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

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 01/01/2001

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

INGLEWOOD PARK CEMETERY

P.O. BOX 6042
INGLEWOOD, CA 90312-6042

2b Employer Identification Number (EIN)
95-3755235

2c Sponsor's telephone number
310-412-6500

2d Business code (see instructions)
812210

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.	09/23/2013	CHRISTOPHER WINNERS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	203
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**	139
b	Retired or separated participants receiving benefits	**6b**	1
c	Other retired or separated participants entitled to future benefits	**6c**	55
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	195
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	195
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	170
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INGLEWOOD PARK CEMETERY

D Employer Identification Number (EIN)
95-3755235

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

1 Coverage Information:

(a) Name of insurance carrier

JOHN HANCOCK USA

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
01-0233346	65838	87492	184	01/01/2012	12/31/2012

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

(a) Total amount of commissions paid	**(b)** Total amount of fees paid
7165	4162

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

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

FINANCIAL TELESIS INC
17727 CHATSWORTH ST.
GRANADA HILLS, CA 91344

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
7165			3

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

ACTUARIAL BENEFITS CORP
2790 SKYPARK DRIVE, SUITE 300
TORRANCE, CA 90505

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
	4162	TPA FEES & OTHER ALLOWANCES	5

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	**4**	354850
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	3422685

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY

b	Balance at the end of the previous year			**7b**	309216
c	Additions: (1) Contributions deposited during the year	**7c(1)**	36202		
	(2) Dividends and credits	**7c(2)**	9432		
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below)	**7c(5)**			
	▶				
	(6) Total additions			**7c(6)**	45634
d	Total of balance and additions (add lines **7b** and **7c(6)**).			**7d**	354850
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below)	**7e(4)**			
	▶				
	(5) Total deductions			**7e(5)**	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	354850

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2012** **This Form is Open to Public Inspection.**

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INGLEWOOD PARK CEMETERY

D Employer Identification Number (EIN)
95-3755235

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

JOHN HANCOCK USA

P.O. BOX 600
BUFFALO, NY 14201-0600

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 28 60 62 63 68	RECORDKEEPING	310	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

B Three-digit plan number (PN) ▶ 003

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
INGLEWOOD PARK CEMETERY

D Employer Identification Number (EIN)
95-3755235

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	171571

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	196564

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	246198

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	924422

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	486133

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	592493

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
01-0233346-000	P	112255

a Name of MTIA, CCT, PSA, or 103-12 IE: RETIREMENT LIVING THROUGH 2010

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 182382

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27730

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 56400

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4466

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54766

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTYLE CONS G.I.F.L.

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 66474

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1656

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1768

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1664

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1650

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45143

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43920

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

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

c EIN-PN 01-0233346-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 205030

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

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

2012

This Form is Open to Public Inspection

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INGLEWOOD PARK CEMETERY

D Employer Identification Number (EIN)
95-3755235

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	5350
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4606	4606
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	36344	58485
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	3037542	3422685
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	309216	354850
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	3387708	3845976
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	3387708	3845976

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)	5350	
(B) Participants	2a(1)(B)	253902	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		259252
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9432	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	1610	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		11042
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		399003
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		669297
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	208182	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		208182
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	2325	
(2) Contract administrator fees	2i(2)	522	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2847
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		211029
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		458268
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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: WHITE, NELSON & COMPANY **(2)** EIN: 33-0686301

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 lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

Part V Trust Information (optional)

6a Name of trust	**6b** Trust's EIN

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

2012

This Form is Open to Public Inspection.

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
INGLEWOOD PARK CEMETERY 401K PLAN AND TRUST

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INGLEWOOD PARK CEMETERY

D Employer Identification Number (EIN)
95-3755235

Part I Distributions

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

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

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

EIN(s): 01-0233346

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 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 lines 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 lines 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 lines 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 lines 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 lines 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 line 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 lines (a) through (c)

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

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

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

INGLEWOOD PARK CEMETERY
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

YEAR ENDED DECEMBER 31, 2012

WITH INDEPENDENT AUDITORS' REPORT

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
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WHITE NELSON DIEHL EVANS LLP
Certified Public Accountants & Consultants

INDEPENDENT AUDITORS' REPORT

To the Participants and Plan Administrator of
the Inglewood Park Cemetery 401(k) Plan and Trust
Inglewood, California

Report on the Financial Statements

We were engaged to audit the financial statements of Inglewood Park Cemetery 401(k) Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note D, which was certified by John Hancock Life Insurance Company (U.S.A.), the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2012 and 2011, that the information provided to the plan administrator by the custodian is complete and accurate.

2875 Michelle Drive, Suite 300, Irvine, CA 92606 • Tel: 714.978.1300 • Fax: 714.978.7893

Offices located in Orange and San Diego Counties

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule, Schedule H, Line 4i - Schedule of Assets (Held At End of Year), which is the responsibility of plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

White Nelson Diehl Evans LLP

Irvine, California
July 31, 2013

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2012 AND 2011

ASSETS

	2012	2011
Investments:		
At Fair Value:		
Pooled Separate Accounts	$ 3,422,685	$ 3,037,542
Guaranteed Interest Accounts	392,433	336,639
Total Investments	3,815,118	3,374,181
Receivables:		
Employer Contribution	5,350	-
Notes Receivable From Participants	58,485	36,344
Total Receivables	63,835	36,344
Cash	4,607	4,607
Net Assets Available For Benefits	$ 3,883,560	$ 3,415,132

The accompanying notes are an integral part of these financial statements

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2012

Additions To Net Assets Attributed To:		
Contributions:		
Participant Contributions	$	253,902
Employer Contribution		5,350
Total Contributions		259,252
Earnings On Investments:		
Net Realized And Unrealized Gains On Pooled Separate Accounts		399,003
Interest Income From Guaranteed Interest Accounts		9,432
Net Realized And Unrealized Gains On Guaranteed Interest Accounts		10,160
Total Earnings On Investments		418,595
Interest Income On Notes Receivable From Participants		1,610
Total Additions To Net Assets Available For Benefits		679,457
Deductions From Net Assets Attributed To:		
Benefits Paid To Participants		208,182
Administrative Expenses		2,847
Total Deductions To Net Assets Available For Benefits		211,029
Increase In Net Assets Available For Benefits		468,428
Net Assets Available For Benefits, December 31, 2011		3,415,132
Net Assets Available For Benefits, December 31, 2012	$	3,883,560

The accompanying notes are an integral part of these financial statements

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2012

NOTE A: **Description Of The Plan** - The following description of the Inglewood Park Cemetery 401(k) Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement or Summary Plan Description for a more complete description of the Plan's provisions.

(1) General - The Plan is a defined contribution plan which was adopted by Inglewood Park Cemetery and Subsidiaries (the "Company") effective January 1, 2001, and is subject to the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA") and the Internal Revenue Code of 1986, as amended. The purpose of the Plan is to provide retirement benefits for all employees who meet the Plan's eligibility requirements. The Plan is administered by a third-party administrator appointed by the Company.

(2) Contributions - Participants may elect to contribute up to 100 percent of their pretax annual compensation not to exceed the maximum deferral limitation, as defined in the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Company may contribute a Safe Harbor Contribution of 3 percent of base compensation not to exceed the maximum annual deferral amount allowed by law. In addition, the Company may make profit sharing contributions at the discretion of the Board of Directors. The Company elected not to make a Safe Harbor Contribution or a discretionary profit sharing contribution for the year ended December 31, 2012. During 2012, the Company made a qualified non-elective contribution to the plan of $5,350 to satisfy the non-discrimination testing.

(3) Participant Accounts - Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

(4) Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon, is based on years of continuous service.

For discretionary non-elective contributions, participants become vested at a rate of 50 percent per year after one year of continual service and are considered 100 percent vested after three years of service. Participants are 100 percent vested in Safe Harbor contributions. For vesting purposes, continual service is considered to be a minimum of 1,000 hours during the Plan year.

NOTE A: **Description Of The Plan** - (Continued)

(5) Notes Receivable From Participants - Participants may borrow against their Plan account balance within Plan guidelines. Loan terms are at the discretion of the borrower but generally cannot exceed five years. The loan amount can be a minimum of $1,000, but cannot exceed the lesser of (a) $50,000 or (b) one-half of the participant's vested account balance under the Plan. Interest is charged on the outstanding balance at rates determined by the plan administrator based on the prevailing interest rates. Principal and interest is paid ratably through payroll deductions.

(6) Benefit Payments - Upon termination of service, a participant may elect to receive either a lump-sum distribution equal to the vested portion of his or her account or installments over a period not more than the participant's or beneficiary's life expectancy. For installment payments, the lump-sum value will be either segregated and separately invested by the custodian, or it will be invested in a nontransferable annuity. Vested balances less than $1,000, may be distributed in a lump-sum without the participant's consent. Additionally, under certain circumstances of financial hardship, participants are allowed to withdraw their funds from the Plan.

(7) Forfeitures - Forfeitures of the employee's non-vested portion of the Company's contributions are first used to reduce employer contributions or pay administrative expenses of the Plan, and any remaining forfeitures are reallocated to each eligible participant's account in the ratio that each eligible participant's compensation bears to the total compensation of all eligible participants. At December 31, 2012 and 2011, forfeited non-vested accounts totaled $4,607 and $4,607, respectively.

(8) Administrative Expenses - Certain administrative functions are performed by officers or employees of the Company. No such officer or employee received compensation from the Plan. The majority of administrative expenses incurred by the Plan are absorbed by the plan sponsor except for fees related to contract administration and service fees, which are deducted from the applicable participants' accounts.

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned on a daily basis and are reflected as a component of net appreciation (depreciation) in fair values of investments.

NOTE B: **Summary Of Significant Accounting Policies**

(1) Basis Of Accounting - The financial statements of the Plan are prepared on the accrual basis of accounting.

(2) Investment Valuation And Income Recognition - The Plan's investments are stated at fair value at December 31, 2012 and 2011. 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 G for discussion of fair value measurements.

Purchases and sales of investments are recorded as of the trade date. Interest is recorded on the accrual basis, and dividends are accrued as of the ex-dividend date. Capital gains and/or losses are reported the day after the trade date.

Net realized and unrealized appreciation (depreciation) is recorded in the accompanying statement of changes in net assets available for benefits as net realized and unrealized gains (losses) on investments.

Brokerage fees are added to the acquisition costs of assets purchased and subtracted from the proceeds of assets sold.

(3) Notes Receivable From Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

(4) Payments Of Benefits - Benefit payments to participants are recorded upon distribution.

(5) Use Of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the use of estimates and assumptions regarding certain types of assets, liabilities, revenues and gains, and expenses and losses. Such estimates primarily related to unsettled transactions and events as of the date of the financial statements. Accordingly, upon settlement, actual results may differ from those estimated amounts.

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

NOTE C: **Concentrations, Risks, And Uncertainties** - (Continued)

The Plan held substantially all of its assets with John Hancock. In the event of that institution's failure, the Plan could be subject to losses in its guaranteed interest and cash accounts totaling $397,040 and $341,246, at December 31, 2012 and 2011, respectively. The Plan is also at risk of loss in any of its pooled separate accounts that are managed by John Hancock, to the extent of the dollars invested in the funds.

NOTE D: **Information Prepared And Certified By John Hancock** - The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by John Hancock.

	December 31, 2012	December 31, 2011
Investments, At Fair Value:		
Pooled Separate Accounts	$ 3,422,685	$ 3,037,542
Guaranteed Interest Accounts	392,433	336,639
Notes Receivable From Participants	58,485	36,344
Cash	4,607	4,607
Interest Income From Guaranteed Interest Accounts	9,432	
Interest Income On Notes Receivable From Participants	1,610	
Net Appreciation In Fair Value Of Pooled Separate Accounts	399,003	
Net Appreciation In Fair Value Of The Guaranteed Interest Accounts	10,160	

NOTE E: **Investments** - The following table presents investments that represent 5 percent or more of the Plan's net assets:

	2012	2011
Pooled Separate Accounts:		
John Hancock Retirement Living At 2030	$ 924,422	$ 772,372
John Hancock Retirement Living At 2020	592,493	515,552
John Hancock Retirement Living At 2025	486,133	418,699
John Hancock Money Market	205,030	270,563
John Hancock Retirement Living At 2040	196,564	208,849
John Hancock Retirement Living At 2035	246,198	208,145
Guaranteed Interest Accounts:		
10 Year Comp	367,435	312,542

NOTE F: **Investment Contract With Insurance Company** - The Plan invests in non-benefit responsive guaranteed interest accounts with John Hancock. John Hancock maintains the contributions in a general account, which is credited with earnings on the underlying funds and charged for participant withdrawals and administrative expenses. The contract value weighted average yield and crediting interest rates varied between approximately 0.05 percent and 0.15 percent for 2012. The contract value weighted average yield and crediting interest rates varied between approximately 0.05 percent and 1.05 percent for 2011. Interest rates are established on the first day of each calendar month and apply to any regular ongoing contributions made to the guaranteed account in that month. For other types of contributions, interest rates may differ and may change during the month.

At the end of each reporting year, a "composite rate" of interest is determined for each participant account, depending on the amount contributed and the rate in effect on the day it is allocated under the participant account. The composite rate is the effective annual rate earned by all contributions to that guaranteed account during that reporting year for that participant. Contributions continue to earn the calculated composite interest rate for the duration of the guaranteed term. Interest rates are not reset. At the end of the guaranteed period, contributions and interest earned from a guaranteed account may be invested into any of the investment options available under the group annuity contract.

NOTE G: **Fair Value Measurements** - FASB Accounting Standards Codification (ASC) 820, *"Fair Value Measurements and Disclosures"*, provides the 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 FASB 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 liabilities;

NOTE G: **Fair Value Measurements** - (Continued)

Level 2: (Continued)

- 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, 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's 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. There have been no changes in the methodologies used at December 31, 2012 and 2011.

Pooled Separate Accounts: The Plan invests in pooled separate accounts consisting primarily of stocks and bonds and does not have guaranteed rates of return. The invested assets are adjusted to market value daily by the Separate Accounts Valuation and Accounting department utilizing unit values. Unit values are calculated using the market value of the assets, net of the investment management fee, of each account and the number of outstanding units.

Guaranteed Interest Accounts: Guaranteed interest accounts are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuer.

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

NOTE G: **Fair Value Measurements** - (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value on a recurring basis as of December 31, 2012.

	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts:				
Large Cap Blend	$ -	$ 2,192,935	$ -	$ 2,192,935
Large Cap Growth	-	977,382	-	977,382
Money Market	-	205,030	-	205,030
Intermediate Term Bond	-	43,920	-	43,920
Other	-	3,418	-	3,418
Total Pooled Separate Accounts	-	3,422,685	-	3,422,685
Guaranteed Interest Accounts	-	392,433	-	392,433
Total Assets At Fair Value	$ -	$ 3,815,118	$ -	$ 3,815,118

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value on a recurring basis as of December 31, 2011.

	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts:				
Large Cap Blend	$ -	$ 1,895,137	$ -	$ 1,895,137
Large Cap Growth	-	842,505	-	842,505
Money Market	-	270,562	-	270,562
Intermediate Term Bond	-	29,338	-	29,338
Total Pooled Separate Accounts	-	3,037,542	-	3,037,542
Guaranteed Interest Accounts	-	336,639	-	336,639
Total Assets At Fair Value	$ -	$ 3,374,181	$ -	$ 3,374,181

NOTE H: **Net Asset Value Per Share (NAV)** - The following table for December 31, 2012 and 2011 sets forth a summary of the Plan's investments whose fair value is estimated using NAV (or its equivalent):

	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Pooled Separate Accounts:				
Large Cap Blend (a)	None	Daily	None	None
Large Cap Growth (b)	None	Daily	None	None
Money Market (c)	None	Daily	None	None
Intermediate Term Bond (d)	None	Daily	None	None

(a) Large Capitalization Blend – Under normal market conditions, these funds invest substantially all of their assets in portfolios of other investment funds using an asset allocation strategy designed for investors based on expected retirement dates.

(b) Large Capitalization Growth - These investments seek capital growth and current income. The fund invests primarily in common stocks and seeks to invest in companies that appear to offer superior opportunities for growth of capital and have favorable income-paying history.

(c) Money Market - These investments seek to obtain maximum current income consistent with income preservation of principal and liquidity. Under normal market conditions, these funds invest in high quality, U.S. Dollar denominated money market instruments.

(d) Intermediate Term Bond - These investments seek maximum total return, consistent with preservation of capital and prudent investment management. These funds normally invest at least 65% of their total assets in a diversified portfolio of Fixed Income Instruments of varying maturities, which may be represented by forwards or derivatives such as options, futures contracts, or swap agreements.

In selecting securities for these funds, economic forecasting, interest rate anticipation, credit and call risk analysis, foreign currency exchange rate forecasting, and other security selection techniques are utilized. The proportion of the funds' assets committed to investment in securities with particular characteristics (such as maturity, type, and coupon rate) will vary based on the outlook for domestic and foreign economies, the financial markets, and other factors.

NOTE H: **Net Asset Value Per Share (NAV)** - (Continued)

The custodian invests in funds that are intended for long-term investment purposes only and does not knowingly accept shareholders who engage in market timing or other types of excessive short-term trading. The funds or their agents may reject or cancel a purchase order, suspend or terminate the exchange privilege or terminate the ability of an investor to invest if the funds or their agents determine that a proposed transaction involves market timing or disruptive trading that is likely to be detrimental to the fund.

NOTE I: **Plan Termination** - Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, all participants would become fully vested in their accounts.

NOTE J: **Withdrawn Participants** - At December 31, 2012, there were no amounts allocated to accounts of persons who have elected to withdraw from the Plan but have not been paid.

NOTE K: **Tax Status** - The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated November 29, 2002, that the Plan and the related trust are designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter, however, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. The related trust, therefore, is not subject to tax under the present income tax law.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2012, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

NOTE L: **Exempt Party-In-Interest Transactions** - Plan investments in pooled separate accounts and guaranteed interest accounts are managed by John Hancock, the custodian, as defined by the Plan, and therefore, these investments qualify as party-in interest transactions. Notes receivable from participants represent loans to employees, and therefore, also qualify as party-in-interest transactions**.**

NOTE M: **Differences On Form 5500 -** The investment in the guaranteed interest accounts have been reported at fair value on the financial statements as required by accounting principles generally accepted in the United States of America. However, for the year ended December 31, 2012, the investment in the guaranteed interest accounts have been reported at contract value on the Form 5500 to be filed with the IRS.

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2012
Net Assets Available For Benefits Per The Financial Statements	$ 3,883,560
Less: Net Unrealized Gain On Guaranteed Interest Accounts	(37,584)
Net Assets Available For Benefits Per The Form 5500	$ 3,845,976

The following is a reconciliation of total additions to net assets available for benefits per the financial statements to total income on the Form 5500:

	Year Ended Dec. 31, 2012
Total Additions To Net Assets Available For Benefits Per The Financial Statements	$ 679,457
Less: Net Unrealized Gain On Guaranteed Interest Accounts	(37,584)
Plus: Prior Year Net Unrealized Gain On Guaranteed Interest Accounts	27,424
Total Income Per the Form 5500	$ 669,297

NOTE N: **Subsequent Events** - The Plan has evaluated subsequent events through July 31, 2013, the date the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

Form 5500, Schedule H, Line 4i
Employer I.D.: #95-3755235
Plan: #003

(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
	Pooled Separate Accounts			
*	John Hancock	Retirement Living At 2030	$ **	$ 924,422
*	John Hancock	Retirement Living At 2020	**	592,493
*	John Hancock	Retirement Living At 2025	**	486,133
*	John Hancock	Money Market Fund	**	205,030
*	John Hancock	Retirement Living At 2040	**	196,564
*	John Hancock	Retirement Living At 2035	**	246,198
*	John Hancock	Retirement Living At 2010	**	182,382
*	John Hancock	Retirement Living At 2045	**	171,571
*	John Hancock	Retirement Living At 2015	**	112,255
*	John Hancock	Lifestyle Fund - Conservative	**	54,766
*	John Hancock	Lifestyle Fund - Cons. G.I.F.L	**	66,474
*	John Hancock	Lifestyle Fund - Balanced	**	56,400
*	John Hancock	PIMCO Total Return Fund	**	43,920
*	John Hancock	Investment Company of America	**	45,143
*	John Hancock	Lifestyle Fund - Growth	**	27,730
*	John Hancock	Lifestyle Fund - Moderate	**	4,466
*	John Hancock	Growth Index Fund	**	1,650
*	John Hancock	Total Stock Market Index Fund	**	1,664
*	John Hancock	Oppenheimer Global Fund	**	1,768
*	John Hancock	Blue Chip Growth Fund	**	1,656
	Guaranteed Interest Accounts			
*	John Hancock	10 Year Comp, Mat 12/31/20, 0.15%	**	367,435
*	John Hancock	3 Year Comp, Mat 12/31/12, 0.05%	**	24,774
*	John Hancock	5 Year Comp, Mat 12/31/15, 0.05%	**	224
*	Participant Loans	Interest Rates From 3.25%	**	58,485
			$ **	$ 3,873,603

* Party-In-Interest
** Cost Information Excluded As Permitted For All Participant-Directed Accounts

INGLEWOOD PARK CEMETERY
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

YEAR ENDED DECEMBER 31, 2012

WITH INDEPENDENT AUDITORS' REPORT

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
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WHITE NELSON DIEHL EVANS LLP
Certified Public Accountants & Consultants

INDEPENDENT AUDITORS' REPORT

To the Participants and Plan Administrator of
the Inglewood Park Cemetery 401(k) Plan and Trust
Inglewood, California

Report on the Financial Statements

We were engaged to audit the financial statements of Inglewood Park Cemetery 401(k) Plan and Trust (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note D, which was certified by John Hancock Life Insurance Company (U.S.A.), the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the custodian as of and for the years ended December 31, 2012 and 2011, that the information provided to the plan administrator by the custodian is complete and accurate.

2875 Michelle Drive, Suite 300, Irvine, CA 92606 • Tel: 714.978.1300 • Fax: 714.978.7893

Offices located in Orange and San Diego Counties

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion.

Other Matter

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule, Schedule H, Line 4i - Schedule of Assets (Held At End of Year), which is the responsibility of plan management, is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

White Nelson Diehl Evans LLP

Irvine, California
July 31, 2013

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2012 AND 2011

ASSETS

	2012	2011
Investments:		
At Fair Value:		
Pooled Separate Accounts	$ 3,422,685	$ 3,037,542
Guaranteed Interest Accounts	392,433	336,639
Total Investments	3,815,118	3,374,181
Receivables:		
Employer Contribution	5,350	-
Notes Receivable From Participants	58,485	36,344
Total Receivables	63,835	36,344
Cash	4,607	4,607
Net Assets Available For Benefits	$ 3,883,560	$ 3,415,132

The accompanying notes are an integral part of these financial statements

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2012

Additions To Net Assets Attributed To:		
Contributions:		
Participant Contributions	$	253,902
Employer Contribution		5,350
Total Contributions		259,252
Earnings On Investments:		
Net Realized And Unrealized Gains On Pooled Separate Accounts		399,003
Interest Income From Guaranteed Interest Accounts		9,432
Net Realized And Unrealized Gains On Guaranteed Interest Accounts		10,160
Total Earnings On Investments		418,595
Interest Income On Notes Receivable From Participants		1,610
Total Additions To Net Assets Available For Benefits		679,457
Deductions From Net Assets Attributed To:		
Benefits Paid To Participants		208,182
Administrative Expenses		2,847
Total Deductions To Net Assets Available For Benefits		211,029
Increase In Net Assets Available For Benefits		468,428
Net Assets Available For Benefits, December 31, 2011		3,415,132
Net Assets Available For Benefits, December 31, 2012	$	3,883,560

The accompanying notes are an integral part of these financial statements

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2012

NOTE A: **Description Of The Plan** - The following description of the Inglewood Park Cemetery 401(k) Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement or Summary Plan Description for a more complete description of the Plan's provisions.

(1) General - The Plan is a defined contribution plan which was adopted by Inglewood Park Cemetery and Subsidiaries (the "Company") effective January 1, 2001, and is subject to the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA") and the Internal Revenue Code of 1986, as amended. The purpose of the Plan is to provide retirement benefits for all employees who meet the Plan's eligibility requirements. The Plan is administered by a third-party administrator appointed by the Company.

(2) Contributions - Participants may elect to contribute up to 100 percent of their pretax annual compensation not to exceed the maximum deferral limitation, as defined in the Internal Revenue Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Company may contribute a Safe Harbor Contribution of 3 percent of base compensation not to exceed the maximum annual deferral amount allowed by law. In addition, the Company may make profit sharing contributions at the discretion of the Board of Directors. The Company elected not to make a Safe Harbor Contribution or a discretionary profit sharing contribution for the year ended December 31, 2012. During 2012, the Company made a qualified non-elective contribution to the plan of $5,350 to satisfy the non-discrimination testing.

(3) Participant Accounts - Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

(4) Vesting - Participants are vested immediately in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon, is based on years of continuous service.

For discretionary non-elective contributions, participants become vested at a rate of 50 percent per year after one year of continual service and are considered 100 percent vested after three years of service. Participants are 100 percent vested in Safe Harbor contributions. For vesting purposes, continual service is considered to be a minimum of 1,000 hours during the Plan year.

NOTE A: **Description Of The Plan** - (Continued)

(5) Notes Receivable From Participants - Participants may borrow against their Plan account balance within Plan guidelines. Loan terms are at the discretion of the borrower but generally cannot exceed five years. The loan amount can be a minimum of $1,000, but cannot exceed the lesser of (a) $50,000 or (b) one-half of the participant's vested account balance under the Plan. Interest is charged on the outstanding balance at rates determined by the plan administrator based on the prevailing interest rates. Principal and interest is paid ratably through payroll deductions.

(6) Benefit Payments - Upon termination of service, a participant may elect to receive either a lump-sum distribution equal to the vested portion of his or her account or installments over a period not more than the participant's or beneficiary's life expectancy. For installment payments, the lump-sum value will be either segregated and separately invested by the custodian, or it will be invested in a nontransferable annuity. Vested balances less than $1,000, may be distributed in a lump-sum without the participant's consent. Additionally, under certain circumstances of financial hardship, participants are allowed to withdraw their funds from the Plan.

(7) Forfeitures - Forfeitures of the employee's non-vested portion of the Company's contributions are first used to reduce employer contributions or pay administrative expenses of the Plan, and any remaining forfeitures are reallocated to each eligible participant's account in the ratio that each eligible participant's compensation bears to the total compensation of all eligible participants. At December 31, 2012 and 2011, forfeited non-vested accounts totaled $4,607 and $4,607, respectively.

(8) Administrative Expenses - Certain administrative functions are performed by officers or employees of the Company. No such officer or employee received compensation from the Plan. The majority of administrative expenses incurred by the Plan are absorbed by the plan sponsor except for fees related to contract administration and service fees, which are deducted from the applicable participants' accounts.

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned on a daily basis and are reflected as a component of net appreciation (depreciation) in fair values of investments.

NOTE B: **Summary Of Significant Accounting Policies**

(1) Basis Of Accounting - The financial statements of the Plan are prepared on the accrual basis of accounting.

(2) Investment Valuation And Income Recognition - The Plan's investments are stated at fair value at December 31, 2012 and 2011. 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 G for discussion of fair value measurements.

Purchases and sales of investments are recorded as of the trade date. Interest is recorded on the accrual basis, and dividends are accrued as of the ex-dividend date. Capital gains and/or losses are reported the day after the trade date.

Net realized and unrealized appreciation (depreciation) is recorded in the accompanying statement of changes in net assets available for benefits as net realized and unrealized gains (losses) on investments.

Brokerage fees are added to the acquisition costs of assets purchased and subtracted from the proceeds of assets sold.

(3) Notes Receivable From Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon terms of the Plan document.

(4) Payments Of Benefits - Benefit payments to participants are recorded upon distribution.

(5) Use Of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the use of estimates and assumptions regarding certain types of assets, liabilities, revenues and gains, and expenses and losses. Such estimates primarily related to unsettled transactions and events as of the date of the financial statements. Accordingly, upon settlement, actual results may differ from those estimated amounts.

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

NOTE C: **Concentrations, Risks, And Uncertainties** - (Continued)

The Plan held substantially all of its assets with John Hancock. In the event of that institution's failure, the Plan could be subject to losses in its guaranteed interest and cash accounts totaling $397,040 and $341,246, at December 31, 2012 and 2011, respectively. The Plan is also at risk of loss in any of its pooled separate accounts that are managed by John Hancock, to the extent of the dollars invested in the funds.

NOTE D: **Information Prepared And Certified By John Hancock** - The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by John Hancock.

	December 31, 2012	December 31, 2011
Investments, At Fair Value:		
Pooled Separate Accounts	$ 3,422,685	$ 3,037,542
Guaranteed Interest Accounts	392,433	336,639
Notes Receivable From Participants	58,485	36,344
Cash	4,607	4,607
Interest Income From Guaranteed Interest Accounts	9,432	
Interest Income On Notes Receivable From Participants	1,610	
Net Appreciation In Fair Value Of Pooled Separate Accounts	399,003	
Net Appreciation In Fair Value Of The Guaranteed Interest Accounts	10,160	

NOTE E: **Investments** - The following table presents investments that represent 5 percent or more of the Plan's net assets:

	2012	2011
Pooled Separate Accounts:		
John Hancock Retirement Living At 2030	$ 924,422	$ 772,372
John Hancock Retirement Living At 2020	592,493	515,552
John Hancock Retirement Living At 2025	486,133	418,699
John Hancock Money Market	205,030	270,563
John Hancock Retirement Living At 2040	196,564	208,849
John Hancock Retirement Living At 2035	246,198	208,145
Guaranteed Interest Accounts:		
10 Year Comp	367,435	312,542

NOTE F: **Investment Contract With Insurance Company** - The Plan invests in non-benefit responsive guaranteed interest accounts with John Hancock. John Hancock maintains the contributions in a general account, which is credited with earnings on the underlying funds and charged for participant withdrawals and administrative expenses. The contract value weighted average yield and crediting interest rates varied between approximately 0.05 percent and 0.15 percent for 2012. The contract value weighted average yield and crediting interest rates varied between approximately 0.05 percent and 1.05 percent for 2011. Interest rates are established on the first day of each calendar month and apply to any regular ongoing contributions made to the guaranteed account in that month. For other types of contributions, interest rates may differ and may change during the month.

At the end of each reporting year, a "composite rate" of interest is determined for each participant account, depending on the amount contributed and the rate in effect on the day it is allocated under the participant account. The composite rate is the effective annual rate earned by all contributions to that guaranteed account during that reporting year for that participant. Contributions continue to earn the calculated composite interest rate for the duration of the guaranteed term. Interest rates are not reset. At the end of the guaranteed period, contributions and interest earned from a guaranteed account may be invested into any of the investment options available under the group annuity contract.

NOTE G: **Fair Value Measurements** - FASB Accounting Standards Codification (ASC) 820, *"Fair Value Measurements and Disclosures"*, provides the 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 FASB 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 liabilities;

NOTE G: **Fair Value Measurements** - (Continued)

Level 2: (Continued)

- 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, 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's 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. There have been no changes in the methodologies used at December 31, 2012 and 2011.

Pooled Separate Accounts: The Plan invests in pooled separate accounts consisting primarily of stocks and bonds and does not have guaranteed rates of return. The invested assets are adjusted to market value daily by the Separate Accounts Valuation and Accounting department utilizing unit values. Unit values are calculated using the market value of the assets, net of the investment management fee, of each account and the number of outstanding units.

Guaranteed Interest Accounts: Guaranteed interest accounts are valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuer.

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

NOTE G: **Fair Value Measurements** - (Continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value on a recurring basis as of December 31, 2012.

	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts:				
Large Cap Blend	$ -	$ 2,192,935	$ -	$ 2,192,935
Large Cap Growth	-	977,382	-	977,382
Money Market	-	205,030	-	205,030
Intermediate Term Bond	-	43,920	-	43,920
Other	-	3,418	-	3,418
Total Pooled Separate Accounts	-	3,422,685	-	3,422,685
Guaranteed Interest Accounts	-	392,433	-	392,433
Total Assets At Fair Value	$ -	$ 3,815,118	$ -	$ 3,815,118

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value on a recurring basis as of December 31, 2011.

	Level 1	Level 2	Level 3	Total
Pooled Separate Accounts:				
Large Cap Blend	$ -	$ 1,895,137	$ -	$ 1,895,137
Large Cap Growth	-	842,505	-	842,505
Money Market	-	270,562	-	270,562
Intermediate Term Bond	-	29,338	-	29,338
Total Pooled Separate Accounts	-	3,037,542	-	3,037,542
Guaranteed Interest Accounts	-	336,639	-	336,639
Total Assets At Fair Value	$ -	$ 3,374,181	$ -	$ 3,374,181

NOTE H: **Net Asset Value Per Share (NAV)** - The following table for December 31, 2012 and 2011 sets forth a summary of the Plan's investments whose fair value is estimated using NAV (or its equivalent):

	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Pooled Separate Accounts:				
Large Cap Blend (a)	None	Daily	None	None
Large Cap Growth (b)	None	Daily	None	None
Money Market (c)	None	Daily	None	None
Intermediate Term Bond (d)	None	Daily	None	None

(a) Large Capitalization Blend – Under normal market conditions, these funds invest substantially all of their assets in portfolios of other investment funds using an asset allocation strategy designed for investors based on expected retirement dates.

(b) Large Capitalization Growth - These investments seek capital growth and current income. The fund invests primarily in common stocks and seeks to invest in companies that appear to offer superior opportunities for growth of capital and have favorable income-paying history.

(c) Money Market - These investments seek to obtain maximum current income consistent with income preservation of principal and liquidity. Under normal market conditions, these funds invest in high quality, U.S. Dollar denominated money market instruments.

(d) Intermediate Term Bond - These investments seek maximum total return, consistent with preservation of capital and prudent investment management. These funds normally invest at least 65% of their total assets in a diversified portfolio of Fixed Income Instruments of varying maturities, which may be represented by forwards or derivatives such as options, futures contracts, or swap agreements.

In selecting securities for these funds, economic forecasting, interest rate anticipation, credit and call risk analysis, foreign currency exchange rate forecasting, and other security selection techniques are utilized. The proportion of the funds' assets committed to investment in securities with particular characteristics (such as maturity, type, and coupon rate) will vary based on the outlook for domestic and foreign economies, the financial markets, and other factors.

NOTE H: **Net Asset Value Per Share (NAV)** - (Continued)

The custodian invests in funds that are intended for long-term investment purposes only and does not knowingly accept shareholders who engage in market timing or other types of excessive short-term trading. The funds or their agents may reject or cancel a purchase order, suspend or terminate the exchange privilege or terminate the ability of an investor to invest if the funds or their agents determine that a proposed transaction involves market timing or disruptive trading that is likely to be detrimental to the fund.

NOTE I: **Plan Termination** - Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, all participants would become fully vested in their accounts.

NOTE J: **Withdrawn Participants** - At December 31, 2012, there were no amounts allocated to accounts of persons who have elected to withdraw from the Plan but have not been paid.

NOTE K: **Tax Status** - The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated November 29, 2002, that the Plan and the related trust are designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter, however, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC. The related trust, therefore, is not subject to tax under the present income tax law.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2012, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

NOTE L: **Exempt Party-In-Interest Transactions** - Plan investments in pooled separate accounts and guaranteed interest accounts are managed by John Hancock, the custodian, as defined by the Plan, and therefore, these investments qualify as party-in interest transactions. Notes receivable from participants represent loans to employees, and therefore, also qualify as party-in-interest transactions**.**

NOTE M: **Differences On Form 5500 -** The investment in the guaranteed interest accounts have been reported at fair value on the financial statements as required by accounting principles generally accepted in the United States of America. However, for the year ended December 31, 2012, the investment in the guaranteed interest accounts have been reported at contract value on the Form 5500 to be filed with the IRS.

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500:

	2012
Net Assets Available For Benefits Per The Financial Statements	$ 3,883,560
Less: Net Unrealized Gain On Guaranteed Interest Accounts	(37,584)
Net Assets Available For Benefits Per The Form 5500	$ 3,845,976

The following is a reconciliation of total additions to net assets available for benefits per the financial statements to total income on the Form 5500:

	Year Ended Dec. 31, 2012
Total Additions To Net Assets Available For Benefits Per The Financial Statements	$ 679,457
Less: Net Unrealized Gain On Guaranteed Interest Accounts	(37,584)
Plus: Prior Year Net Unrealized Gain On Guaranteed Interest Accounts	27,424
Total Income Per the Form 5500	$ 669,297

NOTE N: **Subsequent Events** - The Plan has evaluated subsequent events through July 31, 2013, the date the financial statements were available to be issued.

SUPPLEMENTAL INFORMATION

INGLEWOOD PARK CEMETERY 401(k) PLAN AND TRUST
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

Form 5500, Schedule H, Line 4i
Employer I.D.: #95-3755235
Plan: #003

(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
	Pooled Separate Accounts			
*	John Hancock	Retirement Living At 2030	$ **	$ 924,422
*	John Hancock	Retirement Living At 2020	**	592,493
*	John Hancock	Retirement Living At 2025	**	486,133
*	John Hancock	Money Market Fund	**	205,030
*	John Hancock	Retirement Living At 2040	**	196,564
*	John Hancock	Retirement Living At 2035	**	246,198
*	John Hancock	Retirement Living At 2010	**	182,382
*	John Hancock	Retirement Living At 2045	**	171,571
*	John Hancock	Retirement Living At 2015	**	112,255
*	John Hancock	Lifestyle Fund - Conservative	**	54,766
*	John Hancock	Lifestyle Fund - Cons. G.I.F.L	**	66,474
*	John Hancock	Lifestyle Fund - Balanced	**	56,400
*	John Hancock	PIMCO Total Return Fund	**	43,920
*	John Hancock	Investment Company of America	**	45,143
*	John Hancock	Lifestyle Fund - Growth	**	27,730
*	John Hancock	Lifestyle Fund - Moderate	**	4,466
*	John Hancock	Growth Index Fund	**	1,650
*	John Hancock	Total Stock Market Index Fund	**	1,664
*	John Hancock	Oppenheimer Global Fund	**	1,768
*	John Hancock	Blue Chip Growth Fund	**	1,656
	Guaranteed Interest Accounts			
*	John Hancock	10 Year Comp, Mat 12/31/20, 0.15%	**	367,435
*	John Hancock	3 Year Comp, Mat 12/31/12, 0.05%	**	24,774
*	John Hancock	5 Year Comp, Mat 12/31/15, 0.05%	**	224
*	Participant Loans	Interest Rates From 3.25%	**	58,485
			$ **	$ 3,873,603

* Party-In-Interest
** Cost Information Excluded As Permitted For All Participant-Directed Accounts

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan:

► INGLEWOOD PARK CEMETERY 401(K) SAVINGS PLAN

Employer Identification Number:► 95-3755235

For plan year (beginning/ending)► 01-01-2012 / 12-31-2012 Plan number:| 003

(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
*	John Hancock USA	Retirement Living through 2045		171571
*	John Hancock USA	Retirement Living through 2040		196564
*	John Hancock USA	Retirement Living through 2035		246198
*	John Hancock USA	Retirement Living through 2030		924422
*	John Hancock USA	Retirement Living through 2025		486133
*	John Hancock USA	Retirement Living through 2020		592493
*	John Hancock USA	Retirement Living through 2015		112255
*	John Hancock USA	Retirement Living through 2010		182382
*	John Hancock USA	Lifestyle Growth		27730
*	John Hancock USA	Lifestyle Balanced		56400
*	John Hancock USA	Lifestyle Moderate		4466
*	John Hancock USA	Lifestyle Conservative		54766
*	John Hancock USA	Lifestyle Cons G.I.F.L.		66474
*	John Hancock USA	Blue Chip Growth Fund		1656
*	John Hancock USA	Oppenheimer Global		1768
*	John Hancock USA	Total Stock Market Index Fund		1664
*	John Hancock USA	Growth Index Fund		1650
*	John Hancock USA	Investment Company of America		45143
*	John Hancock USA	PIMCO Total Return		43920
*	John Hancock USA	Money Market Fund		205030
*	Participant Loans	Interest Rate 3.25%		58485