# 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
HUNT COMPANIES BUSINESS SERVICES, LLC

**1b** Three-digit plan number (PN) ▶ 001

**1c** Effective date of plan 01/01/1985

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

HUNT COMPANIES BUSINESS SERVICES, LLC

4401 N. MESA STREET, SUITE 201
EL PASO, TX 79902

4401 N. MESA STREET, SUITE 201
EL PASO, TX 79902

**2b** Employer Identification Number (EIN)
20-5911113

**2c** Sponsor's telephone number
915-533-1122

**2d** Business code (see instructions)
236110

**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. | 10/15/2013 | PATRICIA GARCIA |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/15/2013 | PATRICIA GARCIA |
| | **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 ☐ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address

HUNT COMPANIES BUSINESS SERVICES, LLC

4401 N. MESA STREET, SUITE 201
EL PASO, TX 79902

**3b** Administrator's EIN: 20-5911113

**3c** Administrator's telephone number: 915-533-1122

**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** | 850 |
| **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** | 926 |
| **b** | Retired or separated participants receiving benefits | **6b** | 1 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 139 |
| **d** | Subtotal. Add lines **6a**, **6b**, and **6c** | **6d** | 1066 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits | **6e** | 2 |
| **f** | Total. Add lines **6d** and **6e** | **6f** | 1068 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 958 |
| **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:
2F 2G 2J 2K 2R 2S 2T 3D 3H

**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)** | ☒ | Trust |
| **(4)** | ☐ | General assets of the sponsor |

**9b** Plan benefit arrangement (check all that apply)

| | | |
|---|---|---|
| **(1)** | ☐ | Insurance |
| **(2)** | ☐ | Code section 412(e)(3) insurance contracts |
| **(3)** | ☒ | Trust |
| **(4)** | ☐ | General assets of the sponsor |

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

**C** Plan sponsor's name as shown on line 2a of Form 5500
HUNT COMPANIES BUSINESS SERVICES, LLC

**D** Employer Identification Number (EIN)
20-5911113

## 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

FID.INV.INST.OPS.CO.

04-2647786

**(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)

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 71 60 | RECORDKEEPER | 10458 | Yes [X] No [ ] | Yes [X] No [ ] | 0 | Yes [X] No [ ] |

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

STRATEGIC ADVISORS, INC.

04-2654524

| (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? |
|---|---|---|---|---|---|---|
| 27 | ADVISOR | 10314 | Yes [ ] No [X] | 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 |
|---|---|---|
| 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. |
|---|---|---|
| ALZGI NFJ INTL VAL A - BOSTON FINAN | 330 W. 9TH STREET<br>KANSAS CITY, MO 66160 | 0.50% |

| **(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. |
|---|---|---|
| ARTISAN MID CAP VAL - BOSTON FINANC | 330 W. 9TH STREET<br>KANSAS CITY, MO 66160 | 0.40% |

| **(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. |
|---|---|---|
| COHEN & STEERS RLTY - BOSTON FINANC | P.O. BOX 8480<br>BOSTON, MA 02266 | 0.40% |

## 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. |
|---|---|
| EAGLE SM CAP GRTH I - JPMORGAN INVE 73 TREMONT STREET BOSTON, MA 02108 | 0.15% |

| **(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. |
|---|---|
| GS SMALL CAP VALUE A - GOLDMAN, SAC<br>13-5108880 | 0.35% |

| **(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. |
|---|---|
| MFS VALUE FUND A - MFS SERVICE CENT<br>04-2865649 | 0.45% |

## 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. |
|---|---|
| PIMCO TOT RETURN ADM - BOSTON FINAN P.O. BOX 8480 BOSTON, MA 02266 | 0.27% |

| **(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. |
|---|---|
| TRP MID CAP GROWTH - T. ROWE PRICE<br><br>52-2269240 | 0.15% |

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

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

## Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

## DFE/Participating Plan Information

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

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

OMB No. 1210-0110

**2012**

**This Form is Open to Public Inspection.**

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

**A** Name of plan
HUNT COMPANIES BUSINESS SERVICES, LLC

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

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
HUNT COMPANIES BUSINESS SERVICES, LLC

**D** Employer Identification Number (EIN)
20-5911113

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

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MIP CL 1

**b** Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

| **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) |
|---|---|---|
| 04-3022712-024 | C | 3971532 |

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

**b** Name of sponsor of entity listed in (a):

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

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

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

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Financial Information

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

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

OMB No. 1210-0110

**2012**

**This Form is Open to Public Inspection**

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

**A** Name of plan
HUNT COMPANIES BUSINESS SERVICES, LLC

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

**C** Plan sponsor's name as shown on line 2a of Form 5500
HUNT COMPANIES BUSINESS SERVICES, LLC

**D** Employer Identification Number (EIN)
20-5911113

## 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) | | |
| **(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) | 166900 | 188481 |
| **(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) | 221762 | 26129 |
| **(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) | 568478 | 541239 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 3341342 | 3971532 |
| **(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) | 20732682 | 26876556 |
| **(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 | 25031164 | 31603937 |
| **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 | 25031164 | 31603937 |

## 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) | 1092189 | |
| **(B)** Participants | 2a(1)(B) | 3388605 | |
| **(C)** Others (including rollovers) | 2a(1)(C) | 267539 | |
| **(2)** Noncash contributions | 2a(2) | | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 4748333 |
| **b Earnings on investments:** | | | |
| **(1)** Interest: | | | |
| **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 18 | |
| **(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) | 25070 | |
| **(F)** Other | 2b(1)(F) | | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 25088 |
| **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| **(B)** Common stock | 2b(2)(B) | 2904 | |
| **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | 780551 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 783455 |
| **(3)** Rents | 2b(3) | | |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 820771 | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 784978 | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 35793 |
| **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | | |
| **(B)** Other | 2b(5)(B) | 5288 | |
| **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | 5288 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | 73934 |
| (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) | | 2441668 |
| c Other income | 2c | | |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 8113559 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 1521063 | |
| (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) | | 1521063 |
| f Corrective distributions (see instructions) | 2f | | |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 13 |
| 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) | 10314 | |
| (4) Other | 2i(4) | 9396 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 19710 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 1540786 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 6572773 |
| 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: GIBSON, RUDDOCK, PATTERSON LLC **(2)** EIN: 26-1159690

**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 | | 10000000 |
| f | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 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 | | 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.**

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

**A** Name of plan
HUNT COMPANIES BUSINESS SERVICES, LLC

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

**C** Plan sponsor's name as shown on line 2a of Form 5500
HUNT COMPANIES BUSINESS SERVICES, LLC

**D** Employer Identification Number (EIN)
20-5911113

## 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): 04-6568107

**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):

# Hunt Companies Business Services, LLC
# 401(k) Plan
## 20-5911113
## PLAN 001

## Financial Statements
## and Supplemental Schedule
## Years Ended December 31, 2012 and 2011

**Hunt Companies Business Services, LLC**
**401(k) Plan**

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600 SUNLAND PARK, 6-300
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GIBSON RUDDOCK PATTERSON LLC
certified public accountants

**Independent Auditor's Report**

Plan Administrator
Hunt Companies Business Services, LLC 401(k) Plan

**Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of Hunt Companies Business Services, LLC 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements 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**

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

**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'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 3, which was certified by Fidelity Management Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2012 and 2011, that the information provided to the plan administrator by the trustee 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**

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the 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 Rule and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Gibson Ruddock Patterson LLC

El Paso, Texas
October 9, 2013

## Hunt Companies Business Services, LLC
## 401(k) Plan

### Statements of Net Assets Available For Benefits

| December 31, | 2012 | 2011 |
|---|---|---|
| **Assets:** | | |
| Participant-directed investments, at fair value | $ 31,062,698 | $ 24,462,686 |
| Receivables | | |
| Employer contributions | 1,489,586 | 1,092,189 |
| Participant contributions | 93,128 | - |
| Notes receivable from participants | 541,239 | 568,478 |
| Total receivables | 2,123,953 | 1,660,667 |
| Total assets | 33,186,651 | 26,123,353 |
| Net assets reflecting investments at fair value | 33,186,651 | 26,123,353 |
| Adjustment from fair value to contract value for fully benefit-responsive investment contracts | (113,655) | (82,410) |
| **Net assets available for benefits** | $ 33,072,996 | $ 26,040,943 |

See accompanying notes to the financial statements.

## Hunt Companies Business Services, LLC
## 401(k) Plan

### Statements of Changes in Net Assets Available For Benefits

| December 31, | 2012 | 2011 |
|---|---|---|
| **Additions:** | | |
| Employer contributions | $ 1,489,586 | $ 1,092,189 |
| Participant contributions | 3,481,733 | 2,867,899 |
| Rollovers | 267,539 | 93,680 |
| Investment income: | | |
| Net appreciation (depreciation) in fair value of investments | 2,534,268 | (660,571) |
| Interest and dividends | 774,644 | 493,407 |
| Interest income on notes receivable from participants | 25,070 | 27,117 |
| Total additions | 8,572,840 | 3,913,721 |
| **Deductions:** | | |
| Benefits paid to participants | 1,521,077 | 939,068 |
| Administrative expenses | 19,710 | 14,172 |
| Total deductions | 1,540,787 | 953,240 |
| **Net increase** | 7,032,053 | 2,960,481 |
| **Net assets available for benefits:** | | |
| **Beginning of year** | 26,040,943 | 23,080,462 |
| **End of year** | $ 33,072,996 | $ 26,040,943 |

See accompanying notes to the financial statements.

## 1. DESCRIPTION OF THE PLAN

The following description of the Hunt Companies Business Services, LLC 401(k) Plan (the "Plan") provides only general information. Interested parties should refer to the Plan document for a more complete description of the Plan's provisions.

General - The Plan was originally adopted January 1, 1985. The Plan is a defined contribution plan covering all employees of Hunt Companies Business Services, LLC (the "Company") and affiliated companies who are age twenty-one or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective July 1, 2011, the plan name was changed from Hunt Administrative Services, LLC 401(k) Plan to Hunt Companies Business Services, LLC 401(k) Plan.

Contributions - Each year, participants may contribute to the Plan on a pretax basis between 1% and 60% of their eligible compensation, subject to an annual limitation of $17,000 and $16,500 for the years ended December 31, 2012 and 2011, respectively. For 2012 and 2011, participants age 50 or older may contribute an additional $5,500 and $5,500 to the Plan, respectively, which is called a catch-up contribution.

Effective January 8, 2007, the Plan was amended to allow participants to designate a portion or all of their deferral contributions as Roth Deferral Contributions.

Effective January 1, 2008, the plan was amended to satisfy the safe harbor provisions provided under the Internal Revenue Code. The amendment provides that the contributions made by the Company for each non-highly compensated employee be 100% for the first 4% of compensation deferred and for each highly compensated employee be 50% of the first 4% of compensation deferred. The amendment also removed the FICA wage limit on the match calculation.

Participant Accounts - Each participant's account is credited with the participant's contribution and the employer's matching contribution as well as an allocation of the Plan's earnings and administrative expenses, if applicable. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from that participant's vested account.

Vesting - Participants are immediately 100 percent vested in both their voluntary contributions and the matching employer contributions plus actual earnings thereon.

## 1. DESCRIPTION OF THE PLAN (Continued)

Notes Receivable From Participants - Subject to limitations, a participant may borrow from the vested portion of his or her elective account. The minimum amount of any loan is $1,000 and the maximum amount is the lesser of one-half of their vested account balance or $50,000. Up to 50% of a participant's vested account balance may be used as collateral for any loan. Outstanding participant loans have interest rates of 5%. Principal and interest are paid through payroll deductions.

Payment of Benefits - On retirement, death, disability, or termination of service, a participant (or participant's beneficiary in the event of death) shall have a nonforfeitable right to receive the full amount available for distribution from their account. Distributions are paid in lump-sum amounts or installment payments.

## 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The statement of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

Use of Estimates in the Preparation of Financial Statements - The preparation of the Plan's financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for plan benefits at the date of the financial statements and the changes in net assets available for plan benefits during the reporting period and, when applicable, disclosures of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Investment Valuation - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

## 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Net Appreciation (Depreciation) in Fair Value of Investments - Net appreciation (depreciation) consists of the unrealized appreciation (depreciation) of the investments and the excess (deficiency) of net proceeds over market value of the related investment at the beginning of the year.

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.

Payment of Benefits - Benefits are recorded when paid.

Administrative Expenses - Certain expenses incurred in the administration of the Plan are paid directly by the Company.

Risks and Uncertainties - The Plan provides for various investment options in any combination of investment securities based upon participant requests. Investment securities are exposed to various risks, such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for plan benefits.

Subsequent Events - Subsequent events were evaluated through October 9, 2013, which is the date the financial statements were available to be issued.

## 3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE (UNAUDITED)

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

| | December 31, 2012 | December 31, 2011 |
|---|---|---|
| Fidelity Managed Income Portfolio, at contract value | $ 3,857,877 | $ 3,258,932 |
| PIMCO Total Return Fund | 3,271,852 | 2,292,851 |
| Fidelity Low-Priced Stock Fund | 562,167 | 393,825 |
| Spartan 500 Index Adv | 1,283,293 | - |
| Artisan Mid Cap Val | 616,357 | 715,320 |
| Fidelity BrokerageLink | 672,220 | 512,497 |
| Fidelity Balanced | 9,713,792 | 7,219,136 |
| Spartan 500 Index Inv | - | 764,822 |
| TRP Mid Cap Growth | 1,119,642 | 1,085,132 |
| MFS Value Fund A | 1,647,838 | 1,455,073 |
| Fidelity Contrafund | 2,445,358 | 2,027,007 |
| Cohen & Steers Realty | 886,815 | 671,561 |
| Allianz NFJ International Value A | 3,467,470 | 2,777,075 |
| GS Small Cap Value A | 428,947 | 339,446 |
| Eagle Small Cap Growth I | 975,415 | 867,599 |
| Total investments | $ 30,949,043 | $ 24,380,276 |
| Notes receivable from participants | $ 541,239 | $ 568,478 |
| Investment Income: | | |
| Net appreciation (depreciation) in fair value of investments | $ 2,534,268 | $ (660,571) |
| Interest and dividends | 774,644 | 493,407 |
| Total investment gain (loss) | $ 3,308,912 | $ (167,164) |
| Interest income on notes receivable from participants | $ 25,070 | $ 27,117 |

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and schedule.

## 4. FAIR VALUE MEASUREMENTS

FASB ASC 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure the fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs 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.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2012 and 2011.

*Mutual funds:* The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

*Self-directed brokerage account:* The self-directed brokerage account (Fidelity BrokerageLink) is valued at the closing price reported on the active market on which the individual securities are traded.

*Common/collective trust*: The common/collective trust (Fidelity Managed Income Portfolio) is valued based on the contractual terms of the underlying GICs.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the plan believes it 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.

## 4. FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2012 and 2011:

| | | Fair Value Measurements Using: | |
|---|---|---|---|
| | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| December 31, 2012 | | | |
| Mutual funds: | | | |
| Fixed income | $ 3,271,852 | $ 3,271,852 | $ - |
| Small cap stock | 1,404,363 | 1,404,363 | - |
| International | 3,467,470 | 3,467,470 | - |
| Mid/Large cap stock | 18,275,261 | 18,275,261 | - |
| Total mutual funds | 26,418,946 | 26,418,946 | - |
| Self-directed brokerage account: | | | |
| External fund | 30,689 | 30,689 | - |
| Common stocks | 26,129 | 26,129 | - |
| Units | 369,541 | 369,541 | - |
| Mutual funds | 57,380 | 57,380 | - |
| Other | 188,481 | 188,481 | - |
| Total self-directed | 672,220 | 672,220 | - |
| Common/collective trust: | | | |
| Fixed income | 3,971,532 | - | 3,971,532 |
| Total assets at fair value | $ 31,062,698 | $ 27,091,166 | $ 3,971,532 |

## 4. FAIR VALUE MEASUREMENTS (Continued)

| | | Fair Value Measurements Using: | |
|---|---|---|---|
| | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| December 31, 2011 | | | |
| Mutual funds: | | | |
| Fixed income | $ 2,292,851 | $ 2,292,851 | $ - |
| Small cap stock | 1,207,045 | 1,207,045 | - |
| International | 2,777,075 | 2,777,075 | - |
| Mid/Large cap stock | 14,331,876 | 14,331,876 | - |
| Total mutual funds | 20,608,847 | 20,608,847 | - |
| Self-directed brokerage account: | | | |
| Common stocks | 221,762 | 221,762 | - |
| Units | 8,051 | 8,051 | - |
| Mutual funds | 115,784 | 115,784 | - |
| Other | 166,900 | 166,900 | - |
| Total self-directed | 512,497 | 512,497 | - |
| Common/collective trust: | | | |
| Fixed income | 3,341,342 | - | 3,341,342 |
| Total assets at fair value | $ 24,462,686 | $ 21,121,344 | $ 3,341,342 |

## 5. INVESTMENTS

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

| | December 31, 2012 | December 31, 2011 |
|---|---|---|
| Fidelity Managed Income Portfolio, at contract value | $ 3,857,877 | $ 3,258,932 |
| PIMCO Total Return Fund | 3,271,852 | 2,292,851 |
| Fidelity Balanced | 9,713,792 | 7,219,136 |
| MFS Value Fund A | * | 1,455,073 |
| Fidelity Contrafund | 2,445,358 | 2,027,007 |
| Allianz NFJ International Value A | 3,467,470 | 2,777,075 |

* Did not meet the 5% criteria at respective financial statement date.

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 (depreciated) in value by $2,534,268 and $(660,571), respectively, as follows:

| | | |
|---|---|---|
| Mutual funds | $ 2,438,326 | $ (642,502) |
| Self-directed brokerage account | 95,942 | (18,069) |
| | $ 2,534,268 | $ (660,571) |

## 6. FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Plan's Managed Income Portfolio is a stable value investment contract that carries a benefit responsiveness feature that allows plan participants to make exchanges or request benefit payments at contract value. This investment choice seeks to preserve principal while earning interest income. The investment option is a commingled pool, not a mutual fund, managed by Fidelity Management Trust Company. While the yield will fluctuate, the Portfolio seeks to maintain a stable net asset value (NAV) of $1 per share.

## 6. FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT (Continued)

The Portfolio, an actively managed short term bond fund, is a more conservative strategy than its stable value peers. The Portfolio investments include short-term bonds and other fixed income securities such as U.S. Treasury bonds, government agency securities, corporate bonds, mortgage-backed securities, commercial mortgage-backed securities, asset-backed securities and derivative instruments, including futures, options and swaps. Third-party wrap contracts are utilized by the Portfolio to maintain a constant NAV and to provide for the payment of participant-directed withdrawals and exchanges at book value under most circumstances. The Portfolio credits interest through wrap contracts and recognizes gains and losses over time by adjusting the interest rate credited to the Portfolio. The Portfolio is permitted to invest in investment contracts offered by insurance companies and other approved financial institutions that provide for the payment of a specified rate of interest to the Portfolio and the repayment of principal at maturity. All investments in the Portfolio must satisfy the credit quality standards of Fidelity Management Trust Company.

Because the investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contract. The investment contract 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, as reported to the plan by Fidelity, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal of transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the investment contract at December 31, 2012 and 2011 was $3,971,532 and $3,341,342, respectively. The average yield for the years ended December 31, 2012 and 2011 was 1.3% and 1.3%, respectively.

Certain events limit the ability of the plan to transact at contract value with the issuer. Such events include premature termination of the contracts by the plan, plant closings, layoffs, plan termination, bankruptcy, mergers, and early retirement incentives. The plan administrator does not believe that any events which would limit the plan's ability to transact at contract value with participants are probable of occurring.

## 7. TAX STATUS

Although the Plan has not requested determination from the Internal Revenue Service as to the Plan's tax-exempt status, the prototype plan from which the Plan was drafted has received a favorable determination from the IRS. The Plan administrator believes that the Plan is designed to operate in accordance with all applicable provisions of the Internal Revenue Code. Therefore, the Plan administrator believes that the Plan is qualified and that the related trust is exempt from taxation under the Internal Revenue Code.

Accounting principles generally accepted in the Unites States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

## 8. 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. However, no such action may deprive any participant or beneficiary under the Plan of any vested right.

## 9. RELATED PARTY TRANSACTIONS

The Plan's investments are held by Fidelity as custodian and trustee; therefore, investment transactions qualify as party-in-interest transactions.

Personnel and facilities of Hunt Companies Business Services, LLC, which are used by the Plan for its accounting and other activities, have been provided at no charge to the Plan.

## 10. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2012 and 2011 to Schedule H of Form 5500:

| | 2012 | 2011 |
|---|---|---|
| Balance per the financial statements | $ 33,072,996 | $ 26,040,943 |
| Employer and participant contributions receivable | (1,582,714) | (1,092,189) |
| Contract/fair value adjustment | 113,655 | 82,410 |
| Balance reported on Form 5500 | $ 31,603,937 | $ 25,031,164 |

Supplemental schedule

**2012 Schedule H, line 4i - Schedule of Assets (Held at End of Year)**
Name of Plan: Hunt Companies Business Services, LLC 401(k) Plan
EIN/PN: 20-5911113/001

| (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 |
|---|---|---|---|---|
| * | Fidelity Managed Income Portfolio | Common/collective trust | | 3,971,532 |
| * | PIMCO Total Return Fund | Mutual fund | | 3,271,852 |
| * | TRP Mid Cap Growth | Mutual fund | | 1,119,642 |
| * | Allianz NFJ International Value A | Mutual fund | | 3,467,470 |
| * | Fidelity Low-Priced Stock Fund | Mutual fund | | 562,167 |
| * | MFS Value Fund A | Mutual fund | | 1,647,838 |
| * | GS Small Cap Value A | Mutual fund | | 428,947 |
| * | Eagle Small Cap Growth I | Mutual fund | | 975,415 |
| * | Artisan Mid Cap Val | Mutual fund | | 616,357 |
| * | Fidelity Contrafund | Mutual fund | | 2,445,358 |
| * | Cohen & Steers Realty | Mutual fund | | 886,815 |
| * | Fidelity BrokerageLink | Brokerage account | | 672,220 |
| * | Fidelity Balanced | Mutual fund | | 9,713,792 |
| * | Spartan 500 Index Adv | Mutual fund | | 1,283,293 |
| | Participant Loans | 5% | 0 | 541,239 |

# Hunt Companies Business Services, LLC
# 401(k) Plan
## 20-5911113
## PLAN 001

## Financial Statements
## and Supplemental Schedule
## Years Ended December 31, 2012 and 2011

**Hunt Companies Business Services, LLC**
**401(k) Plan**

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GIBSON RUDDOCK PATTERSON LLC
certified public accountants

**Independent Auditor's Report**

Plan Administrator
Hunt Companies Business Services, LLC 401(k) Plan

**Report on the Financial Statements**

We were engaged to audit the accompanying financial statements of Hunt Companies Business Services, LLC 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements 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**

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

**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'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 3, which was certified by Fidelity Management Trust Company, the trustee 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 trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2012 and 2011, that the information provided to the plan administrator by the trustee 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**

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the 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 Rule and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Gibson Ruddock Patterson LLC

El Paso, Texas
October 9, 2013

## Hunt Companies Business Services, LLC
## 401(k) Plan

### Statements of Net Assets Available For Benefits

| December 31, | 2012 | 2011 |
|---|---|---|
| **Assets:** | | |
| Participant-directed investments, at fair value | $ 31,062,698 | $ 24,462,686 |
| Receivables | | |
| Employer contributions | 1,489,586 | 1,092,189 |
| Participant contributions | 93,128 | - |
| Notes receivable from participants | 541,239 | 568,478 |
| Total receivables | 2,123,953 | 1,660,667 |
| Total assets | 33,186,651 | 26,123,353 |
| Net assets reflecting investments at fair value | 33,186,651 | 26,123,353 |
| Adjustment from fair value to contract value for fully benefit-responsive investment contracts | (113,655) | (82,410) |
| **Net assets available for benefits** | $ 33,072,996 | $ 26,040,943 |

See accompanying notes to the financial statements.

## Hunt Companies Business Services, LLC
## 401(k) Plan

### Statements of Changes in Net Assets Available For Benefits

| December 31, | 2012 | 2011 |
|---|---|---|
| **Additions:** | | |
| Employer contributions | $ 1,489,586 | $ 1,092,189 |
| Participant contributions | 3,481,733 | 2,867,899 |
| Rollovers | 267,539 | 93,680 |
| Investment income: | | |
| Net appreciation (depreciation) in fair value of investments | 2,534,268 | (660,571) |
| Interest and dividends | 774,644 | 493,407 |
| Interest income on notes receivable from participants | 25,070 | 27,117 |
| Total additions | 8,572,840 | 3,913,721 |
| **Deductions:** | | |
| Benefits paid to participants | 1,521,077 | 939,068 |
| Administrative expenses | 19,710 | 14,172 |
| Total deductions | 1,540,787 | 953,240 |
| **Net increase** | 7,032,053 | 2,960,481 |
| **Net assets available for benefits:** | | |
| **Beginning of year** | 26,040,943 | 23,080,462 |
| **End of year** | $ 33,072,996 | $ 26,040,943 |

See accompanying notes to the financial statements.

## 1. DESCRIPTION OF THE PLAN

The following description of the Hunt Companies Business Services, LLC 401(k) Plan (the "Plan") provides only general information. Interested parties should refer to the Plan document for a more complete description of the Plan's provisions.

General - The Plan was originally adopted January 1, 1985. The Plan is a defined contribution plan covering all employees of Hunt Companies Business Services, LLC (the "Company") and affiliated companies who are age twenty-one or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective July 1, 2011, the plan name was changed from Hunt Administrative Services, LLC 401(k) Plan to Hunt Companies Business Services, LLC 401(k) Plan.

Contributions - Each year, participants may contribute to the Plan on a pretax basis between 1% and 60% of their eligible compensation, subject to an annual limitation of $17,000 and $16,500 for the years ended December 31, 2012 and 2011, respectively. For 2012 and 2011, participants age 50 or older may contribute an additional $5,500 and $5,500 to the Plan, respectively, which is called a catch-up contribution.

Effective January 8, 2007, the Plan was amended to allow participants to designate a portion or all of their deferral contributions as Roth Deferral Contributions.

Effective January 1, 2008, the plan was amended to satisfy the safe harbor provisions provided under the Internal Revenue Code. The amendment provides that the contributions made by the Company for each non-highly compensated employee be 100% for the first 4% of compensation deferred and for each highly compensated employee be 50% of the first 4% of compensation deferred. The amendment also removed the FICA wage limit on the match calculation.

Participant Accounts - Each participant's account is credited with the participant's contribution and the employer's matching contribution as well as an allocation of the Plan's earnings and administrative expenses, if applicable. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from that participant's vested account.

Vesting - Participants are immediately 100 percent vested in both their voluntary contributions and the matching employer contributions plus actual earnings thereon.

## 1. DESCRIPTION OF THE PLAN (Continued)

Notes Receivable From Participants - Subject to limitations, a participant may borrow from the vested portion of his or her elective account. The minimum amount of any loan is $1,000 and the maximum amount is the lesser of one-half of their vested account balance or $50,000. Up to 50% of a participant's vested account balance may be used as collateral for any loan. Outstanding participant loans have interest rates of 5%. Principal and interest are paid through payroll deductions.

Payment of Benefits - On retirement, death, disability, or termination of service, a participant (or participant's beneficiary in the event of death) shall have a nonforfeitable right to receive the full amount available for distribution from their account. Distributions are paid in lump-sum amounts or installment payments.

## 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined-contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The statement of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

Use of Estimates in the Preparation of Financial Statements - The preparation of the Plan's financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for plan benefits at the date of the financial statements and the changes in net assets available for plan benefits during the reporting period and, when applicable, disclosures of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Investment Valuation - Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

## 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Net Appreciation (Depreciation) in Fair Value of Investments - Net appreciation (depreciation) consists of the unrealized appreciation (depreciation) of the investments and the excess (deficiency) of net proceeds over market value of the related investment at the beginning of the year.

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.

Payment of Benefits - Benefits are recorded when paid.

Administrative Expenses - Certain expenses incurred in the administration of the Plan are paid directly by the Company.

Risks and Uncertainties - The Plan provides for various investment options in any combination of investment securities based upon participant requests. Investment securities are exposed to various risks, such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for plan benefits.

Subsequent Events - Subsequent events were evaluated through October 9, 2013, which is the date the financial statements were available to be issued.

## 3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE (UNAUDITED)

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

| | December 31, 2012 | December 31, 2011 |
|---|---|---|
| Fidelity Managed Income Portfolio, at contract value | $ 3,857,877 | $ 3,258,932 |
| PIMCO Total Return Fund | 3,271,852 | 2,292,851 |
| Fidelity Low-Priced Stock Fund | 562,167 | 393,825 |
| Spartan 500 Index Adv | 1,283,293 | - |
| Artisan Mid Cap Val | 616,357 | 715,320 |
| Fidelity BrokerageLink | 672,220 | 512,497 |
| Fidelity Balanced | 9,713,792 | 7,219,136 |
| Spartan 500 Index Inv | - | 764,822 |
| TRP Mid Cap Growth | 1,119,642 | 1,085,132 |
| MFS Value Fund A | 1,647,838 | 1,455,073 |
| Fidelity Contrafund | 2,445,358 | 2,027,007 |
| Cohen & Steers Realty | 886,815 | 671,561 |
| Allianz NFJ International Value A | 3,467,470 | 2,777,075 |
| GS Small Cap Value A | 428,947 | 339,446 |
| Eagle Small Cap Growth I | 975,415 | 867,599 |
| Total investments | $ 30,949,043 | $ 24,380,276 |
| Notes receivable from participants | $ 541,239 | $ 568,478 |
| Investment Income: | | |
| Net appreciation (depreciation) in fair value of investments | $ 2,534,268 | $ (660,571) |
| Interest and dividends | 774,644 | 493,407 |
| Total investment gain (loss) | $ 3,308,912 | $ (167,164) |
| Interest income on notes receivable from participants | $ 25,070 | $ 27,117 |

The Plan's independent accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and schedule.

## 4. FAIR VALUE MEASUREMENTS

FASB ASC 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure the fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets or liabilities and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs 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.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2012 and 2011.

*Mutual funds:* The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year-end.

*Self-directed brokerage account:* The self-directed brokerage account (Fidelity BrokerageLink) is valued at the closing price reported on the active market on which the individual securities are traded.

*Common/collective trust*: The common/collective trust (Fidelity Managed Income Portfolio) is valued based on the contractual terms of the underlying GICs.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the plan believes it 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.

## 4. FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2012 and 2011:

| | | Fair Value Measurements Using: | |
|---|---|---|---|
| | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| December 31, 2012 | | | |
| Mutual funds: | | | |
| Fixed income | $ 3,271,852 | $ 3,271,852 | $ - |
| Small cap stock | 1,404,363 | 1,404,363 | - |
| International | 3,467,470 | 3,467,470 | - |
| Mid/Large cap stock | 18,275,261 | 18,275,261 | - |
| Total mutual funds | 26,418,946 | 26,418,946 | - |
| Self-directed brokerage account: | | | |
| External fund | 30,689 | 30,689 | - |
| Common stocks | 26,129 | 26,129 | - |
| Units | 369,541 | 369,541 | - |
| Mutual funds | 57,380 | 57,380 | - |
| Other | 188,481 | 188,481 | - |
| Total self-directed | 672,220 | 672,220 | - |
| Common/collective trust: | | | |
| Fixed income | 3,971,532 | - | 3,971,532 |
| Total assets at fair value | $ 31,062,698 | $ 27,091,166 | $ 3,971,532 |

## 4. FAIR VALUE MEASUREMENTS (Continued)

| | | Fair Value Measurements Using: | |
|---|---|---|---|
| | Fair Value | Quoted Prices in Active Markets for Identical Assets (Level 1) | Significant Other Observable Inputs (Level 2) |
| December 31, 2011 | | | |
| Mutual funds: | | | |
| Fixed income | $ 2,292,851 | $ 2,292,851 | $ - |
| Small cap stock | 1,207,045 | 1,207,045 | - |
| International | 2,777,075 | 2,777,075 | - |
| Mid/Large cap stock | 14,331,876 | 14,331,876 | - |
| Total mutual funds | 20,608,847 | 20,608,847 | - |
| Self-directed brokerage account: | | | |
| Common stocks | 221,762 | 221,762 | - |
| Units | 8,051 | 8,051 | - |
| Mutual funds | 115,784 | 115,784 | - |
| Other | 166,900 | 166,900 | - |
| Total self-directed | 512,497 | 512,497 | - |
| Common/collective trust: | | | |
| Fixed income | 3,341,342 | - | 3,341,342 |
| Total assets at fair value | $ 24,462,686 | $ 21,121,344 | $ 3,341,342 |

## 5. INVESTMENTS

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

| | December 31, 2012 | December 31, 2011 |
|---|---|---|
| Fidelity Managed Income Portfolio, at contract value | $ 3,857,877 | $ 3,258,932 |
| PIMCO Total Return Fund | 3,271,852 | 2,292,851 |
| Fidelity Balanced | 9,713,792 | 7,219,136 |
| MFS Value Fund A | * | 1,455,073 |
| Fidelity Contrafund | 2,445,358 | 2,027,007 |
| Allianz NFJ International Value A | 3,467,470 | 2,777,075 |

* Did not meet the 5% criteria at respective financial statement date.

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 (depreciated) in value by $2,534,268 and $(660,571), respectively, as follows:

| | | |
|---|---|---|
| Mutual funds | $ 2,438,326 | $ (642,502) |
| Self-directed brokerage account | 95,942 | (18,069) |
| | $ 2,534,268 | $ (660,571) |

## 6. FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Plan's Managed Income Portfolio is a stable value investment contract that carries a benefit responsiveness feature that allows plan participants to make exchanges or request benefit payments at contract value. This investment choice seeks to preserve principal while earning interest income. The investment option is a commingled pool, not a mutual fund, managed by Fidelity Management Trust Company. While the yield will fluctuate, the Portfolio seeks to maintain a stable net asset value (NAV) of $1 per share.

## 6. FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT (Continued)

The Portfolio, an actively managed short term bond fund, is a more conservative strategy than its stable value peers. The Portfolio investments include short-term bonds and other fixed income securities such as U.S. Treasury bonds, government agency securities, corporate bonds, mortgage-backed securities, commercial mortgage-backed securities, asset-backed securities and derivative instruments, including futures, options and swaps. Third-party wrap contracts are utilized by the Portfolio to maintain a constant NAV and to provide for the payment of participant-directed withdrawals and exchanges at book value under most circumstances. The Portfolio credits interest through wrap contracts and recognizes gains and losses over time by adjusting the interest rate credited to the Portfolio. The Portfolio is permitted to invest in investment contracts offered by insurance companies and other approved financial institutions that provide for the payment of a specified rate of interest to the Portfolio and the repayment of principal at maturity. All investments in the Portfolio must satisfy the credit quality standards of Fidelity Management Trust Company.

Because the investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the investment contract. The investment contract 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, as reported to the plan by Fidelity, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal of transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The fair value of the investment contract at December 31, 2012 and 2011 was $3,971,532 and $3,341,342, respectively. The average yield for the years ended December 31, 2012 and 2011 was 1.3% and 1.3%, respectively.

Certain events limit the ability of the plan to transact at contract value with the issuer. Such events include premature termination of the contracts by the plan, plant closings, layoffs, plan termination, bankruptcy, mergers, and early retirement incentives. The plan administrator does not believe that any events which would limit the plan's ability to transact at contract value with participants are probable of occurring.

## 7. TAX STATUS

Although the Plan has not requested determination from the Internal Revenue Service as to the Plan's tax-exempt status, the prototype plan from which the Plan was drafted has received a favorable determination from the IRS. The Plan administrator believes that the Plan is designed to operate in accordance with all applicable provisions of the Internal Revenue Code. Therefore, the Plan administrator believes that the Plan is qualified and that the related trust is exempt from taxation under the Internal Revenue Code.

Accounting principles generally accepted in the Unites States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability (or asset) if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

## 8. 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. However, no such action may deprive any participant or beneficiary under the Plan of any vested right.

## 9. RELATED PARTY TRANSACTIONS

The Plan's investments are held by Fidelity as custodian and trustee; therefore, investment transactions qualify as party-in-interest transactions.

Personnel and facilities of Hunt Companies Business Services, LLC, which are used by the Plan for its accounting and other activities, have been provided at no charge to the Plan.

## 10. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2012 and 2011 to Schedule H of Form 5500:

| | 2012 | 2011 |
|---|---|---|
| Balance per the financial statements | $ 33,072,996 | $ 26,040,943 |
| Employer and participant contributions receivable | (1,582,714) | (1,092,189) |
| Contract/fair value adjustment | 113,655 | 82,410 |
| Balance reported on Form 5500 | $ 31,603,937 | $ 25,031,164 |

Supplemental schedule

**2012 Schedule H, line 4i - Schedule of Assets (Held at End of Year)**
Name of Plan: Hunt Companies Business Services, LLC 401(k) Plan
EIN/PN: 20-5911113/001

| (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 |
|---|---|---|---|---|
| * | Fidelity Managed Income Portfolio | Common/collective trust | | 3,971,532 |
| * | PIMCO Total Return Fund | Mutual fund | | 3,271,852 |
| * | TRP Mid Cap Growth | Mutual fund | | 1,119,642 |
| * | Allianz NFJ International Value A | Mutual fund | | 3,467,470 |
| * | Fidelity Low-Priced Stock Fund | Mutual fund | | 562,167 |
| * | MFS Value Fund A | Mutual fund | | 1,647,838 |
| * | GS Small Cap Value A | Mutual fund | | 428,947 |
| * | Eagle Small Cap Growth I | Mutual fund | | 975,415 |
| * | Artisan Mid Cap Val | Mutual fund | | 616,357 |
| * | Fidelity Contrafund | Mutual fund | | 2,445,358 |
| * | Cohen & Steers Realty | Mutual fund | | 886,815 |
| * | Fidelity BrokerageLink | Brokerage account | | 672,220 |
| * | Fidelity Balanced | Mutual fund | | 9,713,792 |
| * | Spartan 500 Index Adv | Mutual fund | | 1,283,293 |
| | Participant Loans | 5% | 0 | 541,239 |