

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
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>12/01/2011</u> and ending <u>11/30/2012</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>CLARCOR INC. 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>003</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/01/1965</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>003</u>	1c Effective date of plan <u>12/01/1965</u>	
1b Three-digit plan number (PN) ▶	<u>003</u>				
1c Effective date of plan <u>12/01/1965</u>					
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>CLARCOR INC.</u> <u>840 CRESCENT CENTRE DRIVE</u> <u>SUITE 600</u> <u>FRANKLIN, TN 37067-4687</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>36-0922490</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>615-771-3100</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>551112</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>36-0922490</u>	2c Sponsor's telephone number <u>615-771-3100</u>	2d Business code (see instructions) <u>551112</u>	
2b Employer Identification Number (EIN) <u>36-0922490</u>					
2c Sponsor's telephone number <u>615-771-3100</u>					
2d Business code (see instructions) <u>551112</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.	09/16/2013	DAVID LINDSAY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/16/2013	DAVID LINDSAY
	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") CLARCOR INC. 840 CRESCENT CENTRE DRIVE SUITE 600 FRANKLIN, TN 37067-4687	3b Administrator's EIN 36-0922490 3c Administrator's telephone number 615-771-3100
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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	2749
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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	851
b Retired or separated participants receiving benefits.....	6b	941
c Other retired or separated participants entitled to future benefits.....	6c	761
d Subtotal. Add lines 6a , 6b , and 6c	6d	2553
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	126
f Total. Add lines 6d and 6e	6f	2679
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	0

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 1I

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

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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 12/01/2011 and ending 11/30/2012

▶ **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>CLARCOR INC. PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>CLARCOR INC.</u>	D Employer Identification Number (EIN) <u>36-0922490</u>
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 <u>12</u> Day <u>01</u> Year <u>2011</u>
2	Assets:
a	Market value 2a <u>105078250</u>
b	Actuarial value 2b <u>103238000</u>
3	Funding target/participant count breakdown:
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>1030</u> <u>51448770</u>
b	For terminated vested participants 3b <u>804</u> <u>18421488</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>28207</u>
(2)	Vested benefits 3c(2) <u>44710313</u>
(3)	Total active 3c(3) <u>920</u> <u>44738520</u>
d	Total 3d <u>2754</u> <u>114608778</u>
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 <u>5.52 %</u>
6	Target normal cost 6 <u>2987846</u>

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	<u>09/09/2013</u>
Signature of actuary	Date
<u>CHRIS NOBLE</u>	<u>11-06196</u>
Type or print name of actuary	Most recent enrollment number
<u>TOWERS WATSON DELAWARE INC.</u>	<u>206-812-7271</u>
Firm name	Telephone number (including area code)
<u>600 UNIVERSITY STREET, SUITE 3100</u> <u>SEATTLE, WA 98101-1176</u>	
Address of the firm	

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 ☐

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

Schedule SB (Form 5500) 2011
v.012611

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)	2265840	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	2265840	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>6.94</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38 from prior year)		11890675
b Interest on (a) using prior year's effective rate of <u>6.34</u> % except as otherwise provided (see instructions)		767464
c Total available at beginning of current plan year to add to prefunding balance		12658139
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	0

Part III Funding percentages		
14 Funding target attainment percentage	14	90.07 %
15 Adjusted funding target attainment percentage	15	90.07 %
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	82.32 %
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
03/15/2012	1340851	0			
06/15/2012	1340851	0			
09/14/2012	1214860	0			
12/13/2012	1214860	0			
03/14/2013	1349844	0			
			Totals ►	18(b)	6461266
				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	6196361
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	(3) 3rd
0	0	0
		(4) 4th
		0

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

21 Discount rate:				
a Segment rates:	1st segment: 2.11%	2nd segment: 5.31%	3rd segment: 6.32 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 63
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	2987846	
b Excess assets, if applicable, but not greater than 31a	31b		
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	11370778	2411529	
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	5399375	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....			
36 Additional cash requirement (line 34 minus line 35)	36	5399375	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	6196361	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	796986	
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 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 12/01/2011 and ending 11/30/2012

A Name of plan CLARCOR INC. PENSION PLAN	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 CLARCOR INC.	D Employer Identification Number (EIN) 36-0922490

Part I	Service Provider Information (see instructions)
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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
THE VANGUARD GROUP,INC P.O. BOX 2600 VALLEY FORGE, PA 19482
23-1945930

(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)

RUSSELL TRUST COMPANY

91-1116938

(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?
25 99		150546	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

TOWERS WATSON DELAWARE INC.

52-2211537

(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?
11 50		125159	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET CORP RETIREE SERVICES

04-3581074

(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?
62		16060	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a Name: EMILY M. STONER	b EIN: 52-2211537
c Position: ENROLLED ACTUARY	
d Address: TOWERS WATSON DELAWARE, INC. 191 NORTH WACKER DRIVE, SUITE 2100 CHICAGO, IL 60606-1615	e Telephone: 312-525-2500

Explanation: REASSIGNMENT OF WORK WITHIN TOWERS WATSON DELAWARE

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 12/01/2011 and ending 11/30/2012

A Name of plan <u>CLARCOR INC. PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>003</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>CLARCOR INC.</u>	D Employer Identification Number (EIN) <u>36-0922490</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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL SMALL CAP FUND</u>		
b Name of sponsor of entity listed in (a): <u>RUSSELL TRUST COMPANY</u>		
c EIN-PN <u>91-1117282-029</u>	d Entity code <u>C</u>	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: <u>RUSSELL MULTI-MANAGER BOND FUND</u>		
b Name of sponsor of entity listed in (a): <u>RUSSELL TRUST COMPANY</u>		
c EIN-PN <u>91-1117282-038</u>	d Entity code <u>C</u>	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: <u>RUSSELL 1000 INDEX FUND SERIES I</u>		
b Name of sponsor of entity listed in (a): <u>RUSSELL TRUST COMPANY</u>		
c EIN-PN <u>91-1117282-033</u>	d Entity code <u>C</u>	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: <u>RUSSELL INTERNATIONAL FUND</u>		
b Name of sponsor of entity listed in (a): <u>RUSSELL TRUST COMPANY</u>		
c EIN-PN <u>91-1117282-005</u>	d Entity code <u>C</u>	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: <u>RUSSELL REAL ESTATE EQUITY FUND</u>		
b Name of sponsor of entity listed in (a): <u>RUSSELL TRUST COMPANY</u>		
c EIN-PN <u>91-1117282-008</u>	d Entity code <u>C</u>	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:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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 12/01/2011 and ending 11/30/2012		
A Name of plan CLARCOR INC. PENSION PLAN	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 CLARCOR INC.	D Employer Identification Number (EIN) 36-0922490	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	15152920	
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)	434669	
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
	(2) U.S. Government securities.....	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other.....	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts.....	1c(9)	89797218	
	(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)		118616762
	(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	105384807	118616762

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	

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	105384807	118616762
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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)	3917605	
(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)		3917605
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)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(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)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		7630260
(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)		7842980
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		19390845

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5595930	
(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)		5595930
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)	268827	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	27934	
(4) Other	2i(4)	266199	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		562960
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		6158890

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		13231955
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: HORNE LLP

(2) EIN: 20-1941244

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		10000000
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 12/01/2011 and ending 11/30/2012

A Name of plan <u>CLARCOR INC. PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>CLARCOR INC.</u>	D Employer Identification Number (EIN) <u>36-0922490</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	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-3581074</u> <u>23-1945930</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>27</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)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☒ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

- a** Enter the percentage of plan assets held as:

Stock: 71.0% Investment-Grade Debt: 23.0% High-Yield Debt: 2.0% Real Estate: 4.0% 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):

CLARCOR Inc. Pension Plan

Financial Statements and Supplemental Schedules

**As of and for the Years Ended
November 30, 2012 and 2011**

CLARCOR Inc. Pension Plan

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Note: Supplemental schedules required by the Employee Retirement Income Security Act of 1974 not included herein are deemed not applicable to the CLARCOR Inc. Pension Plan.



Independent Auditor's Report

Committee of the
CLARCOR Inc. Pension Plan
Franklin, Tennessee

We were engaged to audit the accompanying statements of net assets available for benefits of CLARCOR Inc. Pension Plan (the "Plan") as of November 30, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended and the supplemental schedule of assets (held at end of year) and the supplemental schedule of reportable transactions as of or for the year ended November 30, 2012. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the United States 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 7, which was certified or provided by Russell Trust Company or Vanguard Fiduciary Trust Company, the trustees 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 trustees hold the Plan's assets and execute transactions. The Plan administrator has obtained certifications from the trustees regarding the completeness and accuracy of the information summarized in Note 7 that was provided to the Plan administrator by the trustees as of November 30, 2012 and 2011, and for the years then ended.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The supplemental schedules are presented for the purposes of additional analysis and are not a required part 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 financial statements and supplemental schedules, other than that derived from the information certified or provided by the trustees, 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Ridgeland, Mississippi
September 15, 2013

CLARCOR Inc. Pension Plan

Statements of Net Assets Available for Benefits

<i>November 30,</i>	2012	2011
Assets		
Investments , at fair value		
Mutual funds	\$ 118,616,762	\$ -
Common collective trust funds	-	89,797,218
Total investments	118,616,762	89,797,218
Receivables		
Investments sold	-	434,669
Employer contributions	2,564,704	15,152,920
Total receivables	2,564,704	15,587,589
Net Assets Available for Benefits	\$ 121,181,466	\$105,384,807

See notes to financial statements.

CLARCOR Inc. Pension Plan

Statements of Changes in Net Assets Available for Benefits

<i>Year ended November 30,</i>	2012	2011
Additions		
Employer contributions	\$ 6,482,309	\$ 16,230,968
Total contributions	6,482,309	16,230,968
Net appreciation in fair value	15,473,240	5,627,022
Total investment income	15,473,240	5,627,022
Total additions	21,955,549	21,857,990
Deductions		
Benefits paid to participants	5,595,930	5,190,776
Administrative expenses	562,960	637,474
Total deductions	6,158,890	5,828,250
Net increase in net assets available for benefits	15,796,659	16,029,740
Net Assets Available for Benefits, at beginning of year	105,384,807	89,355,067
Net Assets Available for Benefits, at end of year	\$ 121,181,466	\$ 105,384,807

See notes to financial statements.

CLARCOR Inc. Pension Plan

Notes to Financial Statements

- 1. Description of Plan** The following brief description of the CLARCOR Inc. Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document or summary plan description for a more complete description of the Plan's provisions.

General The Plan is a defined benefit pension plan covering certain employees of CLARCOR Inc. (the "Company") who are not covered by plans pursuant to collective bargaining agreements and have one year of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The investments of the Plan are invested and monitored according to instructions given by the Plan's committee in accordance with the Plan's investment policy.

The Plan was amended effective January 1, 2004 to freeze and to cease accruals of benefits as of December 31, 2003, other than for Henderson, North Carolina Hourly Employees, for: (1) all eligible employees who have not attained age 40 years or have less than ten (10) years of vesting service and (2) all other eligible employees who elect to cease such accruals and to become covered under the CLARCOR Inc. 401(k) Plan. The Company provides for full vesting of all participants in accordance with the amendment.

Pension Benefits Plan participants' benefits vest after five years of service or as otherwise disclosed above. Vested participants who terminate prior to age 60 may receive a deferred pension benefit commencing at age 65 (normal retirement date) or a reduced pension benefit commencing at age 60. Vested participants who terminate after age 60, but prior to age 65, may commence receiving reduced pension benefits at the date of termination.

On or after December 1, 1989, the monthly pension benefit payable to the majority of participants is equal to the sum of:

- a. Accrued benefit as of November 30, 1989, determined in accordance with the Plan, and
- b. For each complete or partial Plan year subsequent to December 1, 1989, 1.20% of considered compensation, plus
- c. For each complete or partial Plan year, up to 35 years, 0.55% of considered compensation in excess of the single covered compensation amount.
- d. A participant's accrued benefit shall be such amount as determined above as accrued through December 31, 2003, and shall not accrue any further benefit thereafter.
- e. Section "d" above does not apply to any participant who on

CLARCOR Inc. Pension Plan

Notes to Financial Statements

December 31, 2003: (1) has attained at least age 40 years, (2) has completed not less than ten years of vesting service and (3) has not timely elected to cease accruals under the Plan and to commence participation under the CLARCOR Inc. 401(k) Plan.

Death and Disability Benefits A spouse of a deceased vested participant is entitled to receive an actuarially determined equivalent of a 10-year certain and life survivor annuity, payable at the later of early retirement eligibility or date of death. A permanently disabled participant is entitled to receive benefits beginning at age 60, based on actual benefits earned.

2. Summary of Significant Accounting Policies

Basis of Accounting The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates The preparation of the Plan's financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, disclosure of contingent assets and liabilities and the actuarial present value of accumulated Plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Investment Valuation and Income Recognition 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. See Note 10 for a discussion of fair value measurements. Purchases and sales of securities are recorded on the trade dates. Any unrealized appreciation or depreciation for the year, including the Plan's gains and losses and investments bought and sold as well as held during the year, is reflected as investment income in the statements of changes in net assets available for benefits.

Payment of Benefits Benefit payments to participants are recorded when paid.

Administrative Expenses Plan fees and expenses, including fees and expenses for providing administrative services by external service providers, are paid from Plan assets and recorded when paid. Total administrative expenses totaled \$562,960 and \$637,474 for the years ended November 30, 2012 and 2011, respectively.

CLARCOR Inc. Pension Plan

Notes to Financial Statements

Actuarial Present Value of Accumulated Plan Benefits

Accumulated Plan benefits are those future periodic payments, including lump-sum payments that are attributable under the Plan's provisions to the service employees have rendered. 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 employees' compensation as defined in the Plan, and are reflected in the benefit information as presented. Benefits payable under all 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 independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated Plan benefits 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 December 1, 2011 and 2010 were:

Discount rate	7.50%
Mortality	RP-2000
Retirement age	65

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

CLARCOR Inc. Pension Plan

Notes to Financial Statements

3. Accumulated Plan Benefits

The accumulated Plan benefits at December 1, 2011 and 2010 were as follows:

	<u>2011</u>	<u>2010</u>
Vested benefits		
Participants currently receiving payments	\$ 43,455,337	\$ 41,295,535
Other participants	49,704,017	47,758,017
Total vested benefits	93,159,354	89,053,552
Nonvested benefits	46,115	29,695
Total actuarial present value of accumulated Plan benefits	<u>\$ 93,205,469</u>	<u>\$ 89,083,247</u>

	<u>2011</u>	<u>2010</u>
Projected accumulated postretirement benefit obligation at the beginning of the year	\$ 89,083,247	\$ 84,520,596
Benefits accumulated	1,634,121	1,507,235
Actuarial (gains) losses	1,069,728	(569,142)
Decrease in the discount period	6,609,149	6,468,473
Actual benefits paid	(5,190,776)	(5,127,337)
Change of actuarial assumptions	-	2,283,422
Projected accumulated postretirement benefit obligation at the end of the year	<u>\$ 93,205,469</u>	<u>\$ 89,083,247</u>

4. Funding Policy

The Company's funding policy is to make annual contributions to the Plan in amounts that are estimated by the actuary to ensure future benefits are funded. During 2010, the Company revised its policy to achieve a minimum funding target attainment percentage of 80 percent. The Company contributed \$6,482,309 and \$16,230,968 during fiscal years ended November 30, 2012 and 2011, respectively, which met the minimum funding requirements.

5. Significant Investments

The fair value of individual investments that represent 5% or more of the Plan's net assets are as follows:

CLARCOR Inc. Pension Plan

Notes to Financial Statements

<i>November 30,</i>	2012	2011
Russell Small Capitalization Fund	\$ -	\$ 17,292,575
Russell 1000 Index Fund Series I	\$ -	\$ 41,409,044
Russell International Fund	\$ -	\$ 6,137,492
Russell Multi Manager Bond Fund	\$ -	\$ 21,504,640
Vanguard Extended Duration Treasury Fund Institutional Shares	\$ 11,541,157	\$ -
Vanguard Long-Term Bond Index Fund Institutional Shares	\$ 23,672,299	\$ -
Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ 11,850,674	\$ -
Vanguard Total Stock Market Index Fund Institutional Shares	\$ 52,918,011	\$ -
Vanguard Total International Stock Index Institutional Shares	\$ 18,141,315	\$ -

The Plan's investments, (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$15,473,240 and \$5,627,022 during the Plan years ended November 30, 2012 and 2011, respectively.

6. Related Party Transactions

During 2012, the Plan assets include investments held and managed by Russell Trust Company, ("Russell") and Vanguard Fiduciary Trust Company ("Vanguard"), the trustees of the Plan. Consequently, these transactions are considered to be exempt party-in-interest transactions. Fees paid to Russell were \$315,702 for the Plan year ended November 30, 2011. Fees paid to the trustees for investment services for the year ended November 30, 2012 totaled \$173,428.

7. Information Certified by the Plan's Trustee

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustees have certified that the following data included in the accompanying financial statements and supplemental schedules are complete and accurate.

<i>November 30,</i>	As of	
	2012	2011
Common collective trust funds - Russell	\$ -	\$ 89,797,218
Mutual funds - Vanguard	\$ 118,616,762	\$ -
Receivable for investments sold	\$ -	\$ 434,669

CLARCOR Inc. Pension Plan

Notes to Financial Statements

<i>Year ended November 30,</i>	2012	2011
Net appreciation in fair value – Vanguard	\$ 7,842,980	\$ -
Net appreciation in fair value – Russell	\$ 7,630,260	\$ 5,627,022

8. Plan Termination

The Plan sponsor froze the Plan effective January 1, 2004. The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan or change the provisions of the Plan, subject to provisions of ERISA. In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its regulations, generally to provide the following benefits in the order indicated:

1. Benefits attributable to employee contributions, taking into account those paid out before termination.
2. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form or annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding Plan termination.
3. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC", a U.S. governmental agency) up to the applicable limitations.
4. All other vested benefits (that is, vested benefits not insured by the PBGC).
5. All nonvested benefits.

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 survivors' pensions. However, the PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection is subject to certain limitations.

CLARCOR Inc. Pension Plan

Notes to Financial Statements

Vested benefits under the Plan and the amount of benefit protection, 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 on the amount of the individual's monthly benefit that the PBGC guarantees. This ceiling is periodically adjusted by the PBGC.

Whether all participants receive their benefits should the Plan terminate at some future time 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.

9. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated October 22, 2011 which stated that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although, the Plan has been amended since receiving the opinion letter, the prototype sponsor and the Plan administrator believe the Plan is designed and being operated in compliance with the applicable requirements of the IRC.

The Plan administrator evaluated the Plan's tax positions and concluded that the Plan had taken no uncertain tax positions that require adjustment to the financial statements as of November 30, 2012 or 2011. If interest and penalties are incurred related to uncertain tax positions, such amounts are recognized in income tax expense. Tax periods for all fiscal years after 2008 remain open to examination by taxing jurisdictions to which the Plan is subject.

10. Fair Value Measurements

Accounting Standards Codification ("ASC") 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described 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: quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term,

CLARCOR Inc. Pension Plan

Notes to Financial Statements

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.

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 used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value on a recurring basis. There have been no changes in the methodologies used at November 30, 2012 and 2011.

Mutual funds (Level 1): Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common collective trust funds, excluding the real estate equity fund (Level 2): Valued based on market value of its underlying investments.

Real estate equity fund (Level 3): Valued by discount models and third-party appraisals, which approximate 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 fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of November 30, 2012 and 2011:

CLARCOR Inc. Pension Plan

Notes to Financial Statements

Assets at Fair Value as of November 30, 2012			
	Level 1	Level 2	Level 3
Mutual funds:			
Equity securities	\$ 71,059,327	\$ -	\$ -
Money market fund	493,305		
Fixed income fund	47,064,130	-	-
Total mutual funds	118,616,762	-	-
Total assets at fair value	\$ 118,616,762	\$ -	\$ -

Assets at Fair Value as of November 30, 2011			
	Level 1	Level 2	Level 3
Common collective trust funds:			
Equity securities	\$ -	\$ 64,839,111	\$ -
Fixed income fund	-	21,504,640	-
Real estate fund	-	-	3,453,467
Total common collective trust funds	-	86,343,751	3,453,467
Total assets at fair value	\$ -	\$ 86,343,751	\$ 3,453,467

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended November 30, 2012 and 2011:

<i>November 30,</i>	Real Estate Equity Fund	
	2012	2011
Balance, beginning of year	\$ 3,453,467	\$ 2,924,858
Realized gain	255,051	-
Unrealized gains relating to instruments still held at reporting date	-	528,609
Sales of investments	(3,708,518)	-
	\$ -	\$ 3,453,467

CLARCOR Inc. Pension Plan

Notes to Financial Statements

- | | |
|------------------------------------|---|
| 11. Risks and Uncertainties | <p>The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks.</p> <p>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 the amounts reported in the statements of net assets available for benefits.</p> <p>Plan contributions are made and the actuarial present value of accumulated Plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.</p> |
| 12. Subsequent Events | <p>The Plan has evaluated subsequent events through September 15, 2013, the date these financial statements were available to be issued. No subsequent events have occurred that require recognition or disclosure.</p> |

CLARCOR Inc. Pension Plan

Supplemental Schedules

CLARCOR Inc. Pension Plan

Schedule of Assets (Held at End of Year)

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

November 30,			2012	
(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
<u>Mutual funds</u>				
*	Vanguard Prime Money Market Fund	493,305.47 units	\$ 493,305	\$ 493,305
*	Vanguard Extended Duration Treasury Index Fund Institutional Shares	302,997.046 units	10,362,879	11,541,157
*	Vanguard Long Term Bond Index Fund Institutional Shares	1,612,554.439 units	22,363,733	23,672,299
*	Vanguard Long Term Investment-Grade Fund Admiral Shares	1,072,459.166 units	11,119,886	11,850,674
*	Vanguard Total Stock Market Index Fund Institutional Shares	1,491,068.213 units	51,194,897	52,918,011
*	Vanguard Total International Stock Index Institutional Shares	186,045.692 units	17,756,478	18,141,316
			<u>\$ 113,291,178</u>	<u>\$ 118,616,762</u>

* Party-in-interest as defined by ERISA.

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	1 Sale of Units of Russell 1000 Index Fund Series I	\$ -	\$ 41,264,698	\$ 29,484,896	\$ 41,264,698	\$ 11,779,802
*Russell Trust Company	1 Sale of Units of Russell International Fund	\$ -	\$ 7,021,507	\$ 5,475,667	\$ 7,021,507	\$ 1,545,840
*Russell Trust Company	1 Sale of Units of Russell Small Cap Fund	\$ -	\$ 18,885,013	\$ 12,464,689	\$ 18,885,013	\$ 6,420,324
*Russell Trust Company	1 Sale of Units of Russell Multi- Manager Bond Fund	\$ -	\$ 23,915,629	\$ 19,873,784	\$ 23,915,629	\$ 4,041,845
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ 10,462,923	\$ -	\$ 10,462,923	\$ 10,462,923	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ 23,915,629	\$ -	\$ 23,915,629	\$ 23,915,629	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	1 Sale of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ -	\$ 5,180,900	\$ 5,229,605	5,180,900	\$ (48,705)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ 10,515,500	\$ -	\$ 10,515,500	\$ 10,515,500	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 41,264,698	\$ -	\$ 41,264,698	\$ 41,264,698	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 7,017,600	\$ -	\$ 7,017,600	\$ 7,017,600	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 18,885,013	\$ -	\$ 18,885,013	\$ 18,885,013	\$ -
*Vanguard Fiduciary Trust Company	1 Sale of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ -	\$ 24,099,900	\$ 24,219,428	\$ 24,099,900	\$ (119,528)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total International Stock Index Institutional Shares	\$ 7,021,507	\$ -	\$ 7,021,507	\$ 7,021,507	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 8,249,800	\$ -	\$ 8,249,800	\$ 8,249,800	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	4 Purchases of Units of Russell International Fund	\$ 518,395	\$ -	\$ 518,395	\$ 518,395	\$ -
*Russell Trust Company	11 Sales of Units of Russell International Fund	\$ -	\$ 7,234,020	\$ 5,653,725	\$ 7,234,020	\$ 1,580,295
*Russell Trust Company	4 Sales of Units of Russell 1000 Index Fund SR I	\$ -	\$ 45,530,541	\$ 32,562,650	\$ 45,530,541	\$ 12,967,891
*Russell Trust Company	3 Purchases of Units of Russell Small Cap Fund	\$ 315,290	\$ -	\$ 315,290	\$ 315,290	\$ -
*Russell Trust Company	14 Sales of Units of Russell Small Cap Fund	\$ -	\$ 19,597,290	\$ 12,967,863	\$ 19,597,290	\$ 6,629,427
*Russell Trust Company	5 Purchases of Units of Russell Multi- Manager Bond Fund	\$ 2,018,667	\$ -	\$ 2,018,667	\$ 2,018,667	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	2 Sales of Units of Russell Multi- Manager Bond Fund	\$ -	\$ 24,209,415	\$ 20,118,358	\$ 24,209,415	\$ 4,091,057
*Vanguard Fiduciary Trust Company	2 Purchase of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ 10,822,100	\$ -	\$ 10,822,100	\$ 10,822,100	\$ -
*Vanguard Fiduciary Trust Company	7 Sales of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ -	\$ 782,324	\$ 678,116	\$ 782,324	\$ 104,208
*Vanguard Fiduciary Trust Company	11 Purchases of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ 29,254,238	\$ -	\$ 29,254,238	\$ 29,254,238	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	22 Sales of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ -	\$ 7,700,995	\$ 7,672,472	\$ 7,700,995	\$ 28,523
*Vanguard Fiduciary Trust Company	3 Purchases of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ 11,368,206	\$ -	\$ 11,368,206	\$ 11,368,206	\$ -
*Vanguard Fiduciary Trust Company	9 Sales of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ -	\$ 631,991	\$ 590,070	\$ 631,991	\$ 41,921
*Vanguard Fiduciary Trust Company	16 Purchases of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 75,343,912	\$ -	\$ 75,343,912	\$ 75,343,912	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30, **2012**

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	6 Sales of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ -	\$ 24,840,517	\$ 24,949,287	\$ 24,840,517	\$ (108,770)
*Vanguard Fiduciary Trust Company	9 Purchases of Units of Vanguard Total International Stock Index Institutional Shares	\$ 17,740,074	\$ -	\$ 17,740,074	\$ 17,740,074	\$ -
*Vanguard Fiduciary Trust Company	8 Sales of Units of Vanguard Total International Stock Index Institutional Shares	\$ -	\$ 292,208	\$ 285,889	\$ 292,208	\$ 6,319

There were no category (ii) or (iv) transactions.

* Party-in-interest as defined by ERISA.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Sponsor

CLARCOR Inc.

Plan

CLARCOR Inc. Pension Plan

Effective date and most recent amendment

The plan was amended and restated effective December 1, 2008.

CLARCOR Employees

Participation

For plan years commencing on or after December 1, 1999, covered employees become participants after one year of service. Participation is frozen to new entrants as of December 31, 2003.

Credited service

Period from date of participation to date benefit accruals ceased or date of termination or retirement, measured in years and completed days.

Vesting service

Period from date of hire to date of termination or retirement, measured in years and completed days.

Covered compensation

For any plan year, for all participants, the Social Security Normal Retirement Age covered compensation amount from Table I of Attachment I of IRS Notice 89-70 (updated annually) for the calendar year in which the plan year begins.

Plan Name:	CLARCOR Inc. Pension Plan
EIN / PN:	36-0922490 / 003
Plan Sponsor:	CLARCOR Inc.
Valuation Date	December 1, 2011

SCHEDULE SB ATTACHMENTS

Normal Retirement Benefit

Normal Retirement Date: First of month coincident with or following the attainment of age 65.

Monthly Benefit Formula: For retirements after November 30, 1989, the sum of:

Prior plan accrued benefit as of November 30, 1989;

For the plan year starting December 1, 1989 (and each subsequent plan year), 1/12 of 1.2% of compensation; and,

For the plan year starting December 1, 1989 (and each subsequent plan year up to 35 years less the number of years of benefit service used in calculating the November 30, 1989 prior plan accrued benefit), 1/12 of 0.55% of compensation in excess of covered compensation.

As of December 31, 2003, participants who had not attained age 40, did not have 10 years of service, or made a one-time election, receive no additional accruals.

Accrued benefit

The participant's accrued benefit at any given date is determined under the normal retirement formula shown above, but is based on current benefit service.

Early Retirement Benefit

Eligibility: Age 60.

Monthly Benefit: Accrued benefit as of early retirement date multiplied by the following factors from the plan document (for post-7/31/83 benefits):

Age	Factor	Age	Factor
60	.6638	63	.8442
61	.7180	64	.9179
62	.7779	65	1.0000

Sex-distinct reduction factors are applied to pre-8/1/83 benefits.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Disability Benefit

Eligibility: Total and permanent disability (as defined in plan) while a participant.

Monthly Benefit: Accrued benefit as of disability date. Payments may commence at age 60. Payments are reduced as for early retirement for payment prior to age 65.

Vested benefits upon termination of service

Eligibility: Termination after December 31, 2003 or after completing five years of vesting service or attainment of age 60.

Monthly Benefit: Accrued benefit as of termination date. Payments may commence at age 60. Payments are reduced as for early retirement for payment prior to age 65.

Spouse death benefit

Eligibility: Death while eligible for retirement or deferred vested benefit.

Benefit: Accrued benefit as of death reduced for 100% joint and survivor form and early commencement of benefits.

Normal form of payment

For participants without an eligible spouse, a ten-year certain and life annuity. For married participants, the actuarially equivalent 100% joint and survivor annuity.

Optional forms of payment

The plan offers a single life annuity, 10-year and 20-year certain and life annuities, 50% and 100% joint and survivor annuities, 100% joint and survivor annuity with 10-years certain, and life annuity with cash refund. All optional forms are actuarially equivalent based on 4.5% interest. For benefits accrued after July 31, 1983, UP-84 mortality is used. For benefits accrued before August 1, 1983, sex-distinct 1951 GAM projected to 1965 using scale C is used.

Plan Name:	CLARCOR Inc. Pension Plan
EIN / PN:	36-0922490 / 003
Plan Sponsor:	CLARCOR Inc.
Valuation Date	December 1, 2011

SCHEDULE SB ATTACHMENTS

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Future plan changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

Special provisions for top-heavy plans

Not applicable; the plan has never been top-heavy.

Employee contributions

They are not required or permitted.

Changes in plan provisions since last actuarial valuation

None.

Substantive commitments

No substantive commitments other than the above plan provisions have been included in this valuation.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Purolator Non-Union Employees

Participation

Employees who were acquired on September 11, 1999 or December 10, 1999 participate immediately; otherwise, covered employees participate after attaining one year of service. Participation is frozen to new entrants in this group as of December 31, 2003.

Credited service

Period from date of hire (but no earlier than acquisition date) to date benefit accruals ceased or date of termination or retirement, measured in years and completed days.

Vesting service

Period from date of hire to date of termination or retirement, measured in years and completed days, including service with Purolator prior to its acquisition by CLARCOR Inc.

Covered compensation

Average of taxable wage bases for 35 calendar years ending with year in which participant attains Social Security retirement age.

Normal retirement benefit

Normal Retirement Date: First of month coincident with or following the attainment of age 65.

Monthly Benefit Formula: For retirements after September 11, 1999, the sum of:

For each plan year, 1/12 of 1.1% of compensation; and,

For each plan year up to 35 years, 1/12 of 0.5% of compensation in excess of covered compensation

As of December 31, 2003, participants who had not attained age 40, did not have 10 years of vesting service, or made a one-time election, receive no additional accruals.

Accrued benefit

The participant's accrued benefit at any given date is determined under the normal retirement formula shown above, but is based on current benefit service.

Plan Name:	CLARCOR Inc. Pension Plan
EIN / PN:	36-0922490 / 003
Plan Sponsor:	CLARCOR Inc.
Valuation Date	December 1, 2011

SCHEDULE SB ATTACHMENTS

Early retirement benefit

Eligibility: Age 55 with ten years of service.

Monthly Benefit: Accrued benefit as of early retirement date reduced by 1/6% for each of the first 60 months that payment precedes age 65 and 1/3% for each of the next 60 months that payment precedes age 65.

Disability benefit

Eligibility: Total and permanent disability while a participant.

Monthly Benefit: Accrued benefit as of disability date. Payments may commence at age 55. Payments are reduced as for early retirement for payment prior to age 65.

Vested benefits upon termination of service

Eligibility: Termination after December 31, 2003 or after completing five years of vesting service.

Monthly Benefit: Accrued benefit as of termination date. Payments may commence at age 55. Payments are multiplied by the following factors from the plan document:

Age	Factor	Age	Factor
55	.4312	61	.6954
56	.4648	62	.7586
57	.5018	63	.8295
58	.5428	64	.9095
59	.5883	65	1.0000
60	.6389		

Spouse death benefit

Eligibility: Death while eligible for retirement or deferred vested benefit.

Benefit: Accrued benefit as of date of death reduced for survivor's annuity in 50% joint and survivor form and for early commencement of benefits.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Normal form of payment

For participants without an eligible spouse, a life annuity. For married participants, the actuarially equivalent 50% joint and survivor annuity.

Optional forms of payment

The plan offers a single life annuity, 10-year and 20-year certain and life annuities, 50%, 75% and 100% joint and survivor annuities, and 100% joint and survivor annuity with 10-years certain. All optional forms are actuarially equivalent based on 4.5% interest and UP-84 mortality.

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.

Future plan changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Towers Watson is not aware of any future plan changes which are required to be reflected.

Special provisions for top-heavy plans

Not applicable; the plan has never been top-heavy.

Employee contributions

They are not required or permitted.

Changes in plan provisions since last actuarial valuation

No changes.

Substantive commitments

No substantive commitments other than the above plan provisions have been included in this valuation.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Interest rate basis

Applicable month	August
Yield curve basis	3 Segment Rates

Interest rates

First segment rate	2.11%
Second segment rate	5.31%
Third segment rate	6.32%
Effective interest rate	5.52%

Assumed cost of living adjustments

0.00%

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

Administrative expenses

The amount included this year for plan-related expenses is \$ 622,000. This amount represents the sum of the estimated PBGC premiums for the current plan year and prior year expenses paid from the trust, excluding PBGC premiums.

Mortality

For non-disabled participants: The prescribed mortality assumption under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Disabled mortality

For disabled participants: Mortality in accordance with Revenue Ruling 96-7.

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
Age	Rates
55	10.00%
56 – 59	5.00%
60	10.00%
61	5.00%
62	20.00%
63 – 64	5.00%
65	75.00%
66 – 69	50.00%
70	100.00%

Disability rates

Representative rates at which participants become disabled by age are shown below:

Percentage becoming disabled during the year	
Age	Rates
20	0.07%
25	0.09%
30	0.10%
35	0.14%
40	0.20%
45	0.31%
50	0.52%
55	0.99%
60	1.74%

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Compensation increases

For purposes of determining the target normal cost, compensation is assumed to increase by 4.00% during the plan year. For purposes of determining the additional Funding Target for maximum deductible contribution purposes, compensation is assumed to increase by 4.00% per annum.

Future increases in social security

For purposes of determining target normal cost and the additional Funding Target for maximum deductible contribution purposes, the National Average Wage Index is assumed to increase by 3.50% per annum.

Future increases in maximum benefits and plan compensation limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC §415. Plan compensation is limited to the maximum presently allowed under IRC §401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

Representative termination rates not due to disability, retirement or mortality

Percentage leaving during the year	
Attained Age	Rates
20	20.00%
25	18.99%
30	16.09%
35	7.94%
40	3.50%
45	1.68%
50	0.74%
55	0.15%
60	0.00%

Form of payment

Participants are assumed to elect the normal form of payment for single participants.

Marriage

100% of eligible participants are assumed to be married, and male spouses are assumed to be 3 years older than female spouses.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Employees

It was assumed there will be no new or rehired employees.

Plan compensation

Plan compensation shown in the report is pensionable earnings during the prior year. For purposes of determining the Target Normal Cost, the plan compensation is increased by one year at the compensation increase rate.

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Valuation date

First day of plan year.

Funding target

Present value of accrued benefits.

Target normal cost

Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2010 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Asset and Participant data

Statements detailing assets held in trust for this plan were provided to us by the Trustee. Census data were provided by the plan sponsor.

Benefits not included in valuation

All benefits described in the Plan Provisions section of this report were valued. Towers Watson is not aware of any significant benefits required to be valued that were not.

Plan Name: CLARCOR Inc. Pension Plan
EIN / PN: 36-0922490 / 003
Plan Sponsor: CLARCOR Inc.
Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	CLARCOR Inc.
EIN/PN	36-0922490/003
Plan Name	CLARCOR Inc. Pension Plan
Valuation Date	December 1, 2011
Enrolled Actuary	Chris Noble
Enrollment Number	11-06196

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of December 1, 2011

	Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1	Shortfall	12/01/2011	(2,990,459)	7	(2,990,459)	(474,467)
2	Shortfall	12/01/2010	4,045,045	6	3,718,187	667,580
3	Shortfall	12/01/2009	13,163,949	5	10,643,050	2,218,416
Total					11,370,778	2,411,529

Plan Name: CLARCOR Inc. Pension Plan
 EIN / PN: 36-0922490 / 003
 Plan Sponsor: CLARCOR Inc.
 Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26

Schedule of Active Participant Data as of December 1, 2011

Active Salaried Participants Accruing Benefits as of December 1, 2011

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 - 29	0		0		0		0		0		0		0		0		0		0	
30 - 34	0		0		0		0		0		0		0		0		0		0	
35 - 39	0		0		0		0		0		0		0		0		0		0	
40 - 44	0		0		0		0		0		0		0		0		0		0	
45 - 49	0		0		0		6		4		7		6		0		0		0	
50 - 54	0		0		0		28	65,164	10		21	75,058	69	56,232	6		0		0	
55 - 59	0		0		0		19		10		20	99,989	69	51,498	29	66,313	0		0	
60 - 64	0		0		0		9		7		13		33	57,058	10		24	69,210	1	
65 - 69	0		0		0		5		2		2		5		1		6		0	
70 & Over	0		0		0		0		1		0		0		0		0		1	

Plan Name: CLARCOR Inc. Pension Plan
 EIN / PN: 36-0922490 / 003
 Plan Sponsor: CLARCOR Inc.
 Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26

Schedule of Active Participant Data for Frozen Plans as of December 1, 2011

Active Participants Not Accruing Benefits as of December 1, 2011

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.	No.	Avg. Ben.
Under 25	0		0		0		0		0		0		0		0		0		0	
25 – 29	5		0		0		0		0		0		0		0		0		0	
30 – 34	14		41		0		0		0		0		0		0		0		0	
35 - 39	8		40		44		0		0		0		0		0		0		0	
40 - 44	8		33		44		29		0		0		0		0		0		0	
45 - 49	5		33		20		21		4		0		0		0		0		0	
50 - 54	4		21		24		1		2		0		0		0		0		0	
55 - 59	4		28		14		1		1		1		0		0		0		0	
60 - 64	1		19		13		0		0		1		0		0		0		0	
65 - 69	1		11		0		0		0		0		0		0		0		0	
70 & Over	0		0		0		0		0		0		0		0		0		0	

Plan Name: CLARCOR Inc. Pension Plan
 EIN / PN: 36-0922490 / 003
 Plan Sponsor: CLARCOR Inc.
 Valuation Date: December 1, 2011

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of December 1, 2011

See Schedule SB, Part V – Statement of Actuarial Assumptions/Methods for retirement rates. The weighted average retirement age was calculated by applying the rate of retirement at each age to a cohort of participants. The weighted average age at retirement was then calculated. The calculation for this plan is shown below:

(1)	(2)		(3)	(4)	(5)
				$[(2) \times (3)]$	$[(1) \times (4)]$
	<u>Lx</u>			<u>Number</u>	<u>Weighted</u>
<u>Age</u>	<u>Clarcor</u>	<u>Purolator</u>	<u>Rx</u>	<u>Retiring</u>	<u>Average</u>
55	5,000	3,000	10%	300	16,500
56	5,000	2,700	5%	135	7,560
57	5,000	2,565	5%	128	7,296
58	5,000	2,437	5%	122	7,076
59	5,000	2,315	5%	116	6,844
60	5,000	2,199	10%	720	43,200
61	4,500	1,979	5%	324	19,764
62	4,275	1,880	20%	1,231	76,322
63	3,420	1,504	5%	246	15,498
64	3,249	1,429	5%	234	14,976
65	3,087	1,358	75%	3,333	216,645
66	772	339	50%	556	36,696
67	386	170	50%	278	18,626
68	193	85	50%	139	9,452
69	96	42	50%	69	4,761
70	48	21	100%	69	4,830
Total:				8,000	506,046
Weighted Average:		63.3	(= 506,046 / 8,000)		

Lx = Number of participants active at each age x.

Rx = Percent of participants assumed to retire at each age x.

Clarcor earliest retirement eligibility is age 60.

Plan Name: CLARCOR Inc. Pension Plan
 EIN / PN: 36-0922490 / 003
 Plan Sponsor: CLARCOR Inc.
 Valuation Date: December 1, 2011

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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 12/01/2011 and ending 11/30/2012

► **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 CLARCOR Inc. Pension Plan	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF CLARCOR Inc.	D Employer Identification Number (EIN) 36-0922490	
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 <u>12</u> Day <u>1</u> Year <u>2011</u>			
2 Assets:			
a Market value	2a	105,078,250	
b Actuarial value	2b	103,238,000	
3 Funding target/participant count breakdown:			
		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a	1,030	51,448,770
b For terminated vested participants	3b	804	18,421,488
c For active participants:			
(1) Non-vested benefits.....	3c(1)		28,207
(2) Vested benefits	3c(2)		44,710,313
(3) Total active.....	3c(3)	920	44,738,520
d Total.....	3d	2,754	114,608,778
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	5.52 %	
6 Target normal cost	6	2,987,846	

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	Chris Noble <i>cn</i> Signature of actuary Chris Noble Type or print name of actuary Towers Watson Delaware Inc. 600 University Street, Suite 3100 Seattle WA 98101-1176 Address of the firm	<i>8/29/2013</i> Date 11-06196 Most recent enrollment number (206) 812-7271 Telephone number (including area code)
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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).....	2,265,840	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	2,265,840	0
9	Amount remaining (line 7 minus line 8).....	0	0
10	Interest on line 9 using prior year's actual return of <u>6.94</u> %.....	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		11,890,675
b	Interest on (a) using prior year's effective rate of <u>6.34</u> % except as otherwise provided (see instructions).....		767,464
c	Total available at beginning of current plan year to add to prefunding balance.....		12,658,139
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	0

Part III Funding percentages			
14	Funding target attainment percentage	14	90.07 %
15	Adjusted funding target attainment percentage	15	90.07 %
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	82.32 %
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
03/15/2012	1,340,851				
06/15/2012	1,340,851				
09/14/2012	1,214,860				
12/13/2012	1,214,860				
03/14/2013	1,349,844				
Totals *			18(b)	6,461,266	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	
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	6,196,361

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	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:			
a Segment rates:	1st segment: 2.11 %	2nd segment: 5.31 %	3rd segment: 6.32 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 63
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	2,987,846	
b Excess assets, if applicable, but not greater than 31a	31b	0	
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	11,370,778		2,411,529
b Waiver amortization installment			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	0	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	5,399,375	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	5,399,375	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	6,196,361	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	796,986	
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	0	

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	0		
43 Excess installment acceleration amount to be carried over to future plan years	43	0		

CLARCOR Inc. Pension Plan

Schedule of Assets (Held at End of Year)

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

November 30,			2012	
(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
<u>Mutual funds</u>				
*	Vanguard Prime Money Market Fund	493,305.47 units	\$ 493,305	\$ 493,305
*	Vanguard Extended Duration Treasury Index Fund Institutional Shares	302,997.046 units	10,362,879	11,541,157
*	Vanguard Long Term Bond Index Fund Institutional Shares	1,612,554.439 units	22,363,733	23,672,299
*	Vanguard Long Term Investment-Grade Fund Admiral Shares	1,072,459.166 units	11,119,886	11,850,674
*	Vanguard Total Stock Market Index Fund Institutional Shares	1,491,068.213 units	51,194,897	52,918,011
*	Vanguard Total International Stock Index Institutional Shares	186,045.692 units	17,756,478	18,141,316
			\$ 113,291,178	\$ 118,616,762

* Party-in-interest as defined by ERISA.

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	1 Sale of Units of Russell 1000 Index Fund Series I	\$ -	\$ 41,264,698	\$ 29,484,896	\$ 41,264,698	\$ 11,779,802
*Russell Trust Company	1 Sale of Units of Russell International Fund	\$ -	\$ 7,021,507	\$ 5,475,667	\$ 7,021,507	\$ 1,545,840
*Russell Trust Company	1 Sale of Units of Russell Small Cap Fund	\$ -	\$ 18,885,013	\$ 12,464,689	\$ 18,885,013	\$ 6,420,324
*Russell Trust Company	1 Sale of Units of Russell Multi- Manager Bond Fund	\$ -	\$ 23,915,629	\$ 19,873,784	\$ 23,915,629	\$ 4,041,845
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ 10,462,923	\$ -	\$ 10,462,923	\$ 10,462,923	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ 23,915,629	\$ -	\$ 23,915,629	\$ 23,915,629	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	1 Sale of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ -	\$ 5,180,900	\$ 5,229,605	5,180,900	\$ (48,705)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ 10,515,500	\$ -	\$ 10,515,500	\$ 10,515,500	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 41,264,698	\$ -	\$ 41,264,698	\$ 41,264,698	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 7,017,600	\$ -	\$ 7,017,600	\$ 7,017,600	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (i) – Single transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 18,885,013	\$ -	\$ 18,885,013	\$ 18,885,013	\$ -
*Vanguard Fiduciary Trust Company	1 Sale of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ -	\$ 24,099,900	\$ 24,219,428	\$ 24,099,900	\$ (119,528)
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total International Stock Index Institutional Shares	\$ 7,021,507	\$ -	\$ 7,021,507	\$ 7,021,507	\$ -
*Vanguard Fiduciary Trust Company	1 Purchase of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 8,249,800	\$ -	\$ 8,249,800	\$ 8,249,800	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	4 Purchases of Units of Russell International Fund	\$ 518,395	\$ -	\$ 518,395	\$ 518,395	\$ -
*Russell Trust Company	11 Sales of Units of Russell International Fund	\$ -	\$ 7,234,020	\$ 5,653,725	\$ 7,234,020	\$ 1,580,295
*Russell Trust Company	4 Sales of Units of Russell 1000 Index Fund SR I	\$ -	\$ 45,530,541	\$ 32,562,650	\$ 45,530,541	\$ 12,967,891
*Russell Trust Company	3 Purchases of Units of Russell Small Cap Fund	\$ 315,290	\$ -	\$ 315,290	\$ 315,290	\$ -
*Russell Trust Company	14 Sales of Units of Russell Small Cap Fund	\$ -	\$ 19,597,290	\$ 12,967,863	\$ 19,597,290	\$ 6,629,427
*Russell Trust Company	5 Purchases of Units of Russell Multi- Manager Bond Fund	\$ 2,018,667	\$ -	\$ 2,018,667	\$ 2,018,667	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Russell Trust Company	2 Sales of Units of Russell Multi- Manager Bond Fund	\$ -	\$ 24,209,415	\$ 20,118,358	\$ 24,209,415	\$ 4,091,057
*Vanguard Fiduciary Trust Company	2 Purchase of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ 10,822,100	\$ -	\$ 10,822,100	\$ 10,822,100	\$ -
*Vanguard Fiduciary Trust Company	7 Sales of Units of Vanguard Extended Duration Treasury Index Fund Institutional Shares	\$ -	\$ 782,324	\$ 678,116	\$ 782,324	\$ 104,208
*Vanguard Fiduciary Trust Company	11 Purchases of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ 29,254,238	\$ -	\$ 29,254,238	\$ 29,254,238	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	22 Sales of Units of Vanguard Long-Term Bond Index Fund Institutional Shares	\$ -	\$ 7,700,995	\$ 7,672,472	\$ 7,700,995	\$ 28,523
*Vanguard Fiduciary Trust Company	3 Purchases of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ 11,368,206	\$ -	\$ 11,368,206	\$ 11,368,206	\$ -
*Vanguard Fiduciary Trust Company	9 Sales of Units of Vanguard Long-Term Investment- Grade Fund Admiral Shares	\$ -	\$ 631,991	\$ 590,070	\$ 631,991	\$ 41,921
*Vanguard Fiduciary Trust Company	16 Purchases of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ 75,343,912	\$ -	\$ 75,343,912	\$ 75,343,912	\$ -

CLARCOR Inc. Pension Plan

Schedule of Reportable Transactions

EIN: 36-0922490
Plan Number: 003
Form 5500
Schedule H, Line 4j

Year ended November 30,

2012

Category (iii) - Series of transactions in excess of 5 percent of Plan assets

(a) Identity of Party Involved	(b) Description of Investment	(c) Purchase Price	(d) Sale Price	(e) Cost of Asset	(f) Current Value of Transaction on Transaction Date	(g) Net Gain (Loss)
*Vanguard Fiduciary Trust Company	6 Sales of Units of Vanguard Total Stock Market Index Fund Institutional Shares	\$ -	\$ 24,840,517	\$ 24,949,287	\$ 24,840,517	\$ (108,770)
*Vanguard Fiduciary Trust Company	9 Purchases of Units of Vanguard Total International Stock Index Institutional Shares	\$ 17,740,074	\$ -	\$ 17,740,074	\$ 17,740,074	\$ -
*Vanguard Fiduciary Trust Company	8 Sales of Units of Vanguard Total International Stock Index Institutional Shares	\$ -	\$ 292,208	\$ 285,889	\$ 292,208	\$ 6,319

There were no category (ii) or (iv) transactions.

* Party-in-interest as defined by ERISA.