Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
ROBERT DERECTOR ASSOCIATES 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1987

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

ROBERT DERECTOR PE PC

19 WEST 44TH STREET
10TH FLOOR
NEW YORK, NY 10036

2b Employer Identification Number (EIN)
13-3100690

2c Sponsor's telephone number
212-764-7272

2d Business code (see instructions)
541330

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.	10/14/2013	KIMBERLY S. HOLMBERG
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

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

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	155
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**	105
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	42
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	147
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	147
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	124
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	5
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 3D 2K 2T

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

A Name of plan
ROBERT DERECTOR ASSOCIATES 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROBERT DERECTOR PE PC

D Employer Identification Number (EIN)
13-3100690

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).. . . . . [X] Yes [ ] No

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

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

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13-5674085

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

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

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

ASCENSUS

11-3665754

(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?
37 99 15 60 50	RECORD KEEPER	1170	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ASCENSUS	15 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.
MERRILL LYNCH,PIERCE,FENNER & SMITH 13-5674085	SEE THE ATTACHED FORMULA DESCRIPTION REPORT LISTING THE FORMULAS FOR SUB-TA REVENUE BY FUND.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

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

A Name of plan
ROBERT DERECTOR ASSOCIATES 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROBERT DERECTOR PE PC

D Employer Identification Number (EIN)
13-3100690

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)	4204	73
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2470657	2074989
(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)	108659	72552
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	5074559	6255678
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(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	7658079	8403292
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 through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	7658079	8403292

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)	73524	
(B) Participants	2a(1)(B)	694321	
(C) Others (including rollovers)	2a(1)(C)	95109	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		862954
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	587	
(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)	6662	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		7249
(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)	78521	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		78521
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		627328
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1576052
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	829669	
(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)		829669
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)	1170	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1170
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		830839
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		745213
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: JAY C. SALOMAN & ASSOCIATES CPA'SPC **(2)** EIN: 27-2235587

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

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

A Name of plan
ROBERT DERECTOR ASSOCIATES 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROBERT DERECTOR PE PC

D Employer Identification Number (EIN)
13-3100690

Part I Distributions

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

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

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

EIN(s): 45-0404698

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

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

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

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

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

ROBERT DERECTOR ASSOCIATES
401K PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

ROBERT DERECTOR ASSOCIATES
401K PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

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JAY C. SALOMAN & ASSOCIATES

CERTIFIED PUBLIC ACCOUNTANTS, P.C.

TEN FIFTY FIVE STEWART AVENUE
SECOND FLOOR - SUITE 10
BETHPAGE, NEW YORK 11714
TELEPHONE : (917) 709-0085
FAX : (516) 809-7449

INDEPENDENT AUDITORS' REPORT

To the Administrator of the
Robert Derector Associates, 401k Plan
19 West 44TH Street
New York, NY 10036

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Robert Derector Associates 401K Plan, which comprise the statement of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012 and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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 of Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Frontier Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2012 and 2011 and for the year ended December 31, 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

INDEPENDENT AUDITORS' REPORT (continued)

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

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets held for investment purposes, which is the responsibility of plan management, are presented for the purpose of additional analysis and are not a required part of the financial statements but 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. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, 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.

Jay C. Saloman & Associates C.P.A.'s P.C.

JAY C. SALOMAN & ASSOCIATES,
Certified Public Accountants, P.C.

Bethpage, New York
October 10, 2013

R0BERT DERECTOR ASSOCIATES
401K PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31,

	2012	2011
ASSETS		
Investments at Fair Value:		
Mutual Funds	$ 6,255,678	$ 5,074,559
Common Collective Trusts	2,074,989	2,470,656
Total Investments	8,330,667	7,545,215
Receivables:		
Employer Contributions	73	4,204
Loans to Participants	71,686	107,935
Participant Loan Interest Receivable	866	724
Cash and Equivalents	0	1
Total Receivables and Cash and Equivalents	72,625	112,864
TOTAL ASSETS	$ 8,403,292	$ 7,658,079
LIABILITIES		
TOTAL LIABILITIES	$ -0-	$ -0-
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,403,292	$ 7,658,079

The accompanying notes are an integral part of the financial statements

ROBERT DERECTOR ASSOCIATES
401K PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2012

CHANGES

Changes to Net Assets Attributed to:

Investment income:	
Net Appreciation in Fair Value of Investments	$ 626,073
Dividends and Interest	80,363
Interest on Loans	7,386
	713,822
Contributions:	
Participants	694,321
Employer Match Contribution	73,524
Rollover Contributions	95,109
	862,954
TOTAL CHANGES	1,576,776

DEDUCTIONS

Deductions from Net Assets Attributed to:

Benefits Paid to Participants	830,389
Administration Expenses	1,174
TOTAL DEDUCTIONS	831,563
NET INCREASE	745,213

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of Year	7,658,079
End of Year	$ 8,403,292

The accompanying notes are an integral part of the financial statements

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2012

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Robert Derector Associates 401k Plan provides only general information. Robert Derector Associates (the Company) is the plan sponsor. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

A. General

The Plan is a Defined Contribution Plan covering all full time employees of Robert Derector P.E.P.C (the Company).

The Plan is a Section 401(k) Fund (Salary Deferral Fund). The Section 401(k) Fund was instituted January 1, 1987. The Plan is subject to the provisions of the Employees Retirement Income Security Act of 1974 (ERISA).

B. Contributions

Each year, participants may elect to contribute a percentage of salary to the Salary Deferral Plan. In 2012, the deferral amount allowable by the IRS Code was $17,000 ($22,500 for participants who have attained age 50 before the end of the year are eligible to make catch-up contributions). Participants may also contribute amounts representing distributions from other qualified plans.

The Company amended the Plan effective January 1, 2009 to allow a discretionary employer matching contribution to any full time employee who has attained the age of twenty one and has worked at least 1000 hours during the Plan year for the Company. This matching contribution is based solely on the Company's discretion. The plan discretionary match calls for the company to contribute .25 cents for each dollar that a participant contributes up to a maximum of $1,000 per year. The matching contributions for 2012 was $73,524 of which $73,451 was contributed prior to December 31, 2012 and the balance of $73. was accrued and contributed in January 2013.

Participants direct their elective contributions into various investment options offered by the Plan and can change their investment options on a daily basis The Company's discretionary matching contribution when and if made would be allocated in the same manner as that of the participant's elective contributions.

C. Participant Accounts

Each participant's account is credited with the participant's contribution and an allocation of Plan earnings. Earnings are allocated on each business day (or as soon thereafter feasible). Each account will be adjusted to reflect actual earnings and change in fair market value.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

D. Vesting of Accounts

Participants are immediately vested in their Salary Deferral Contribution Account, rollover contributions plus actual earnings thereon. Vesting in the Company's discretionary matching contribution is based on years of continuous service. A participant is 100% vested after six years of service. The plan is subject to top-heavy provisions.

E. Forfeitures

Upon termination of employment, participants would forfeit their non vested balances of any employer discretionary matching contribution to the Plan. Matching contributions of $3,682.26 were forfeited during 2012.

F. Participant Loans

Participants may borrow from their fund accounts a maximum equal to the lesser of $50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at the fixed rate of 7.25% since the restatement date of January 1, 2002, previous to this date the rate was calculated at prime plus 1%, which are commensurate with local prevailing rates as determined quarterly by the Plan Administrator. Principal and interest is paid ratably through bi-weekly payroll deductions. At December 31, 2012 the participant loan balances equaled $72,552. The current interest receivable on these loans equaled $866 which is reflected in the income from interest on loan amount of $7,386.

G. Payments of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, or an annuity. Normal retirement age is 65 under the Plan. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

H. Operating Expenses

Substantially all operating expenses of the Plan are paid for by the Company.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

B. Basis of Accounting

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

C. Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Quoted market prices are used to value investments. Money market balances and cash accounts are valued at cost, which equals current value. Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

D. Payment of Benefits

Benefits are recorded when paid.

E. Fair Value Measurements

For the year ended December 31, 2012 the Plan adopted the provisions of FASB ASC Topic 820, Fair Value Measurements and Disclosures (ASC 820) for its financial assets and liabilities carried at fair value on a recurring basis in its financial statements. ASC 820 defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). ASC 820 also establishes a fair value hierarchy that requires assets and liabilities measured at fair value to be categorized into one of three levels based on the inputs used in the valuation. The three levels are defined as follows:

Level 1 - Unadjusted quoted prices in active markets that are accessible to the reporting entity at the measurement date for identical assets and liabilities. These assets and liabilities include common stocks, mutual funds, common collective trusts, etc.

Level 2 - Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability.

Level 3 - Unobservable inputs for the asset or liability (supported by little or no market activity).

The Plan's investments consist of mutual funds, common collective trusts and participant loans which are considered level one investments. This plan has no level 2 or level 3 investments.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

	Assets at Fair Value as of	
	December 31, 2012	December 31, 2011
	Level 1	
Mutual Funds	$ 6,255,678	$ 5,074,559
Common Collective Trusts	2,074,989	2,470,656
Cash and Cash Equivalents	0	1
Employer Contribution	73	4,204
Loans to Participants	71,686	107,935
Participant Loan Interest	866	724
Assets at Fair Value	$ 8,403,292	$ 7,658,079

NOTE 3 - INVESTMENTS

The Plan's investments are generally held by various investment institutions. The following table represents the fair values of investments. Investments that represent 3% or more of the Plan's net assets are separately identified.

INVESTMENTS AT FAIR VALUE AS DETERMINED BY QUOTED MARKET PRICE	DECEMBER 31, 2012	2011
ML Retirement Preservation Trust, 2,052,277 and 2,423,036 shares, respectively	$ 2,052,277	$ 2,423,036
Davis NY Venture Fund A, 0 and 9,917 shares, respectively	0	322,314
Invesco International Growth A, 9,730 and 11,959 shares, respectively	280,603	302,567
BlackRock S&P 500 Index Fund CI I, 60,192 and 62,540 shares, respectively	1,048,544	960,607
BlackRock Global Allocation Fund CI A, 25,227 and 25,614 shares, respectively	497,974	465,142
Alger Capital Appreciation Fund Class A, 54,420 and 53,334 shares, respectively	909,906	765,337
GM Invesco Van Kampen Comstock Fund A, 0 and 15,821 shares, respectively	0	240,641
GM Invesco International Growth A 13,365 and 10,026 shares, respectively	385,437	253,666
Sentinel Common Stock Fund A, 10,935 and 0 shares, respectively	373,311	0
TCW Core Fixed Income Fund N, 31,538 and 0 shares respectively	354,169	0
JP Morgan Government Bond Fund A, 30,238 and 0 shares respectively	351,673	0
All Others	2,076,773	1,811,905
Total Investments	$ 8,330,667	$ 7,545,215

During 2012 the plan's investments (including investments bought, sold and held during the year) appreciated in value by $626,073.

NOTE 4 - 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.

NOTE 5 - TAX STATUS

The Internal Revenue Service has determined and informed the Company on December 30, 2001 by a letter that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (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.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by the trustee in accordance with 2520.103-5.

Investments, at fair value:	2012	2011
Mutual Funds	$ 6,255,678	$ 5,074,559
Collective Trusts	2,074,989	2,470,656
Interest Income – Loans	7,386	7,570
Dividend and Interest Income	80,363	64,529
Net Appreciation (Depreciation) in Fair Value of Investments	626,073	(123,656)

ROBERT DERECTOR ASSOCIATES

401K PLAN

SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

ROBERT DERECTOR ASSOCIATES
401K PLAN

SCEDHULE H, LINE 4I-SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

EIN# 13-3100690

INVESTMENT	DESCRIPTION OF INVESTMENT	COST	CURRENT VALUE
ML Retirement Preservation Trust	The Fund invests primarily in a broadly diversified portfolio of Guaranteed Investment Contracts as well as in obligations of U.S. government and U.S. government agency securities. The Trust also invests in high-quality money market securities.	$2,052,277	$2,052,277
Sentinel Common Stock Fund A	The Fund seeks a combination of growth of capital, current income, growth of income and relatively low risk as compared with the stock market as a whole.	378,061	373,311
TCW Core Fixed Income Fund N	**The Fund seeks to provide maximum current income and achieve above average total return consistent with prudent investment management over a full market cycle.**	347,902	354,169
JP Morgan Government Bond Fund A	The Fund seeks a high level of current income with liquidity and safety of principal.	332,422	351,673
Invesco International Growth A	The Fund seeks long term growth of capital by investing in a diversified portfolio of reasonably priced, quality international companies with strong fundamentals and/or accelerating earnings growth.	262,308	280,603
Alger Capital Appreciation Fund Class A	The Fund seeks long term capital appreciation by focusing on companies of all market capitalization sizes which demonstrate promising growth potential.	724,534	909,906
BlackRock S&P 500 Index Fund CI I	The Fund seeks to provide investment results that, before expenses, replicate the total return of the standard & Poor's 500 composite Stock Price Index.	874,389	1,048,544
BlackRock Global Allocation Fund CI A	The Fund seeks total return consistent with prudent risk. The Fund invests in domestic and foreign equities, debt, and money markets issued in at least three countries.	424,887	497,974
GM Invesco International Growth A	The fund invests in securities of companies located in at least four countries outside of the United States, emphasizing investment in companies in the developed countries of Western Europe and the Pacific Basin.	370,157	385,437
Other (Less then 3%)		2,012,311	2,076,846
Participant loans	Loans @ 7.25% interest rate including interest receivable amount of $866.00 in current value	71,686	72,552
Total Assets Held for Investment Purposes		$7,850,934	$8,403,292

Schedule C, Part I, line 2(h) Formula Description and Schedule C, Part I, line 3(e) Formula Description

Plan Name: ROBERT DERECTOR ASSOCIATES 401(K) PLAN

Plan Number: 255265

Broker Dealer: Merrill Lynch

Ticker Symbol	Investment Name	Formula used to determine Sub-TA Compensation paid to Ascensus
JDBAX	Janus Balanced Fund A	12 dollars per fund position
OEQAX	Oppenheimer Equity Fund A	12 dollars per fund position
PRTNX	PIMCO Real Return Fund A	12 dollars per fund position
OLGAX	JPMorgan Large Cap Growth Fund A	12 dollars per fund position
OGGAX	JPMorgan Government Bond Fund A	12 dollars per fund position
MDLOX	BlackRock Global Allocation Fund A	12 dollars per fund position
MDHQX	BlackRock Total Return A	12 dollars per fund position
MDCPX	BlackRock Balanced Capital A	12 dollars per fund position
QUASX	AllianceBernstein Small Cap Gr Port A	12 dollars per fund position
JTSAX	JPMorgan SmartRetirement 2050 Fund A	12 dollars per fund position
PEEAX	Prudential Jennison Mid Cap Gr Inc A	12 dollars per fund position
JAMCX	JPMorgan Mid Cap Value Fund A	12 dollars per fund position
BMGAX	BlackRock Mid Cap Growth Eqty Port A	12 dollars per fund position
AIIEX	Invesco International Growth Equity A	12 dollars per fund position
ACSTX	Invesco Comstock Fund A	12 dollars per fund position
ACDAX	Invesco Capital Development Fund A	12 dollars per fund position
ACAAX	Alger Capital Appreciation Fund A	12 dollars per fund position
NYVTX	Davis New York Venture Fund A	12 dollars per fund position
LBSAX	Columbia Dividend Income Fund A	12 dollars per fund position
GMLBSAX	GM Columbia Dividend Income Fund A	12 dollars per fund position
MLIKX	Retirement Reserves(7dayYield:0.0%)	6 dollars per fund position
GMMLIKX	GM Retirement Reserves Money Fd Class 1	6 dollars per fund position
SSGSX	Victory Small Company Opportunity Fund A	12 dollars per fund position

Schedule C, Part I, line 2(h) Formula Description and Schedule C, Part I, line 3(e) Formula Description

Plan Name: ROBERT DERECTOR ASSOCIATES 401(K) PLAN

Plan Number: 255265

Broker Dealer: Merrill Lynch

Ticker Symbol	Investment Name	Formula used to determine Sub-TA Compensation paid to Ascensus
GMTGFNX	GM TCW Core Fixed Income Fund N	12 dollars per fund position
GMSSGSX	GM Victory Small Company Opportunity A	12 dollars per fund position
GMQUASX	GM AllianceBernstein Small Cap Gr Port A	12 dollars per fund position
GMPEEAX	GM Prudential Jennison Mid Cap Gr Inc A	12 dollars per fund position
TGFNX	TCW Core Fixed Income Fund N	12 dollars per fund position
GMMDHQX	GM BlackRock Total Return A	12 dollars per fund position
MASRX	BlackRock S&P 500 Index Instl	N/A
GMJAMCX	GM JPMorgan Mid Cap Value Fund A	12 dollars per fund position
GMBMGAX	GM BlackRock Mid Cap Growth Eqty Port A	12 dollars per fund position
GMAIIEX	GM Invesco International Growth Equity A	12 dollars per fund position
GMACSTX	GM Invesco Comstock Fund A	12 dollars per fund position
GMACDAX	GM Invesco Capital Development Fund	12 dollars per fund position
GMACAAX	GM Alger Capital Appreciation Fund A	12 dollars per fund position
SENCX	Sentinel Common Stock Fund A	12 dollars per fund position
GMOGGAX	GM JPMorgan Government Bond Fund A	12 dollars per fund position

Schedule C, Part I, line 2(h) Formula Description and Schedule C, Part I, line 3(e)
Formula Description - Additional Fee Notes

Plan Name: ROBERT DERECTOR ASSOCIATES 401(K) PLAN

Plan Number: 255265

Broker Dealer: Merrill Lynch

Merrill Lynch

Effective January, 1, 2012, for the funds for which Ascensus receives a per-position dollar amount from Merrill Lynch, Ascensus will receive an additional payment from Merrill Lynch in the amount of 0.035% of average plan assets in the investment.

ROBERT DERECTOR ASSOCIATES
401K PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

ROBERT DERECTOR ASSOCIATES
401K PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

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JAY C. SALOMAN & ASSOCIATES

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BETHPAGE, NEW YORK 11714
TELEPHONE : (917) 709-0085
FAX : (516) 809-7449

INDEPENDENT AUDITORS' REPORT

To the Administrator of the
Robert Derector Associates, 401k Plan
19 West 44TH Street
New York, NY 10036

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Robert Derector Associates 401K Plan, which comprise the statement of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012 and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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 of Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by Frontier Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2012 and 2011 and for the year ended December 31, 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

INDEPENDENT AUDITORS' REPORT (continued)

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

We were engaged for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets held for investment purposes, which is the responsibility of plan management, are presented for the purpose of additional analysis and are not a required part of the financial statements but 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. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, 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.

Jay C. Saloman & Associates C.P.A.'s P.C.

JAY C. SALOMAN & ASSOCIATES,
Certified Public Accountants, P.C.

Bethpage, New York
October 10, 2013

R0BERT DERECTOR ASSOCIATES
401K PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31,

	2012	2011
ASSETS		
Investments at Fair Value:		
Mutual Funds	$ 6,255,678	$ 5,074,559
Common Collective Trusts	2,074,989	2,470,656
Total Investments	8,330,667	7,545,215
Receivables:		
Employer Contributions	73	4,204
Loans to Participants	71,686	107,935
Participant Loan Interest Receivable	866	724
Cash and Equivalents	0	1
Total Receivables and Cash and Equivalents	72,625	112,864
TOTAL ASSETS	$ 8,403,292	$ 7,658,079
LIABILITIES		
TOTAL LIABILITIES	$ -0-	$ -0-
NET ASSETS AVAILABLE FOR BENEFITS	$ 8,403,292	$ 7,658,079

The accompanying notes are an integral part of the financial statements

ROBERT DERECTOR ASSOCIATES
401K PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2012

CHANGES

Changes to Net Assets Attributed to:

Investment income:	
Net Appreciation in Fair Value of Investments	$ 626,073
Dividends and Interest	80,363
Interest on Loans	7,386
	713,822
Contributions:	
Participants	694,321
Employer Match Contribution	73,524
Rollover Contributions	95,109
	862,954
TOTAL CHANGES	1,576,776

DEDUCTIONS

Deductions from Net Assets Attributed to:

Benefits Paid to Participants	830,389
Administration Expenses	1,174
TOTAL DEDUCTIONS	831,563
NET INCREASE	745,213

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of Year	7,658,079
End of Year	$ 8,403,292

The accompanying notes are an integral part of the financial statements

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2012

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Robert Derector Associates 401k Plan provides only general information. Robert Derector Associates (the Company) is the plan sponsor. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

A. General

The Plan is a Defined Contribution Plan covering all full time employees of Robert Derector P.E.P.C (the Company).

The Plan is a Section 401(k) Fund (Salary Deferral Fund). The Section 401(k) Fund was instituted January 1, 1987. The Plan is subject to the provisions of the Employees Retirement Income Security Act of 1974 (ERISA).

B. Contributions

Each year, participants may elect to contribute a percentage of salary to the Salary Deferral Plan. In 2012, the deferral amount allowable by the IRS Code was $17,000 ($22,500 for participants who have attained age 50 before the end of the year are eligible to make catch-up contributions). Participants may also contribute amounts representing distributions from other qualified plans.

The Company amended the Plan effective January 1, 2009 to allow a discretionary employer matching contribution to any full time employee who has attained the age of twenty one and has worked at least 1000 hours during the Plan year for the Company. This matching contribution is based solely on the Company's discretion. The plan discretionary match calls for the company to contribute .25 cents for each dollar that a participant contributes up to a maximum of $1,000 per year. The matching contributions for 2012 was $73,524 of which $73,451 was contributed prior to December 31, 2012 and the balance of $73. was accrued and contributed in January 2013.

Participants direct their elective contributions into various investment options offered by the Plan and can change their investment options on a daily basis The Company's discretionary matching contribution when and if made would be allocated in the same manner as that of the participant's elective contributions.

C. Participant Accounts

Each participant's account is credited with the participant's contribution and an allocation of Plan earnings. Earnings are allocated on each business day (or as soon thereafter feasible). Each account will be adjusted to reflect actual earnings and change in fair market value.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

D. Vesting of Accounts

Participants are immediately vested in their Salary Deferral Contribution Account, rollover contributions plus actual earnings thereon. Vesting in the Company's discretionary matching contribution is based on years of continuous service. A participant is 100% vested after six years of service. The plan is subject to top-heavy provisions.

E. Forfeitures

Upon termination of employment, participants would forfeit their non vested balances of any employer discretionary matching contribution to the Plan. Matching contributions of $3,682.26 were forfeited during 2012.

F. Participant Loans

Participants may borrow from their fund accounts a maximum equal to the lesser of $50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at the fixed rate of 7.25% since the restatement date of January 1, 2002, previous to this date the rate was calculated at prime plus 1%, which are commensurate with local prevailing rates as determined quarterly by the Plan Administrator. Principal and interest is paid ratably through bi-weekly payroll deductions. At December 31, 2012 the participant loan balances equaled $72,552. The current interest receivable on these loans equaled $866 which is reflected in the income from interest on loan amount of $7,386.

G. Payments of Benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, or an annuity. Normal retirement age is 65 under the Plan. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

H. Operating Expenses

Substantially all operating expenses of the Plan are paid for by the Company.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

B. Basis of Accounting

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

C. Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Quoted market prices are used to value investments. Money market balances and cash accounts are valued at cost, which equals current value. Purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

D. Payment of Benefits

Benefits are recorded when paid.

E. Fair Value Measurements

For the year ended December 31, 2012 the Plan adopted the provisions of FASB ASC Topic 820, Fair Value Measurements and Disclosures (ASC 820) for its financial assets and liabilities carried at fair value on a recurring basis in its financial statements. ASC 820 defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). ASC 820 also establishes a fair value hierarchy that requires assets and liabilities measured at fair value to be categorized into one of three levels based on the inputs used in the valuation. The three levels are defined as follows:

Level 1 - Unadjusted quoted prices in active markets that are accessible to the reporting entity at the measurement date for identical assets and liabilities. These assets and liabilities include common stocks, mutual funds, common collective trusts, etc.

Level 2 - Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability.

Level 3 - Unobservable inputs for the asset or liability (supported by little or no market activity).

The Plan's investments consist of mutual funds, common collective trusts and participant loans which are considered level one investments. This plan has no level 2 or level 3 investments.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

	Assets at Fair Value as of	
	December 31, 2012	December 31, 2011
	Level 1	
Mutual Funds	$ 6,255,678	$ 5,074,559
Common Collective Trusts	2,074,989	2,470,656
Cash and Cash Equivalents	0	1
Employer Contribution	73	4,204
Loans to Participants	71,686	107,935
Participant Loan Interest	866	724
Assets at Fair Value	$ 8,403,292	$ 7,658,079

NOTE 3 - INVESTMENTS

The Plan's investments are generally held by various investment institutions. The following table represents the fair values of investments. Investments that represent 3% or more of the Plan's net assets are separately identified.

INVESTMENTS AT FAIR VALUE AS DETERMINED BY QUOTED MARKET PRICE	DECEMBER 31, 2012	2011
ML Retirement Preservation Trust, 2,052,277 and 2,423,036 shares, respectively	$ 2,052,277	$ 2,423,036
Davis NY Venture Fund A, 0 and 9,917 shares, respectively	0	322,314
Invesco International Growth A, 9,730 and 11,959 shares, respectively	280,603	302,567
BlackRock S&P 500 Index Fund CI I, 60,192 and 62,540 shares, respectively	1,048,544	960,607
BlackRock Global Allocation Fund CI A, 25,227 and 25,614 shares, respectively	497,974	465,142
Alger Capital Appreciation Fund Class A, 54,420 and 53,334 shares, respectively	909,906	765,337
GM Invesco Van Kampen Comstock Fund A, 0 and 15,821 shares, respectively	0	240,641
GM Invesco International Growth A 13,365 and 10,026 shares, respectively	385,437	253,666
Sentinel Common Stock Fund A, 10,935 and 0 shares, respectively	373,311	0
TCW Core Fixed Income Fund N, 31,538 and 0 shares respectively	354,169	0
JP Morgan Government Bond Fund A, 30,238 and 0 shares respectively	351,673	0
All Others	2,076,773	1,811,905
Total Investments	$ 8,330,667	$ 7,545,215

During 2012 the plan's investments (including investments bought, sold and held during the year) appreciated in value by $626,073.

NOTE 4 - 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.

NOTE 5 - TAX STATUS

The Internal Revenue Service has determined and informed the Company on December 30, 2001 by a letter that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (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.

NOTE 6 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified to as complete and accurate by the trustee in accordance with 2520.103-5.

Investments, at fair value:	2012	2011
Mutual Funds	$ 6,255,678	$ 5,074,559
Collective Trusts	2,074,989	2,470,656
Interest Income – Loans	7,386	7,570
Dividend and Interest Income	80,363	64,529
Net Appreciation (Depreciation) in Fair Value of Investments	626,073	(123,656)

ROBERT DERECTOR ASSOCIATES

401K PLAN

SUPPLEMENTAL SCHEDULE
DECEMBER 31, 2012

ROBERT DERECTOR ASSOCIATES
401K PLAN

SCEDHULE H, LINE 4I-SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

EIN# 13-3100690

INVESTMENT	DESCRIPTION OF INVESTMENT	COST	CURRENT VALUE
ML Retirement Preservation Trust	The Fund invests primarily in a broadly diversified portfolio of Guaranteed Investment Contracts as well as in obligations of U.S. government and U.S. government agency securities. The Trust also invests in high-quality money market securities.	$2,052,277	$2,052,277
Sentinel Common Stock Fund A	The Fund seeks a combination of growth of capital, current income, growth of income and relatively low risk as compared with the stock market as a whole.	378,061	373,311
TCW Core Fixed Income Fund N	**The Fund seeks to provide maximum current income and achieve above average total return consistent with prudent investment management over a full market cycle.**	347,902	354,169
JP Morgan Government Bond Fund A	The Fund seeks a high level of current income with liquidity and safety of principal.	332,422	351,673
Invesco International Growth A	The Fund seeks long term growth of capital by investing in a diversified portfolio of reasonably priced, quality international companies with strong fundamentals and/or accelerating earnings growth.	262,308	280,603
Alger Capital Appreciation Fund Class A	The Fund seeks long term capital appreciation by focusing on companies of all market capitalization sizes which demonstrate promising growth potential.	724,534	909,906
BlackRock S&P 500 Index Fund CI I	The Fund seeks to provide investment results that, before expenses, replicate the total return of the standard & Poor's 500 composite Stock Price Index.	874,389	1,048,544
BlackRock Global Allocation Fund CI A	The Fund seeks total return consistent with prudent risk. The Fund invests in domestic and foreign equities, debt, and money markets issued in at least three countries.	424,887	497,974
GM Invesco International Growth A	The fund invests in securities of companies located in at least four countries outside of the United States, emphasizing investment in companies in the developed countries of Western Europe and the Pacific Basin.	370,157	385,437
Other (Less then 3%)		2,012,311	2,076,846
Participant loans	Loans @ 7.25% interest rate including interest receivable amount of $866.00 in current value	71,686	72,552
Total Assets Held for Investment Purposes		$7,850,934	$8,403,292

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name ROBERT DERECTOR ASSOCIATES 401(K) PLAN **EIN:** 13-3100690
Plan Sponsor's Name Robert Derector PE PC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Invesco	Invesco International Growth Equity A	0	280,603
	Alger	Alger Capital Appreciation Fund A	0	909,906
	BlackRock	BlackRock Total Return A	0	859
	BlackRock	BlackRock S&P 500 Index Instl	0	1,048,544
	JPMorgan	JPMorgan Mid Cap Value Fund A	0	89,222
	BlackRock	GM BlackRock Total Return A	0	452
	BlackRock	BlackRock Global Allocation Fund A	0	497,974

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name ROBERT DERECTOR ASSOCIATES 401(K) PLAN **EIN:** 13-3100690
Plan Sponsor's Name Robert Derector PE PC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	JPMorgan	JPMorgan Government Bond Fund A	0	351,673
	Victory	Victory Small Company Opportunity Fund A	0	91,832
	JPMorgan	GM JPMorgan Government Bond Fund A	0	185,533
	Alger	GM Alger Capital Appreciation Fund A	0	180,534
	JPMorgan	GM JPMorgan Mid Cap Value Fund A	0	142,119
	Victory	GM Victory Small Company Opportunity A	0	90,074
	Invesco	GM Invesco International Growth Equity A	0	385,437

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name ROBERT DERECTOR ASSOCIATES 401(K) PLAN **EIN:** 13-3100690
Plan Sponsor's Name Robert Derector PE PC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Merrill Lynch	Retirement Reserves(7dayYield:0.0%)	0	2,052,277
	Merrill Lynch	GM Retirement Reserves Money Fd Class 1	0	22,712
	TCW	TCW Core Fixed Income Fund N	0	354,169
	Janus	Janus Balanced Fund A	0	134,317
	Columbia	Columbia Dividend Income Fund A	0	37,172
	Sentinel	Sentinel Common Stock Fund A	0	373,311
	JPMorgan	JPMorgan Large Cap Growth Fund A	0	193,570

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name ROBERT DERECTOR ASSOCIATES 401(K) PLAN **EIN:** 13-3100690
Plan Sponsor's Name Robert Derector PE PC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Prudential	Prudential Jennison Mid Cap Gr Inc A	0	55,356
	Alliance	AllianceBernstein Small Cap Gr Port A	0	219,087
	PIMCO	PIMCO Real Return Fund A	0	18,006
	JPMorgan	JPMorgan SmartRetirement 2050 Fund A	0	1,927
	TCW	GM TCW Core Fixed Income Fund N	0	234,132
	Columbia	GM Columbia Dividend Income Fund A	0	248,476
	Prudential	GM Prudential Jennison Mid Cap Gr Inc A	0	81,357

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name ROBERT DERECTOR ASSOCIATES 401(K) PLAN **EIN:** 13-3100690
Plan Sponsor's Name Robert Derector PE PC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Alliance	GM AllianceBernstein Small Cap Gr Port A	0	50,036
	Participants Loan Account	Various Rated and Maturities	0	72,552