

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2012 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2012 or fiscal plan year beginning <u>01/01/2012</u> and ending <u>12/31/2012</u>	
A This return/report is for:	<input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or <input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____
B This return/report is:	<input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report; <input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	<input type="checkbox"/>
D Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program; <input type="checkbox"/> special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>VALET WASTE LLC 401(K) PROFIT SHARING PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>12/15/2011</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>12/15/2011</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>12/15/2011</u>					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) <u>VALET WASTE LLC</u> <u>601 N. ASHLEY DRIVE</u> <u>SUITE 700</u> <u>TAMPA, FL 33602</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>20-4186236</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>813-248-1327</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>561720</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>20-4186236</u>	2c Sponsor's telephone number <u>813-248-1327</u>	2d Business code (see instructions) <u>561720</u>	
2b Employer Identification Number (EIN) <u>20-4186236</u>					
2c Sponsor's telephone number <u>813-248-1327</u>					
2d Business code (see instructions) <u>561720</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature. Signature of plan administrator	10/09/2013 Date	TARA KIDD Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature. Signature of employer/plan sponsor	10/09/2013 Date	TARA KIDD 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 <input type="checkbox"/> Same as Plan Sponsor Name <input type="checkbox"/> Same as Plan Sponsor Address VALET WASTE LLC 601 N. ASHLEY DRIVE SUITE 700 TAMPA, FL 33602		3b Administrator's EIN 20-4186236
		3c Administrator's telephone number 813-248-1327
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		5 149
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	168
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	4
d Subtotal. Add lines 6a , 6b , and 6c	6d	172
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	172
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	59
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 2F 2G 2J 2K 2T 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) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> 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) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		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 <u>VALET WASTE LLC 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VALET WASTE LLC</u>	D Employer Identification Number (EIN) <u>20-4186236</u>

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
<u>FID.INV.INST.OPS.CO.</u>
<u>04-2647786</u>

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
<u>GALLIARD CAPITAL MANAGEMENT</u> <u>800 LASALLE AVENUE</u>
<u>SUITE 1100</u>
<u>MINNEAPOLIS, MN 55402-2054</u>

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

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

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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
64 37 65 60	RECORDKEEPER	400	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

UBS

100 S. ASHLEY DRIVE
TAMPA, FL 33602

(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?
61	ADVISOR	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
CBA APPR I - BOSTON FINANCIAL DATA 330 W. 9TH STREET KANSAS CITY, MO 66160	0.15%	
<hr/>		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
COL MID CAP VALUE Z - COLUMBIA MGT 31-1249295	0.25%	
<hr/>		
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
DREY EMERGING MKTS I - DREYFUS TRAN 13-2614959	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
<p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>FKLN HIGH INCOME ADV - FRANKLIN TEM</p> <p>94-3167260</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>0.25%</p>		
<p>(a) Enter service provider name as it appears on line 2</p> <p>FIDELITY INVESTMENTS INSTITUTIONAL</p>		
<p>(b) Service Codes (see instructions)</p> <p>60</p>		
<p>(c) Enter amount of indirect compensation</p> <p>0</p>		
<p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>JPM EQUITY IDX SEL - BOSTON FINANCI 330 W. 9TH STREET KANSAS CITY, MO 66160</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>0.05%</p>		
<p>(a) Enter service provider name as it appears on line 2</p> <p>FIDELITY INVESTMENTS INSTITUTIONAL</p>		
<p>(b) Service Codes (see instructions)</p> <p>60</p>		
<p>(c) Enter amount of indirect compensation</p> <p>0</p>		
<p>(d) Enter name and EIN (address) of source of indirect compensation</p> <p>PRU/J SMALL CO Z - PRUDENTIAL MUTUA</p> <p>22-3703799</p>		
<p>(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.</p> <p>0.25%</p>		

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
ROYCE PA MUTUAL INV - BOSTON FINANC P.O. BOX 8480 BOSTON, MA 02266	0.20%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
TRP EQUITY INCOME - T. ROWE PRICE S 52-2269240	0.15%	
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
WA CORE PLUS BOND I - BOSTON FINANC 330 W. 9TH STREET KANSAS CITY, MO 66160	0.15%	

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
SEE NOTE 2	61	0
(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.	
COL MID CAP VALUE Z - COLUMBIA MGT 31-1249295	\$0-<\$3M=1.00% \$3M-<\$50M=0.50% \$50M+=0.25%	
(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.	

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:

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
VALET WASTE LLC 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN)	001
--	-----

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
VALET WASTE LLC

D	Employer Identification Number (EIN)
	20-4186236

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: **WF STABLE VALUE**

b Name of sponsor of entity listed in (a): **WELLS FARGO BANK, N.A.**

c EIN-PN 94-6751924-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 33368
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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)
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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)
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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)
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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)
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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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2012 This Form is Open to Public Inspection
For calendar plan year 2012 or fiscal plan year beginning <u>01/01/2012</u> and ending <u>12/31/2012</u>		
A Name of plan <u>VALET WASTE LLC 401(K) PROFIT SHARING PLAN</u>		B Three-digit plan number (PN) <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VALET WASTE LLC</u>		D Employer Identification Number (EIN) <u>20-4186236</u>

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	85440
(2) Participant contributions	1b(2)	1917	0
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	28314	14251
(9) Value of interest in common/collective trusts.....	1c(9)	17377	33368
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	623963	818159
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	671571	951218

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	671571	951218
---	-----------	--------	--------

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)	85440	
(B) Participants	2a(1)(B)	177204	
(C) Others (including rollovers)	2a(1)(C)	4391	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		267035
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	998	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		998
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	20115	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		20115
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		321
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		70113
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		358582

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	78535	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		78535
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	400	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		400
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		78935

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		279647
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: FOELGNER RONZ & STRAW PA

(2) EIN: 59-2482214

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:

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.).....

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.).....

	Yes	No	Amount
4a		X	
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.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

5b(1) Name of plan(s)

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

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

A Name of plan <u>VALET WASTE LLC 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VALET WASTE LLC</u>	D Employer Identification Number (EIN) <u>20-4186236</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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): _____

Valet Waste LLC 401(k) Profit Sharing Plan

Financial Statements

For the Years Ended December 31, 2012 and 2011

Valet Waste LLC 401(k) Profit Sharing Plan Contents

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FRSCPA
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditors' Report

Plan Participants and Administrator
Valet Waste LLC 401(k) Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements and schedules of Valet Waste LLC 401(k) Profit Sharing Plan (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 years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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.

Auditor's 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 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 4, which was certified by Fidelity Management Trust Company, 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.

Disclaimer of Opinion

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

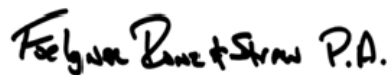
basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter – Supplemental Schedules

The supplemental schedule of Assets (Held at End of Year) as of December 31, 2012 and 2011 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

The form and content of the information included in the 2012 and 2011 financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



Foelgner Ronz & Straw PA
Certified Public Accountants
September 19, 2013

**Valet Waste LLC 401(k)
Profit Sharing Plan
Statements of Net Assets Available for Benefits**

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Assets		
Investments , at fair value:		
Mutual funds	\$ 818,159	\$ 623,963
Guaranteed investment contract	34,336	17,829
Total investments	852,495	641,792
Receivables:		
Contributions receivable:		
Participant	–	1,917
Employer	85,440	–
Notes receivable from participants	14,251	28,314
Total receivables	99,691	30,231
Total assets	952,186	672,023
Liabilities		
Excess contributions payable	14,349	–
Net assets available for benefits , at fair value	937,837	672,023
Adjustment from fair value to contract value for fully- benefit responsive investment contract	(968)	(452)
Net assets available for benefits	\$ 936,869	\$ 671,571

See accompanying notes to financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan

Statements of Changes in Net Assets Available for Benefits

<i>Year ended December 31,</i>	2012	2011
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	\$ 70,435	\$ 2,159
Interest and dividends	20,115	13,362
Interest on participant loans	998	–
Total investment income	91,548	15,521
Contributions:		
Participant	167,244	1,917
Employer	85,440	–
Total contributions	252,684	1,917
Transfer of assets into the plan	–	654,133
Total additions	344,232	671,571
Deductions from net assets attributable to:		
Benefits paid to participants	78,534	–
Administrative fees	400	–
Total deductions	78,934	–
Net increase in net assets available for benefits	265,298	671,571
Net assets available for benefits, beginning of year	671,571	–
Net assets available for benefits, end of year	\$ 936,869	\$ 671,571

See accompanying notes to financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

1. Plan Description

The following description of the Valet Waste LLC 401(k) Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more comprehensive description of the Plan's provisions.

- a) *General* – The Plan is a 401(k) defined contribution plan covering substantially all full-time employees of Valet Waste, LLC (the Company) who have completed three months of service and are age twenty-one or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan was formed effective December 15, 2011.

- b) *Contributions* – Each year participants may contribute up to 75% of annual compensation to the Plan subject to certain limitation under the Internal Revenue Code ("IRC"). Participants who have attained age 50 before the end of the calendar year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified benefit plans.

The Plan allows for discretionary employer matching contributions. The Board of Directors of the Company determines the matching contribution to be made; however the Company is not obligated to make a contribution. A participant's eligibility for matching contributions is based on the following factors: (1) the employee must be employed on the last day of the year; (2) employee must have completed at least 1,000 hours of service during the plan year. For 2012, the Company offered a match of 100% of employees' contributions up to the first 3% deferred and 50% of the next 2% deferred. No matching contributions were made in 2011.

- c) *Participants Accounts* – Each participant's account is credited with the participant's contributions and allocation 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. Administrative expenses may be charged based on account balances or charged equally to each participant. The benefit to which a participant is entitled is the benefit that can be provided from the

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

participant's vested account.

Participants direct the investment of their contributions and the Company's contribution into various investment options offered by the Plan. Participants may change their investment options at any time online at the record keeper's website.

- d) *Vesting* – Participants are vested immediately in their contributions and the Company's matching contributions.
- e) *Notes Receivable from Participants* – Under the terms of the plan, participants may borrow up to fifty percent of their vested account balance, with a minimum of \$1,000 and up to a maximum of \$50,000. The loans are secured by the balance in the participant's account and bear interest at a rate determined by the Plan Administrator. Principal and interest are paid ratably through payroll deductions.
- f) *Payment of Benefits* – In the case of retirement, death, disability or termination of employment, participants may elect to receive the vested accumulated value of their account in a lump sum distribution payment.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual method of accounting.

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan to make estimates and assumptions that affect the reported amounts of net assets and changes therein. Actual results could differ from these estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (the exit price). See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

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 the terms of the plan document.

Excess Contributions Payable

Contributions received from participants for 2012 are net of payments of \$14,349 made in 2013 to certain participants to return to them excess deferral contributions as required to satisfy the relevant nondiscrimination provisions of the Plan. That amount is also included in the plan's statement of net assets available for benefits as excess contributions payable at December 31, 2012.

Administrative Expenses

Certain administrative costs of the Plan are paid directly by the Company.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

3. Subsequent Events

The Plan has evaluated events and transactions occurring subsequent to December 31, 2012 through the date the financial statements were issued, which is the same date the audit report is dated (see page 4). The following material amendment to the plan was noted.

In April 2013, the Company amended the Plan to adopt an auto enrollment provision effective June 1, 2013. Eligible employees that do not decline participation will be automatically enrolled in the plan at a deferral rate of 2% of total compensation with a scheduled increase of 1% each year until the deferral reaches 6%.

No additional material events requiring recognition or disclosure in the financial statements were noted.

4. Information Prepared and Certified by the Custodian

The following information included in the accompanying financial statements and supplemental material was obtained from data that has been prepared and certified to as complete and accurate by Fidelity Management Trust Company, Inc, the Plan's custodian.

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Investments, at fair value:		
Mutual Funds	\$818,159	\$623,963
Guaranteed investment contract	34,336	17,829
Notes receivable from participants	14,251	28,314
<i>Year ended December 31,</i>	<i>2012</i>	<i>2011</i>
Investment income:		
Net appreciation in fair value of investments	\$ 70,435	\$ 2,159
Interest and dividends	20,115	13,362
Interest income – participant notes receivable	998	–

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

5. Investments

The following presents investments that represent 5% or more of the Plan's net assets:

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Mutual Funds:		
Fidelity Advisor Strategic Income Fund	\$ 49,936	\$ 39,070
Fidelity Advisor Freedom 2020 Fund	69,792	53,718
Fidelity Advisor Freedom 2030 Fund	128,750	144,989
Fidelity Advisor Freedom 2040 Fund	64,975	36,967
Fidelity Advisor Freedom 2015 Fund	43,111	*
Fidelity Advisor Freedom 2050 Fund	129,038	129,210
Western Asset Core Plus Bond Portfolio	80,130	60,331

* Investment does not represent 5% of net assets for the year presented.

During 2012 and 2011 the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated by \$70,435 and \$2,159, respectively.

6. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Valet Waste LLC 401(k)

Profit Sharing Plan

Notes to Financial Statements

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

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

Mutual Funds – Valued at the net asset value (NAV) of shares held by the Plan at year end. The Plan's mutual funds are publicly traded and included in Level 1.

Guaranteed Investment Contract (GIC) – Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer. The GIC is included in Level 2.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value.

<i>Investment Assets at Fair Value</i>				
<i>As of December 31, 2012</i>				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$818,159	\$ –	\$ –	\$818,159
Guaranteed investment contract	–	34,336	–	34,336
Total investments at fair value	\$818,159	\$34,336	\$ –	\$852,495

<i>As of December 31, 2011</i>				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$623,963	\$ –	\$ –	\$623,963
Guaranteed investment contract	–	17,829	–	17,829
Total investments at fair value	\$623,963	\$17,829	\$ –	\$641,792

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

7. Guaranteed investment contract (GIC)

The Plan holds a fully benefit-responsive investment contract with Wells Fargo Bank (Wells Fargo) called the *Wells Fargo Stable Return Fund*. Because the GIC is fully benefit responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the GIC. The GIC is presented on the face of the statement of net assets available for benefits at fair value with an adjustment to contract value in arriving at net assets available for benefits.

Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. In most cases, participants may direct the withdrawal or transfer of all or a portion of their investment at contract value. The GIC issuer is contractually obligated to repay the principal and a specified minimum interest rate that is guaranteed to the plan.

The methodology for calculating the interest crediting rate is based on a number of factors including the earnings of the underlying assets compared to the minimum interest crediting rate as stated in the contract, mortality risks and prevailing market conditions. The interest crediting rate is reset quarterly.

	2012	2011
Average yields:		
Based on actual earnings	0.94%	1.56%
Based on interest rate credited to participants	1.95%	2.33%

8. Risks and Uncertainties

The Plan utilizes various investment instruments, which are exposed to various risks, such as interest rates, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

9. Related Party Transactions

Fidelity is the current recordkeeper and custodian of the Plan and qualifies as a party-in-interest. The Plan invests in mutual funds managed by Fidelity.

10. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

11. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated March 31, 2008 that the Prototype Plan is designed in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

12. Reconciliation of financial statements to Form 5500

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

<i>December 31,</i>	<i>2012</i>
Net assets available for benefits per financial statements	\$936,869
Add: 2012 corrective distributions payable	14,349
Net assets available for benefits per 5500	\$951,218

Valet Waste LLC 401(k)
Profit Sharing Plan
Notes to Financial Statements

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

<i>Year ended December 31,</i>	<i>2012</i>
Net increase in net assets per financial statements	\$265,298
Add: 2012 corrective distributions	14,349
Net increase in net assets per 5500	<u>\$279,647</u>

Valet Waste LLC 401(k) Profit Sharing Plan

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

EIN: 20-4186236

Plan Number: 001

December 31, 2012

(a)	(b)	(c)	(d)	(e)
<i>Identity of Issue</i>	<i>Description of Investment</i>	<i>Cost</i>	<i>Current Value</i>	
Mutual Funds:				
* Fidelity	Advisor Strategic Income Fund	a	\$ 49,936	
* Fidelity	Advisor Real Estate Fund	a	27,661	
* Fidelity	Advisor Freedom 2010 Fund	a	22,790	
* Fidelity	Advisor Freedom 2020 Fund	a	69,792	
* Fidelity	Advisor Freedom 2030 Fund	a	128,750	
* Fidelity	Advisor Freedom 2040 Fund	a	64,975	
* Fidelity	Advisor Freedom Income Fund	a	3,347	
* Fidelity	Advisor New Insights Fund	a	7,396	
* Fidelity	Advisor Freedom 2005 Fund	a	367	
* Fidelity	Advisor Freedom 2015 Fund	a	43,111	
* Fidelity	Advisor Freedom 2025 Fund	a	40,777	
* Fidelity	Advisor Freedom 2035 Fund	a	2,553	
* Fidelity	Advisor Mid Cap II Fund	a	9,799	
* Fidelity	Advisor International Discovery Fund	a	22,728	
* Fidelity	Advisor Freedom 2045 Fund	a	1,101	
* Fidelity	Advisor Freedom 2050 Fund	a	129,038	
* Fidelity	Advisor Freedom 2055 Fund	a	5,262	
T Rowe Price	Equity Index Fund	a	30,757	
Dreyfus	Emerging Markets Fund	a	2,213	
Columbia	Mid Cap Value Fund	a	679	
Prudential Jennison	Small Company Fund	a	4,695	
JP Morgan	Equity Index Fund	a	26,243	
Royce	Pennsylvania Mutual Fund	a	21,186	
Western Asset	Core Plus Bond Portfolio	a	80,130	
Legg Mason	ClearBridge Appreciation Fund	a	21,957	
Franklin	High Income Fund	a	916	
Guaranteed investment contract:				
Wells Fargo	Stable Return Fund	a	34,336	
Total investments, at fair value				\$852,495
			4.25-5.25%, secured by participant accounts	
* Notes receivable from participants				\$ 14,251

This supplemental material lists assets held at December 31, 2012 as required by the Department of Labor Rules and Regulations for Reporting and Disclosure.

a The cost of participant-directed investments is not required to be disclosed.

** Indicates a party-in-interest to the Plan.*

See accompanying Independent Auditors' Report

Valet Waste LLC 401(k) Profit Sharing Plan

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

EIN: 20-4186236

Plan Number: 001

December 31, 2011

(a)	(b)	(c)	(d)	(e)
<i>Identity of Issue</i>	<i>Description of Investment</i>		<i>Cost</i>	<i>Current Value</i>
Mutual Funds:				
* Fidelity	Advisor Strategic Income Fund		a	\$ 39,070
* Fidelity	Advisor Real Estate Fund		a	17,604
* Fidelity	Advisor Freedom 2010 Fund		a	19,843
* Fidelity	Advisor Freedom 2020 Fund		a	53,718
* Fidelity	Advisor Freedom 2030 Fund		a	144,989
* Fidelity	Advisor Freedom 2040 Fund		a	36,967
* Fidelity	Advisor New Insights Fund		a	667
* Fidelity	Advisor Freedom 2025 Fund		a	13,239
* Fidelity	Advisor Mid Cap II Fund		a	12,824
* Fidelity	Advisor International Discovery Fund		a	19,516
* Fidelity	Advisor Freedom 2050 Fund		a	129,210
T Rowe Price	Equity Index Fund		a	23,230
Dreyfus	Emerging Markets Fund		a	1,146
Columbia	Mid Cap Value Fund		a	453
Prudential Jennison	Small Company Fund		a	492
JP Morgan	Equity Index Fund		a	25,503
Royce	Pennsylvania Mutual Fund		a	10,668
Western Asset	Core Plus Bond Portfolio		a	60,331
Legg Mason	ClearBridge Appreciation Fund		a	14,493
Guaranteed investment contract:				
Wells Fargo	Stable Return Fund		a	17,829
Total investments, at fair value				\$ 641,792
			4.25%, secured by participant accounts	
* Notes receivable from participants				\$ 28,314

This supplemental material lists assets held at December 31, 2011 as required by the Department of Labor Rules and Regulations for Reporting and Disclosure.

a The cost of participant-directed investments is not required to be disclosed.

** Indicates a party-in-interest to the Plan.*

See accompanying Independent Auditors' Report

Valet Waste LLC 401(k) Profit Sharing Plan

Financial Statements

For the Years Ended December 31, 2012 and 2011

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FRSCPA
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditors' Report

Plan Participants and Administrator
Valet Waste LLC 401(k) Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements and schedules of Valet Waste LLC 401(k) Profit Sharing Plan (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 years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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.

Auditor's 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 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 4, which was certified by Fidelity Management Trust Company, 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.

Disclaimer of Opinion

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

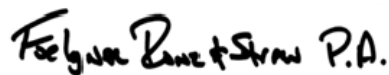
basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter – Supplemental Schedules

The supplemental schedule of Assets (Held at End of Year) as of December 31, 2012 and 2011 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on these supplemental schedules.

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

The form and content of the information included in the 2012 and 2011 financial statements and supplemental schedules, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.



Foelgner Ronz & Straw PA
Certified Public Accountants
September 19, 2013

**Valet Waste LLC 401(k)
Profit Sharing Plan
Statements of Net Assets Available for Benefits**

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Assets		
Investments , at fair value:		
Mutual funds	\$ 818,159	\$ 623,963
Guaranteed investment contract	34,336	17,829
Total investments	852,495	641,792
Receivables:		
Contributions receivable:		
Participant	–	1,917
Employer	85,440	–
Notes receivable from participants	14,251	28,314
Total receivables	99,691	30,231
Total assets	952,186	672,023
Liabilities		
Excess contributions payable	14,349	–
Net assets available for benefits , at fair value	937,837	672,023
Adjustment from fair value to contract value for fully- benefit responsive investment contract	(968)	(452)
Net assets available for benefits	\$ 936,869	\$ 671,571

See accompanying notes to financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan

Statements of Changes in Net Assets Available for Benefits

<i>Year ended December 31,</i>	2012	2011
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	\$ 70,435	\$ 2,159
Interest and dividends	20,115	13,362
Interest on participant loans	998	–
Total investment income	91,548	15,521
Contributions:		
Participant	167,244	1,917
Employer	85,440	–
Total contributions	252,684	1,917
Transfer of assets into the plan	–	654,133
Total additions	344,232	671,571
Deductions from net assets attributable to:		
Benefits paid to participants	78,534	–
Administrative fees	400	–
Total deductions	78,934	–
Net increase in net assets available for benefits	265,298	671,571
Net assets available for benefits, beginning of year	671,571	–
Net assets available for benefits, end of year	\$ 936,869	\$ 671,571

See accompanying notes to financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

1. Plan Description

The following description of the Valet Waste LLC 401(k) Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more comprehensive description of the Plan's provisions.

- a) *General* – The Plan is a 401(k) defined contribution plan covering substantially all full-time employees of Valet Waste, LLC (the Company) who have completed three months of service and are age twenty-one or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan was formed effective December 15, 2011.

- b) *Contributions* – Each year participants may contribute up to 75% of annual compensation to the Plan subject to certain limitation under the Internal Revenue Code ("IRC"). Participants who have attained age 50 before the end of the calendar year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified benefit plans.

The Plan allows for discretionary employer matching contributions. The Board of Directors of the Company determines the matching contribution to be made; however the Company is not obligated to make a contribution. A participant's eligibility for matching contributions is based on the following factors: (1) the employee must be employed on the last day of the year; (2) employee must have completed at least 1,000 hours of service during the plan year. For 2012, the Company offered a match of 100% of employees' contributions up to the first 3% deferred and 50% of the next 2% deferred. No matching contributions were made in 2011.

- c) *Participants Accounts* – Each participant's account is credited with the participant's contributions and allocation 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. Administrative expenses may be charged based on account balances or charged equally to each participant. The benefit to which a participant is entitled is the benefit that can be provided from the

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

participant's vested account.

Participants direct the investment of their contributions and the Company's contribution into various investment options offered by the Plan. Participants may change their investment options at any time online at the record keeper's website.

- d) *Vesting* – Participants are vested immediately in their contributions and the Company's matching contributions.
- e) *Notes Receivable from Participants* – Under the terms of the plan, participants may borrow up to fifty percent of their vested account balance, with a minimum of \$1,000 and up to a maximum of \$50,000. The loans are secured by the balance in the participant's account and bear interest at a rate determined by the Plan Administrator. Principal and interest are paid ratably through payroll deductions.
- f) *Payment of Benefits* – In the case of retirement, death, disability or termination of employment, participants may elect to receive the vested accumulated value of their account in a lump sum distribution payment.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual method of accounting.

Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan to make estimates and assumptions that affect the reported amounts of net assets and changes therein. Actual results could differ from these estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (the exit price). See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

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 the terms of the plan document.

Excess Contributions Payable

Contributions received from participants for 2012 are net of payments of \$14,349 made in 2013 to certain participants to return to them excess deferral contributions as required to satisfy the relevant nondiscrimination provisions of the Plan. That amount is also included in the plan's statement of net assets available for benefits as excess contributions payable at December 31, 2012.

Administrative Expenses

Certain administrative costs of the Plan are paid directly by the Company.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

3. Subsequent Events

The Plan has evaluated events and transactions occurring subsequent to December 31, 2012 through the date the financial statements were issued, which is the same date the audit report is dated (see page 4). The following material amendment to the plan was noted.

In April 2013, the Company amended the Plan to adopt an auto enrollment provision effective June 1, 2013. Eligible employees that do not decline participation will be automatically enrolled in the plan at a deferral rate of 2% of total compensation with a scheduled increase of 1% each year until the deferral reaches 6%.

No additional material events requiring recognition or disclosure in the financial statements were noted.

4. Information Prepared and Certified by the Custodian

The following information included in the accompanying financial statements and supplemental material was obtained from data that has been prepared and certified to as complete and accurate by Fidelity Management Trust Company, Inc, the Plan's custodian.

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Investments, at fair value:		
Mutual Funds	\$818,159	\$623,963
Guaranteed investment contract	34,336	17,829
Notes receivable from participants	14,251	28,314
<i>Year ended December 31,</i>	<i>2012</i>	<i>2011</i>
Investment income:		
Net appreciation in fair value of investments	\$ 70,435	\$ 2,159
Interest and dividends	20,115	13,362
Interest income – participant notes receivable	998	–

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

5. Investments

The following presents investments that represent 5% or more of the Plan's net assets:

<i>December 31,</i>	<i>2012</i>	<i>2011</i>
Mutual Funds:		
Fidelity Advisor Strategic Income Fund	\$ 49,936	\$ 39,070
Fidelity Advisor Freedom 2020 Fund	69,792	53,718
Fidelity Advisor Freedom 2030 Fund	128,750	144,989
Fidelity Advisor Freedom 2040 Fund	64,975	36,967
Fidelity Advisor Freedom 2015 Fund	43,111	*
Fidelity Advisor Freedom 2050 Fund	129,038	129,210
Western Asset Core Plus Bond Portfolio	80,130	60,331

* Investment does not represent 5% of net assets for the year presented.

During 2012 and 2011 the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated by \$70,435 and \$2,159, respectively.

6. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Valet Waste LLC 401(k)

Profit Sharing Plan

Notes to Financial Statements

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

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

Mutual Funds – Valued at the net asset value (NAV) of shares held by the Plan at year end. The Plan's mutual funds are publicly traded and included in Level 1.

Guaranteed Investment Contract (GIC) – Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer. The GIC is included in Level 2.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value.

<i>Investment Assets at Fair Value</i>				
<i>As of December 31, 2012</i>				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$818,159	\$ –	\$ –	\$818,159
Guaranteed investment contract	–	34,336	–	34,336
Total investments at fair value	\$818,159	\$34,336	\$ –	\$852,495

<i>As of December 31, 2011</i>				
	Level 1	Level 2	Level 3	Total
Mutual funds	\$623,963	\$ –	\$ –	\$623,963
Guaranteed investment contract	–	17,829	–	17,829
Total investments at fair value	\$623,963	\$17,829	\$ –	\$641,792

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

7. Guaranteed investment contract (GIC)

The Plan holds a fully benefit-responsive investment contract with Wells Fargo Bank (Wells Fargo) called the *Wells Fargo Stable Return Fund*. Because the GIC is fully benefit responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the GIC. The GIC is presented on the face of the statement of net assets available for benefits at fair value with an adjustment to contract value in arriving at net assets available for benefits.

Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. In most cases, participants may direct the withdrawal or transfer of all or a portion of their investment at contract value. The GIC issuer is contractually obligated to repay the principal and a specified minimum interest rate that is guaranteed to the plan.

The methodology for calculating the interest crediting rate is based on a number of factors including the earnings of the underlying assets compared to the minimum interest crediting rate as stated in the contract, mortality risks and prevailing market conditions. The interest crediting rate is reset quarterly.

	2012	2011
Average yields:		
Based on actual earnings	0.94%	1.56%
Based on interest rate credited to participants	1.95%	2.33%

8. Risks and Uncertainties

The Plan utilizes various investment instruments, which are exposed to various risks, such as interest rates, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the financial statements.

Valet Waste LLC 401(k) Profit Sharing Plan Notes to Financial Statements

9. Related Party Transactions

Fidelity is the current recordkeeper and custodian of the Plan and qualifies as a party-in-interest. The Plan invests in mutual funds managed by Fidelity.

10. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

11. Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated March 31, 2008 that the Prototype Plan is designed in accordance with applicable sections of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

12. Reconciliation of financial statements to Form 5500

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

<i>December 31,</i>	<i>2012</i>
Net assets available for benefits per financial statements	\$936,869
Add: 2012 corrective distributions payable	14,349
Net assets available for benefits per 5500	\$951,218

Valet Waste LLC 401(k)
Profit Sharing Plan
Notes to Financial Statements

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

<i>Year ended December 31,</i>	<i>2012</i>
Net increase in net assets per financial statements	\$265,298
Add: 2012 corrective distributions	14,349
Net increase in net assets per 5500	<u>\$279,647</u>

Valet Waste LLC 401(k) Profit Sharing Plan

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

EIN: 20-4186236

Plan Number: 001

December 31, 2012

(a)	(b)	(c)	(d)	(e)
<i>Identity of Issue</i>	<i>Description of Investment</i>	<i>Cost</i>	<i>Current Value</i>	
Mutual Funds:				
* Fidelity	Advisor Strategic Income Fund	a	\$ 49,936	
* Fidelity	Advisor Real Estate Fund	a	27,661	
* Fidelity	Advisor Freedom 2010 Fund	a	22,790	
* Fidelity	Advisor Freedom 2020 Fund	a	69,792	
* Fidelity	Advisor Freedom 2030 Fund	a	128,750	
* Fidelity	Advisor Freedom 2040 Fund	a	64,975	
* Fidelity	Advisor Freedom Income Fund	a	3,347	
* Fidelity	Advisor New Insights Fund	a	7,396	
* Fidelity	Advisor Freedom 2005 Fund	a	367	
* Fidelity	Advisor Freedom 2015 Fund	a	43,111	
* Fidelity	Advisor Freedom 2025 Fund	a	40,777	
* Fidelity	Advisor Freedom 2035 Fund	a	2,553	
* Fidelity	Advisor Mid Cap II Fund	a	9,799	
* Fidelity	Advisor International Discovery Fund	a	22,728	
* Fidelity	Advisor Freedom 2045 Fund	a	1,101	
* Fidelity	Advisor Freedom 2050 Fund	a	129,038	
* Fidelity	Advisor Freedom 2055 Fund	a	5,262	
T Rowe Price	Equity Index Fund	a	30,757	
Dreyfus	Emerging Markets Fund	a	2,213	
Columbia	Mid Cap Value Fund	a	679	
Prudential Jennison	Small Company Fund	a	4,695	
JP Morgan	Equity Index Fund	a	26,243	
Royce	Pennsylvania Mutual Fund	a	21,186	
Western Asset	Core Plus Bond Portfolio	a	80,130	
Legg Mason	ClearBridge Appreciation Fund	a	21,957	
Franklin	High Income Fund	a	916	
Guaranteed investment contract:				
Wells Fargo	Stable Return Fund	a	34,336	
Total investments, at fair value				\$852,495
			4.25-5.25%, secured by participant accounts	
* Notes receivable from participants				\$ 14,251

This supplemental material lists assets held at December 31, 2012 as required by the Department of Labor Rules and Regulations for Reporting and Disclosure.

a The cost of participant-directed investments is not required to be disclosed.

** Indicates a party-in-interest to the Plan.*

See accompanying Independent Auditors' Report

Valet Waste LLC 401(k) Profit Sharing Plan

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

EIN: 20-4186236

Plan Number: 001

December 31, 2011

(a)	(b)	(c)	(d)	(e)
<i>Identity of Issue</i>	<i>Description of Investment</i>	<i>Cost</i>	<i>Current Value</i>	
Mutual Funds:				
* Fidelity	Advisor Strategic Income Fund	a	\$ 39,070	
* Fidelity	Advisor Real Estate Fund	a	17,604	
* Fidelity	Advisor Freedom 2010 Fund	a	19,843	
* Fidelity	Advisor Freedom 2020 Fund	a	53,718	
* Fidelity	Advisor Freedom 2030 Fund	a	144,989	
* Fidelity	Advisor Freedom 2040 Fund	a	36,967	
* Fidelity	Advisor New Insights Fund	a	667	
* Fidelity	Advisor Freedom 2025 Fund	a	13,239	
* Fidelity	Advisor Mid Cap II Fund	a	12,824	
* Fidelity	Advisor International Discovery Fund	a	19,516	
* Fidelity	Advisor Freedom 2050 Fund	a	129,210	
T Rowe Price	Equity Index Fund	a	23,230	
Dreyfus	Emerging Markets Fund	a	1,146	
Columbia	Mid Cap Value Fund	a	453	
Prudential Jennison	Small Company Fund	a	492	
JP Morgan	Equity Index Fund	a	25,503	
Royce	Pennsylvania Mutual Fund	a	10,668	
Western Asset	Core Plus Bond Portfolio	a	60,331	
Legg Mason	ClearBridge Appreciation Fund	a	14,493	
Guaranteed investment contract:				
Wells Fargo	Stable Return Fund	a	17,829	
Total investments, at fair value			\$ 641,792	
			4.25%, secured by	
* Notes receivable from participants			participant accounts	\$ 28,314

This supplemental material lists assets held at December 31, 2011 as required by the Department of Labor Rules and Regulations for Reporting and Disclosure.

a The cost of participant-directed investments is not required to be disclosed.

** Indicates a party-in-interest to the Plan.*

See accompanying Independent Auditors' Report