ Form 5558; ☐ automatic extension; ☒ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>EAST BALT., INC. EMPLOYEES PENSION PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>05/01/1981</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>05/01/1981</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>05/01/1981</u>					
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>EAST BALT., INC.</u> <u>1801 WEST 31ST PLACE</u> <u>CHICAGO, IL 60608</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>36-3155088</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>773-376-4444</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>311800</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>36-3155088</u>	2c Sponsor's telephone number <u>773-376-4444</u>	2d Business code (see instructions) <u>311800</u>	
2b Employer Identification Number (EIN) <u>36-3155088</u>					
2c Sponsor's telephone number <u>773-376-4444</u>					
2d Business code (see instructions) <u>311800</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	11/29/2012	JOHN W KENT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	11/29/2012	JOHN W KENT
	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") EAST BALT., INC. 1801 WEST 31ST PLACE CHICAGO, IL 60608	3b Administrator's EIN 36-3155088 3c Administrator's telephone number 773-376-4444
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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	135
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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	96
b Retired or separated participants receiving benefits.....	6b	2
c Other retired or separated participants entitled to future benefits.....	6c	29
d Subtotal. Add lines 6a , 6b , and 6c	6d	127
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	
f Total. Add lines 6d and 6e	6f	127
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	2

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:

1A 1G 3D 3H

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

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

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

a Pension Schedules

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

b General Schedules

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

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2011</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

Round off amounts to nearest dollar.
Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan EAST BALT., INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF EAST BALT., INC.	D Employer Identification Number (EIN) 36-3155088

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2011		
2 Assets:		
a Market value	2a	24302504
b Actuarial value	2b	24302504
3 Funding target/participant count breakdown:	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	3a 3	1620411
b For terminated vested participants	3b 25	1202023
c For active participants:		
(1) Non-vested benefits	3c(1)	380267
(2) Vested benefits	3c(2)	21157361
(3) Total active	3c(3) 107	21537628
d Total	3d 135	24360062
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐		
a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5 Effective interest rate	5	6.07 %
6 Target normal cost	6	1778287

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

<div>SIGN HERE</div>	<div>10/15/2012</div> <div>Signature of actuary</div> <div>JOSEPH W GEBHARDT, EA</div> <div>Type or print name of actuary</div> <div>GEBHARDT PENSION CONSULTING LLC</div> <div>Firm name</div> <div>9515 DEERECO ROAD SUITE 819 TIMONIUM, MD 21093</div> <div>Address of the firm</div>	<div>Date</div> <div>11-04399</div> <div>Most recent enrollment number</div> <div>443-841-7261</div> <div>Telephone number (including area code)</div>
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

Part II		Beginning of year carryover and prefunding balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	3245992
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	3245992
10	Interest on line 9 using prior year's actual return of <u>12.15</u> %	0	394388
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		1715945
b	Interest on (a) using prior year's effective rate of <u>6.60</u> % except as otherwise provided (see instructions)		113252
c	Total available at beginning of current plan year to add to prefunding balance		1829197
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	3640380

Part III		Funding percentages	
14	Funding target attainment percentage	14	84.81 %
15	Adjusted funding target attainment percentage	15	84.81 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	81.30 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV		Contributions and liquidity shortfalls			
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
07/01/2011	1526686	0			
			Totals ▶	18(b)	1526686
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contributions from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 1490310
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No	
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☒ No	
c If 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: 2.94%	2nd segment: 5.82%	3rd segment: 6.46 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	1778287	
b Excess assets, if applicable, but not greater than 31a	31b		
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	3697938	597573	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	2375860	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	885550	885550
36 Additional cash requirement (line 34 minus line 35)	36	1490310	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1490310	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40		

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42		
43 Excess installment acceleration amount to be carried over to future plan years	43		

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 EAST BALT., INC. EMPLOYEES PENSION PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 EAST BALT., INC.	D Employer Identification Number (EIN) 36-3155088	

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)	1000000	
(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)	1338620	64955
(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)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	21991366	22764484
(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	24329986	22829439

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		

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	24329986	22829439
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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)	1526686	
(B) Participants	2a(1)(B)		
(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)		1526686
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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(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)	965168	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		965168
(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)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	-1190196	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		-1190196
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1301658

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2802205	
(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)		2802205
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)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2802205

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-1500547
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: **PLANTE & MORAN, PLLC** (2) EIN: **38-1357951**

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.).....			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

5b(1) Name of plan(s)

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
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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>EAST BALT., INC. EMPLOYEES PENSION 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>EAST BALT., INC.</u>	D Employer Identification Number (EIN) <u>36-3155088</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>36-3889187</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 <u>9</u>

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

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): _____

**East Balt., Inc.
Employees' Pension Plan**

*Financial Statements for the
Years Ended December 31, 2011 and 2010*

{ Financial Statements }

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East Balt., Inc. Employees' Pension Plan

Years Ended December 31, 2011 and 2010

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Independent Auditor's Report

Board of Trustees
East Balt., Inc.
Employees' Pension Plan
Chicago, Illinois

We were engaged to audit the financial statements of **East Balt., Inc. Employees' Pension Plan** as of and for the year ended December 31, 2011, and supplemental schedules as of and for the year ended December 31, 2011, as listed in the accompanying index. These financial statements and supplemental schedules are the responsibility of the plan's management. Blackman Kallick, LLP was engaged to audit the financial statements of the plan as of December 31, 2010, and their report dated October 7, 2011, expressed a disclaimer of opinion on those statements for the same circumstances indicated below. Blackman Kallick, LLP subsequently merged into Plante & Moran, PLLC.

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 4, which was certified by Schwab Institutional, the custodian of the plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the custodian holds the plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the year ended December 31, 2011, that the information provided to the plan administrator by the custodian is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedules taken as a whole. The supplemental schedules are presented for the purpose of additional analysis and are not required parts of the financial statements but are 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 2011 financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

October 10, 2012

East Balt., Inc. Employees' Pension Plan

Years Ended December 31, 2011 and 2010

Financial Statements

East Balt., Inc. Employees' Pension Plan

Statements of Net Assets Available for Benefits
December 31, 2011 and 2010

	2011	2010
Assets		
Investments, at fair value	\$ 22,764,484	\$ 21,991,366
Contributions receivable	-	1,000,000
Cash and cash equivalents - Money market fund	64,955	1,338,620
Net Assets Available for Benefits	\$ 22,829,439	\$ 24,329,986

East Balt., Inc. Employees' Pension Plan

Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2011 and 2010

	2011	2010
Investment (Loss) Income		
Net (depreciation) appreciation in fair value of investments	\$ (1,190,196)	\$ 1,755,860
Interest and dividends	965,168	624,594
Total Investment (Loss) Income	(225,028)	2,380,454
Employer Contributions	1,526,686	3,501,829
Deductions from Net Assets		
Benefits paid to participants	2,802,205	1,969,471
Net (Decrease) Increase	(1,500,547)	3,912,812
Net Assets Available for Benefits		
Beginning of year	24,329,986	20,417,174
End of year	<u><u>\$ 22,829,439</u></u>	<u><u>\$ 24,329,986</u></u>

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 1 - Description of Plan

The following description of East Balt., Inc. Employees' Pension Plan (the plan) is provided for general information purposes only. Participants should refer to the plan agreement for more complete information.

General

The plan is a defined benefit pension plan covering substantially all nonunion, full-time employees of East Balt., Inc. (the plan sponsor) who are at least 21 years of age and have completed one year of service. The plan's eligibility provisions were amended in 2009. Based on the new provisions, no employees hired after September 15, 2009 will be eligible to enter the plan.

The plan provides for pension and disability benefits and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Pension Benefits

A participant is eligible for benefit payments at age 65. The plan permits early retirement at age 62. Married participants will receive their pension benefit in the form of a joint and survivor annuity, and single participants will receive their pension benefit in the form of a life annuity unless another form of payment is elected by the participant. Monthly benefit payments are determined by the application of a benefit ratio to a participant's average monthly salary for the five consecutive calendar years yielding the highest average.

Death and Disability Benefits

When an active employee dies, his or her spouse, if the proper elections were made, will receive a joint and survivor monthly annuity of a specific percentage of the deceased employee's monthly benefits. A surviving spouse will begin to receive annuity payments at the time the deceased employee would have reached the early retirement age of 62. Active employees who become disabled, as defined by the plan, receive the full value of their accrued benefit as soon as practical in the plan year in which the disability was determined.

Vesting

A participant's accrued benefit is valued annually, and the participant is vested according to the following schedule:

<u>Years of Service</u>	<u>Vested %</u>
1	0
2	0
3	20
4	40
5	60
6	80
7	100

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 1 - Description of Plan (Continued)

Administration of the Plan

A majority of the plan's investment and administrative expenses are paid by East Balt., Inc., the plan's sponsor.

Subsequent Events

The plan administrator has evaluated subsequent events through October 10, 2012, the date the financial statements were available to be issued.

Note 2 - Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements are prepared on the accrual basis of accounting.

Management of the Trust Fund

All of the plan's assets are held in investments managed by DiMeo Schneider & Associates, L.L.C. The custodian of the plan is Schwab Institutional. All information relating to the value of the plan's assets and related investment income and expenses, was obtained from reports submitted by the custodian. These reports were certified by the custodian as being complete and accurate.

Investments

Investments are reported at fair value in accordance with accounting principles generally accepted in the United States of America (GAAPUSA). See Note 3 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Effective January 1, 2010, the plan adopted new guidance that required the plan to report significant transfers between Level 1 and Level 2 and the reasons for those transfers, as well as disclosing the reasons for transfers in or out of Level 3. Additionally, the guidance required the plan to clarify existing disclosure requirements about the level of disaggregation and inputs and valuation techniques. The adoption of this guidance did not have an impact on the plan's financial statements.

Effective January 1, 2011, the plan also adopted new guidance requiring the reconciliation of changes in Level 3 fair value measurements to present purchases, sales and settlements separately on a gross basis rather than as a net amount. The adoption of this guidance did not have a significant impact on the plan's financial statements.

The plan's investments are exposed to risks such as interest rate, credit and overall market volatility. Due to these risk factors, it is reasonably possible that changes in the value of investments will occur in the near term and could materially affect the amounts reported in the financial statements.

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 2 - Summary of Significant Accounting Policies (Continued)

Payments of Benefits

Benefits are recorded when paid.

Management Estimates

The preparation of financial statements in conformity with GAAPUSA requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of additions to and deductions from net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Note 3 - Fair Value Measurements

GAAPUSA defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants in the principal market or, in the absence of a principal market, the most advantageous market accessible to the reporting entity as of the measurement date. Under GAAPUSA, the principal market is the market in which the reporting entity would sell the asset or transfer the liability with the greatest volume and level of activity. The most advantageous market, which may be a hypothetical market, is the market in which the reporting entity would sell the asset or transfer the liability with the price that maximizes the amount that would be received for the asset or minimizes the amount that would be paid to transfer the liability, considering transaction costs in the respective market.

GAAPUSA describes three approaches to measuring fair value: the market approach, the income approach and the cost approach. Each approach includes multiple valuation techniques. GAAPUSA does not prescribe which valuation technique should be used when measuring fair value, but does establish a fair value hierarchy that prioritizes the inputs used in applying the various techniques based on the degree to which such inputs are observable to market participants. Inputs broadly refer to the assumptions that market participants use to make pricing decisions, including assumptions about risk.

The plan's investments are classified in one of the following three categories based upon the inputs used to determine their respective fair values.

- Level 1 - Quoted prices (unadjusted) for identical assets or liabilities in active markets as of the reporting date. Active markets are those in which transactions for the asset or liability occur in sufficient frequency and volume to provide pricing information on an ongoing basis.
- Level 2 - Observable market-based inputs or unobservable inputs that are corroborated by market data. These inputs may include quoted prices for similar assets or liabilities in active markets as well as quoted prices for identical or similar assets or liabilities in active markets.
- Level 3 - Unobservable inputs that cannot be corroborated by market data. These inputs reflect management's best estimate of fair value using its own assumptions about the assumptions a market participant would use in pricing the asset or liability.

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 3 - Fair Value Measurements (Continued)

When the inputs used to value an investment fall into more than one level, the investment is classified in its entirety based on the lowest level input that is significant to that investment's fair value measurement. Management's assessment of the significance of a particular input to the fair value measurement requires judgment and is dependent on factors specific to the investment. Valuation techniques used need to maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

As of December 31, 2011 and 2010, the following valuation methodologies have been used to value the plan's investments:

- Mutual funds - Valued at the reported NAV of the shares held by the plan at year-end.
- Cash and cash equivalents - Money market fund - Valued at an NAV of \$1 as reported by the fund manager.

The following tables summarize by level within the fair value hierarchy the plan's investments accounted for at fair value on a recurring basis as of December 31, 2011 and 2010:

	2011			
	Level 1	Level 2	Level 3	Total
Mutual Funds				
Large Cap Funds	\$ 3,279,669	\$ -	\$ -	\$ 3,279,669
Small Cap Funds	2,191,883	-	-	2,191,883
International Funds	4,087,101	-	-	4,087,101
Real Estate Fund	745,255	-	-	745,255
Commodity Fund	1,080,056	-	-	1,080,056
Bond Funds	11,380,520	-	-	11,380,520
Cash and Cash Equivalents - Money Market Fund	-	64,955	-	64,955
	\$ 22,764,484	\$ 64,955	\$ -	\$ 22,829,439
	2010			
	Level 1	Level 2	Level 3	Total
Mutual Funds				
Large Cap Funds	\$ 3,211,924	\$ -	\$ -	\$ 3,211,924
Small Cap Funds	2,140,559	-	-	2,140,559
International Funds	4,267,589	-	-	4,267,589
Real Estate Fund	757,706	-	-	757,706
Commodity Fund	1,209,349	-	-	1,209,349
Bond Funds	10,404,239	-	-	10,404,239
Cash and Cash Equivalents - Money Market Fund	-	1,338,620	-	1,338,620
	\$ 21,991,366	\$ 1,338,620	\$ -	\$ 23,329,986

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 4 - Investments

The plan's investments were held by Schwab Institutional as of December 31, 2011 and 2010. The following table presents the fair values of those investments. Investments that represent 5% or more of the plan's net assets as of December 31, 2011 or 2010 are identified separately.

	2011	2010
Artio International Equity Fund (95,933 and 75,633 units as of December 31, 2011 and 2010, respectively)	\$ 2,120,120	\$ 2,224,367
Dodge & Cox Income Fund (391,744 and 361,468 units as of December 31, 2011 and 2010, respectively)	5,210,191	4,782,215
Lazard Emerging Markets Fund (89,090 and 71,928 units as of December 31, 2011 and 2010, respectively)	1,532,356	1,596,093
PIMCO High Yield Bond Fund (131,301 and 114,866 units as of December 31, 2011 and 2010, respectively)	1,179,086	1,068,253
PIMCO Real Return Bond Fund (326,791 and 310,221 units as of December 31, 2011 and 2010, respectively)	3,852,868	3,524,105
Vanguard 500 Index Admiral Fund (34,288 and 9,537 units as of December 31, 2011 and 2010, respectively)	3,279,669	912,534
Other	5,590,194	7,883,799
	<u>\$ 22,764,484</u>	<u>\$ 21,991,366</u>

For the years ended December 31, 2011 and 2010, the plan's mutual fund investments (including gains and losses on investments bought and sold as well as held during the year) (depreciated)/appreciated in fair value by (\$1,190,196) and \$1,755,860, respectively.

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the plan's custodian has certified as to the completeness and accuracy of the plan's investments reflected in the statements of net assets available for benefits as of December 31, 2011 and 2010, and the related investment activity reflected in the statements of changes in net assets available for benefits for the years then ended, as well as the investment information included in the schedule of assets held at end of year as of December 31, 2011, and the schedule of reportable transactions for the year ended December 31, 2011, as indicated above and in total.

Note 5 - Accumulated Plan Benefits

Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions, which are attributable under the plan's provisions, to services rendered by the employees to the valuation date.

Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries; (b) beneficiaries of employees who have died; and (c) present employees or their beneficiaries. Benefits under the plan are based on a participant's average monthly salary for the five consecutive calendar years yielding the highest average.

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 5 - Accumulated Plan Benefits (Continued)

Benefits payable under all eligible circumstances, retirement, death, disability and termination of employment, are included to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an actuary from Gebhardt Pension Consulting, LLC and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

The significant actuarial assumptions used in the valuations as of January 1, 2012 and 2011 were retirement at age 65 and a mortality assumption based on the 1994 Group Annuity Reserving Table. The 2012 and 2011 valuations include an assumed rate of return on investments of 7% and an annual increase in salary scale of 2.5% for both years.

The foregoing actuarial assumptions are based on the presumption that the plan will continue. Were the plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The accumulated plan benefit information for each plan year as of January 1, 2012 and 2011, respectively, is as follows:

	2012	2011
Actuarial present value of accumulated plan benefits		
Vested	\$ 20,349,596	\$ 19,998,752
Nonvested	367,170	313,416
	<u><u>\$ 20,716,766</u></u>	<u><u>\$ 20,312,168</u></u>
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 20,312,168</u>	<u>\$ 19,013,215</u>
Increase (decrease) during the year attributed to		
Interest	1,323,775	1,262,057
Benefits paid to participants	(2,802,205)	(1,969,471)
Benefits accumulated	<u>1,883,028</u>	<u>2,006,367</u>
Net Increase	<u>404,598</u>	<u>1,298,953</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 20,716,766</u></u>	<u><u>\$ 20,312,168</u></u>

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 6 - Funding Policy

The plan sponsor has agreed to voluntarily contribute such amounts as are necessary to provide assets sufficient to meet the benefits to be paid to plan members based on computations made by a consulting actuary. The plan sponsor has met the minimum funding requirements of ERISA in 2011 and 2010.

Note 7 - Plan Termination

Although the plan sponsor has not expressed any intention to do so, the sponsor has the right under the plan to discontinue its contributions at any time and to terminate the plan subject to the provisions set forth in ERISA.

In the event the plan terminates, its net assets will be allocated as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- (a) Benefits that became payable three or more years before the effective date of the plan termination or that could have become payable at the beginning of such three-year period. The amount is limited to the lowest benefit payable during those three years. The amount is further limited to the lowest benefit that would be payable under the plan provisions in effect at any time during the five years preceding plan termination.
- (b) Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC), a U.S. governmental agency, up to the applicable limitations as discussed below.
- (c) All other vested benefits payable under the plan not covered by priorities (a) and (b) above in the following preference:
 - 1. To any participant who had retired under the normal retirement or early retirement provisions of the plan or who was eligible to retire under these provisions.
 - 2. To any participant entitled to a deferred vested pension as defined or who would have been eligible for a deferred vested pension.
- (d) The remaining assets are to be allocated to provide the benefit accrued under the plan according to the respective actuarial value of each participant's accrued benefit.

Certain benefits under the plan are insured by the PBGC if the plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's benefits. However, the amount of benefit protection from the PBGC is subject to certain limitations. Vested benefits under the plan are guaranteed at the level in effect on the date of the plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For some annuitants, or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

Should the plan terminate at some future time, whether or not all participants receive their benefits will depend on the sufficiency, at that time, of the plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the plan sponsor and the level of benefits guaranteed by the PBGC.

East Balt., Inc. Employees' Pension Plan

Notes to Financial Statements

Note 8 - Income Tax Status

The plan obtained its latest determination letter on January 21, 2004, in which the Internal Revenue Service stated that the plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The plan has been amended since receiving the determination letter. However, the plan administrator and the plan's tax counsel believe that the plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the plan's financial statements.

GAAPUSA requires plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of December 31, 2011 and 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

Note 9 - Party-in-Interest Transactions

Certain money market funds held by the plan are managed by Schwab Institutional. Schwab Institutional is the custodian of the plan and, therefore, transactions relating to these investments qualify as party-in-interest transactions.

East Balt., Inc. Employees' Pension Plan

Supplemental Information

East Balt., Inc. Employees' Pension Plan

Schedule H, line 4i - Schedule of Assets Held at End of Year
December 31, 2011

E.I.N. 36-3155088 Plan Number 001

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost of Asset	(e) Current Value
Cash and Cash Equivalents				
*	Schwab Institutional	Money Market Fund	\$ 64,955	\$ 64,955
Mutual Funds				
	Artio	International Equity Fund	2,590,345	2,120,120
	Cohen & Steers	International Fund	740,221	434,625
	Credit Suisse	Commodity Fund	1,088,588	1,080,056
	Dodge & Cox	Income Fund	4,972,307	5,210,191
	Dreyfus	Premier Small Cap Fund	1,152,298	1,110,611
	Nuveen	Real Estate Securities Fund	755,871	745,255
	Prudential Jennison	Small Company Fund	990,342	1,081,272
	Lazard	Emerging Markets Fund	1,891,941	1,532,356
	PIMCO	Foreign Bond Fund	1,088,447	1,138,375
		High Yield Bond Fund	1,217,223	1,179,086
		Real Return Bond Fund	3,539,489	3,852,868
	Vanguard	500 Index Admiral Fund	3,351,780	3,279,669
				\$ 22,829,439

*Party-in-interest

East Balt., Inc. Employees' Pension Plan

Schedule H, line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2011

E.I.N. 36-3155088 Plan Number 001

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Schwab Institutional	Money Market Funds					
	All Purchases	\$ 1,441,024	\$ -	\$ 1,441,024	\$ 1,441,024	\$ -
	All Sales	-	2,764,744	2,764,744	2,764,744	-
Vanguard	500 Index Admiral Fund					
	Purchase	2,477,263	-	2,477,263	2,477,263	-
	All Purchases	2,533,371	-	2,533,371	2,533,371	-
Dodge & Cox	Stock Fund					
	Sale	-	1,242,772	1,187,780	1,242,772	54,992
	All Sales	-	1,242,772	1,187,780	1,242,772	54,992
Harbor	Capital Appreciation Fund					
	Sale	-	1,234,491	876,107	1,234,491	358,384
	All Sales	-	1,234,491	876,107	1,234,491	358,384

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

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

A This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or
☒ 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 ☐

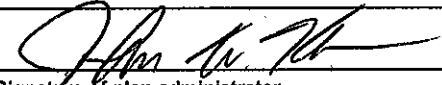
D Check box if filing under: ☐ Form 5558; ☐ automatic extension; ☒ the DFVC program;
☐ special extension (enter description) _____

Part II Basic Plan Information --- enter all requested information.

1a Name of plan East Balt., Inc. Employees' Pension Plan	1b Three-digit plan number (PN) ▶ 001
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) East Balt., Inc. 1801 West 31st Place US Chicago IL 60608	1c Effective date of plan 05/01/1981 2b Employer Identification Number (EIN) 36-3155088 2c Sponsor's telephone number (773) 376-4444 2d Business code (see instructions) 311800

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		11/7/2012	John W. Kent
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		11/7/2012	John W. Kent
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") Same		3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 20px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5	135
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	96
b Retired or separated participants receiving benefits	6b	2
c Other retired or separated participants entitled to future benefits	6c	29
d Subtotal. Add lines 6a , 6b , and 6c	6d	127
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	
f Total. Add lines 6d and 6e	6f	127
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	2
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer complete this item) . . .	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

1A 1G 3D 3H

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

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

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

a Pension Schedules

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

b General Schedules

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

**Schedule SB, line 22 -
Description of Weighted Average Retirement Age**

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

The age reported is the average of the assumed retirement ages for all active participants as of the valuation date rounded to the nearest whole age. For an active late retiree, the assumed retirement age may be later than the Plan's normal retirement age. Each participant's rate of retirement is assumed to be 100% of his/her assumed retirement age.

Schedule SB, line 19 - Discounted Employer Contributions

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

Valuation Date: 1/1/2011

	Date	Amount	Adjusted Contribution	Adjusted Prior Year Contribution	Adjusted Quarterly	Effective Rate	Penalty Rate
Applied Carryover Or Prefunding Bal	1/15/2012	\$68,000					
PFB Applied to MRC	1/1/2011	678	638	0	0	6.07	0
PFB Applied to Quarterly Contribution	1/15/2012	67,322	63,327	0	67,322	6.07	0
Applied Carryover Or Prefunding Bal	8/31/2012	\$974,227					
PFB Applied to MRC	1/1/2011	906,227	821,585	0	0	6.07	0
Totals for Applied Carryover or Prefunding Balance		\$974,227	\$885,550	\$0	\$67,322		
Deposited Contribution	1/4/2011	\$35,000					
Applied to Quarterly Contribution	4/15/2011	35,000	34,983	0	35,000	6.07	0
Deposited Contribution	3/2/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	55,000	54,470	0	55,000	6.07	0
Deposited Contribution	3/10/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	55,000	54,399	0	55,000	6.07	0
Deposited Contribution	3/15/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	55,000	54,356	0	55,000	6.07	0
Deposited Contribution	3/22/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	55,000	54,294	0	55,000	6.07	0
Deposited Contribution	3/29/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	55,000	54,233	0	55,000	6.07	0
Deposited Contribution	3/30/2011	\$37,000					
Applied to Quarterly Contribution	4/15/2011	37,000	36,478	0	37,000	6.07	0
Deposited Contribution	4/5/2011	\$55,000					
Applied to Quarterly Contribution	4/15/2011	51,502	50,726	0	51,502	6.07	0
Applied to Quarterly Contribution	7/15/2011	3,498	3,445	0	3,498	6.07	0
Deposited Contribution	4/12/2011	\$55,000					
Applied to Quarterly Contribution	7/15/2011	55,000	54,110	0	55,000	6.07	0
Deposited Contribution	4/19/2011	\$75,000					
Applied to Quarterly Contribution	7/15/2011	75,000	73,704	0	75,000	6.07	0
Deposited Contribution	4/27/2011	\$75,000					
Applied to Quarterly Contribution	7/15/2011	75,000	73,608	0	75,000	6.07	0
Deposited Contribution	5/4/2011	\$75,000					
Applied to Quarterly Contribution	7/15/2011	75,000	73,525	0	75,000	6.07	0
Deposited Contribution	5/11/2011	\$75,000					
Applied to Quarterly Contribution	7/15/2011	75,000	73,442	0	75,000	6.07	0
Deposited Contribution	5/20/2011	\$40,004					
Applied to Quarterly Contribution	7/15/2011	40,004	39,116	0	40,004	6.07	0
Deposited Contribution	6/16/2011	\$84,996					
Applied to Quarterly Contribution	10/15/2011	84,996	82,748	0	84,996	6.07	0
Deposited Contribution	6/22/2011	\$136,171					
Applied to Quarterly Contribution	10/15/2011	136,171	132,442	0	136,171	6.07	0
Deposited Contribution	6/28/2011	\$119,830					
Applied to Quarterly Contribution	10/15/2011	119,830	116,435	0	119,830	6.07	0
Deposited Contribution	7/1/2011	\$170,000					
Applied to Quarterly Contribution	10/15/2011	57,505	55,849	0	57,505	6.07	0
Applied to Quarterly Contribution	1/15/2012	112,495	109,255	0	112,495	6.07	0
Deposited Contribution	9/8/2011	\$113,685					
Applied to Quarterly Contribution	1/15/2012	113,685	109,188	0	113,685	6.07	0
Deposited Contribution	11/30/2011	\$105,000					

Schedule SB, line 19 -
Discounted Employer Contributions

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

Valuation Date: 1/1/2011

Applied to Quarterly Contribution	1/15/2012	105,000	99,504	0	105,000	6.07	0
Totals for Deposited Contribution		\$1,526,686	\$1,490,310	\$0	\$1,526,686		

Schedule SB, line 32 -
Schedule of Amortization Bases
East Balt., Inc. Employees' Pension Plan
36-3155088 / 009
For the plan year 1/1/2011 through 12/31/2011

Date Base Established	Original Base Amount	Type of Base	Present Value of Remaining Installments	Years Remaining Amortization Period	Amortization Installment
01/01/2011	3,697,938	Shortfall	3,697,938	7	597,573
Totals:			\$3,697,938		\$597,573

Schedule SB, Part V

Summary of Plan Provisions

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

<u>Employer:</u>	East Balt., Inc.		
	Type of Entity -	C-Corporation	
	EIN: 36-3155088	TIN:	Plan #: 009
<u>Dates:</u>	Effective - 5/1/1981	Year end - 12/31/2011	Valuation - 1/1/2011
<u>Eligibility:</u>	All employees excluding non-resident aliens, members of an excluded class and union		
	Minimum age - 21	Months of service - 12	
	Hours Required for - Eligibility - 1000	Benefit accrual - 1	Vesting - 1000
	Plan Entry - First day of 1st or 7th month of plan year on or next following eligibility satisfaction		
<u>Retirement:</u>	Normal - Attainment of age 65		
	Early - Attainment of age 62		
<u>Average Compensation:</u>	Highest 5 consecutive years of service		
	Top Heavy Minimum Benefit - Highest 5 consecutive top heavy years of participation		
<u>Plan Benefits:</u>	Retirement - Derived from the graded benefit formula below:		
	Employee Classification	Benefit Formula	
		2.5% of average monthly compensation per year of service after 1/1/1994 beginning year 1 limited to 20 year(s)	
		plus 0.5% of average monthly compensation per year of service after 1/1/1994 beginning year 21 limited to 35 year(s)	
	Accrued Benefit - Unit credit based on service. Service prior to 1/1/1994 is excluded		
	Minimum Benefit - None		
	Maximum Benefit - None		
	Maximum allowable distribution is lump sum equivalent of normal form not to exceed 415 maximum allowable distribution, which is the lesser amount computed using a) 5.5% interest and the Applicable Mortality Table or b) the greater of plan actuarial equivalence interest and mortality or 417(e) Minimum		
	Death Benefit - Present Value of Accrued Benefit		
<u>Top Heavy Minimum:</u>	None		
<u>IRS Limitations:</u>	415 Limits -	Percent: 100	Dollar: \$195,000
	Maximum 401(a)(17) compensation - \$245,000		
<u>Normal Form:</u>	Life Annuity		
<u>Optional Forms:</u>	Lump Sum		
	Life Annuity Guaranteed for 5 Years		
<u>Vesting Schedule:</u>	Years	Percent	
	0-2	0%	
	3	20%	
	4	40%	
	5	60%	
	6	80%	
	7	100%	
	Service is calculated using all years of service		

Schedule SB, Part V

Summary of Plan Provisions

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

Present Value of Accrued Benefit: Based on the greater of 417(e) or Actuarial Equivalence

417(e):

Interest Rates -

Segment #	Years	Rate %
Segment 1	0 - 5	2.47
Segment 2	6 - 20	5.07
Segment 3	> 20	6.10

Mortality Table - 11E - 2011 Applicable Mortality Table for 417(e) (unisex)

Actuarial Equivalence:

Pre-Retirement - Interest - 7%
Mortality Table - G94 - 1994 Group Annuity Reserving Proj 2002, Scale AA (unisex)

Post-Retirement - Interest - 7%
Mortality Table - G94 - 1994 Group Annuity Reserving Proj 2002, Scale AA (unisex)

Schedule SB, Part V

Statement of Actuarial Assumptions/Methods

East Balt., Inc. Employees' Pension Plan

36-3155088 / 009

For the plan year 1/1/2011 through 12/31/2011

Valuation Date: 1/1/2011

Funding Method: As prescribed in IRC Section 430

Age - Eligibility age at last birthday and other ages at nearest birthday

New participants are not included in current year's valuation

Retrospective Compensation - Highest 5 consecutive years of service

Form of Payment - Assumed form of payment for funding is 20% Life Annuity and 80% lump sum equivalent of normal form. Funding Target for lump sum is the greater of the present value of accrued benefit computed using funding segment rates and 417(e) Applicable Mortality Table or lump sum at the assumed retirement date of accrued benefit using plan actuarial equivalence discounted using appropriate segment rate. Lump sum on plan actuarial equivalence rates will not exceed 415 maximum allowable distribution, which is the lesser amount computed using a) 5.5% interest and the Applicable Mortality Table or b) the greater of plan actuarial equivalence interest and mortality or 417(e) Minimum

Interest Rates -

Segment rates for the Valuation Date as permitted under IRC 430(h)(2)(C)

Segment #	Year	Rate %
Segment 1	0 - 5	2.94
Segment 2	6 - 20	5.82
Segment 3	> 20	6.46

Pre-Retirement - Mortality Table - None

Turnover/Disability - None

Salary Scale - 2.5%

Expense Load - None

Ancillary Ben Load - None

Post-Retirement - Mortality Table - 11A - 2011 Funding Target - Annuitant - IRC 430(h)(3)(A)

Cost of Living - None

Lump Sum - G94 - 1994 Group Annuity Reserving Proj 2002, Scale AA (unisex) at 7%
or
11E - 2011 Applicable Mortality Table for 417(e) (unisex)

Asset Valuation Method: Fair market value of assets adjusted for contributions under IRC 430(g)(4)

Discrimination Test Assumptions:

HCE Determination - Based on all employees

Otherwise Excludable - Otherwise Excludable HCEs are included with the Not Otherwise Excludable employees

410(b)/401(a)(4) Testing:

Pre-Retirement - Interest - 8%

Post-Retirement - Interest - 8%

Mortality Table - U84 - 1984 Unisex

Permissively Aggregated Plans - Not tested As Single Plan

Compensation - Use current compensation to calculate the benefit accrual rate (annual method)

Testing Age - Normal retirement age or attained age, if older

Normal Form for MVAR - Joint with 50% Survivor Benefits

Schedule SB, line 26 -
Schedule of Active Participant Data
East Balt., Inc. Employees' Pension Plan
36-3155088/009
For the plan year 1/1/2011 through 12/31/2011

Years of Credited Service

Attained Age	Under 1 No.	1 to 4 No.	5 to 9 No.	10 to 14 No.	15 to 19 No.	20 to 24 No.	25 to 29 No.	30 to 34 No.	35 to 39 No.	40 & up No.
Under 25		3	1							
25 to 29		1	1							
30 to 34		5	5							
35 to 39		4	2							
40 to 44		5	6	5	6					
45 to 49	1	4	5		4					
50 to 54		3	4	6	7					
55 to 59		2	5	3	6					
60 to 64		3	1	2	5					
65 to 69			3		1					
70 & up					1					

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <hr/> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	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

► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>East Balt., Inc. Employees' Pension Plan</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>East Balt., Inc.</u>	D Employer Identification Number (EIN) <u>36-3155088</u>	
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other		
F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500		

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2011</u>			
2 Assets:			
a Market value	2a		24,302,504
b Actuarial value	2b		24,302,504
3 Funding target/participant count breakdown		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	3a	3	1,620,411
b For terminated vested participants	3b	25	1,202,023
c For active participants:			
(1) Non-vested benefits	3c(1)		380,267
(2) Vested benefits	3c(2)		21,157,361
(3) Total active	3c(3)	107	21,537,628
d Total	3d	135	24,360,062
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5		6.07
6 Target normal cost	6		1,778,287

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	<div style="text-align: center;">  Signature of actuary <u>Joseph W Gebhardt, EA</u> Type or print name of actuary <u>Gebhardt Pension Consulting LLC</u> Firm name <u>9515 Deereco Road Suite 819</u> <u>US Timonium MD 21093</u> Address of the firm </div>	<div style="text-align: center;"> <u>10/15/2012</u> Date <u>11-04399</u> Most recent enrollment number <u>(443) 841-7261</u> Telephone number (including area code) </div>
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	3,245,992
8 Portion elected to use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	3,245,992
10 Interest on line 9 using prior year's actual return of <u>12.15</u> %	0	394,388
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38 from prior year)		1,715,945
b Interest on (a) using prior year's effective rate of <u>6.60</u> % except as otherwise provided (see instructions)		113,252
c Total available at beginning of current plan year to add to prefunding balance..		1,829,197
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	3,640,380

Part III Funding percentages

14 Funding target attainment percentage	14	84.81 %
15 Adjusted funding target attainment percentage	15	84.81 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	81.30 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/15/2011	1,526,686				
Totals ▶ 18(b)				1,526,686	18(c)

19 Discounted employer contributions -- see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contribution from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..	19c	1,490,310

20 Quarterly contributions and liquidity shortfall(s):

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☒ No
- c** If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: 2.94 %	2nd segment: 5.82 %	3rd segment: 6.46 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions)	☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)			
a Target normal cost (line 6)	31a	1,778,287	
b Excess assets, if applicable, but not greater than 31a	31b		
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	3,697,938		597,573
b Waiver amortization installment			
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	2,375,860	
	Carryover balance	Prefunding Balance	Total balance
35 Balances elected to use to offset funding requirement	0	885,550	885,550
36 Additional cash requirement (line 34 minus line 35)	36	1,490,310	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1,490,310	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39		
40 Unpaid minimum required contribution for all years	40		

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42		
43 Excess installment acceleration amount to be carried over to future plan years	43		

East Balt., Inc. Employees' Pension Plan

Schedule H, line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2011

E.I.N. 36-3155088 Plan Number 001

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Schwab Institutional	Money Market Funds					
	All Purchases	\$ 1,441,024	\$ -	\$ 1,441,024	\$ 1,441,024	\$ -
	All Sales	-	2,764,744	2,764,744	2,764,744	-
Vanguard	500 Index Admiral Fund					
	Purchase	2,477,263	-	2,477,263	2,477,263	-
	All Purchases	2,533,371	-	2,533,371	2,533,371	-
Dodge & Cox	Stock Fund					
	Sale	-	1,242,772	1,187,780	1,242,772	54,992
	All Sales	-	1,242,772	1,187,780	1,242,772	54,992
Harbor	Capital Appreciation Fund					
	Sale	-	1,234,491	876,107	1,234,491	358,384
	All Sales	-	1,234,491	876,107	1,234,491	358,384

East Balt., Inc. Employees' Pension Plan

Schedule H, line 4i - Schedule of Assets Held at End of Year
December 31, 2011

E.I.N. 36-3155088 Plan Number 001

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost of Asset	(e) Current Value
Cash and Cash Equivalents				
*	Schwab Institutional	Money Market Fund	\$ 64,955	\$ 64,955
Mutual Funds				
	Artio	International Equity Fund	2,590,345	2,120,120
	Cohen & Steers	International Fund	740,221	434,625
	Credit Suisse	Commodity Fund	1,088,588	1,080,056
	Dodge & Cox	Income Fund	4,972,307	5,210,191
	Dreyfus	Premier Small Cap Fund	1,152,298	1,110,611
	Nuveen	Real Estate Securities Fund	755,871	745,255
	Prudential Jennison	Small Company Fund	990,342	1,081,272
	Lazard	Emerging Markets Fund	1,891,941	1,532,356
	PIMCO	Foreign Bond Fund	1,088,447	1,138,375
		High Yield Bond Fund	1,217,223	1,179,086
		Real Return Bond Fund	3,539,489	3,852,868
	Vanguard	500 Index Admiral Fund	3,351,780	3,279,669
				\$ 22,829,439

*Party-in-interest