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. . . . . ▶ [X]

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
VANTAGE SPECIALTY CHEMICALS 401(K)

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/2008

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

VANTAGE OLEOCHEMICALS, INC.

4650 S RACINE AVE
CHICAGO, IL 60609

4650 S RACINE AVE
CHICAGO, IL 60609

2b Employer Identification Number (EIN)
26-2518277

2c Sponsor's telephone number
773-650-7580

2d Business code (see instructions)
325100

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	BARRY ROSENTHAL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2013	BARRY ROSENTHAL
	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

VANTAGE OLEOCHEMICALS, INC.

4650 S RACINE AVE
CHICAGO, IL 60609

3b Administrator's EIN: 26-2518277

3c Administrator's telephone number: 773-650-7580

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: H.I.G. CHEMICALS, INC.

4b EIN: 26-2518277

4c PN: 001

5	Total number of participants at the beginning of the plan year	**5**	374
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**	461
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	56
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	517
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	517
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	333
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	3
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Service Provider Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

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

A Name of plan
VANTAGE SPECIALTY CHEMICALS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VANTAGE OLEOCHEMICALS, INC.

D Employer Identification Number (EIN)
26-2518277

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

FIDELITY 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 60	RECORDKEEPER	9481	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
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.
AF EUROPAC GROWTH R5 - AMERICAN FUN 95-2566717	0.05%

(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.
AF EUROPAC GRTH R4 - AMERICAN FUNDS 95-2566717	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.
ALZGI NFJ DIV VL ADM - BOSTON FINAN 330 W. 9TH STREET KANSAS CITY, MO 64105	0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
AM CENT INC GRTH IS - AMERICAN CENT 44-0619208	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.
BLKRK SM CAP GR EQ I - BNY MELLON I P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

(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.
FKLN RISING DIVS ADV - FRANKLIN TEM 94-3167260	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
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.
JANUS BALANCED T - JANUS SERVICES L 43-1804048	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.
M&N PROBLND MAXTRM S - BNY MELLON I P.O. BOX 9793 PROVIDENCE, RI 02940	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.
MAINSTAY LGCP GR R1 - NYLIM SERVICE 52-2206685	0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
MSIF MID CAP GRTH P - MORGAN STANLE 13-3799749	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.
OPP DEVELOPING MKT Y - OFI GLOBAL A	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

(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.
OPPENHEIMER GLOBAL A - OFI GLOBAL A	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.50%

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.
OPPENHEIMER GLOBAL Y - OFI GLOBAL A	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

(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.
OPPHMR DEV MKTS A - OFI GLOBAL ASSE	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	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.
OPPHMR INTL BOND A - OFI GLOBAL ASS	TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.50%

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.
OPPHMR INTL BOND Y - OFI GLOBAL ASS TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

(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.
OPPHMR INTL SM CO A - OFI GLOBAL AS TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	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.
PIM TOTAL RT INST - BOSTON FINANCIA P.O. BOX 8480 BOSTON, MA 02266	0.02%

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.
RDGWTH MID CAP VAL I - BOSTON FINAN	P.O. BOX 8480 BOSTON, MA 02266	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.
ROYCE OPPORTUNITY IS - BOSTON FINAN	P.O. BOX 8480 BOSTON, MA 02266	0.05%

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.
TRP EQUITY INC ADV - T. ROWE PRICE 52-2269240	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.
WFA SM CAP VAL INV - BOSTON FINANCI 330 W. 9TH STREET KANSAS CITY, MO 64105	0.40%

(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
VANTAGE SPECIALTY CHEMICALS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
VANTAGE OLEOCHEMICALS, INC.

D Employer Identification Number (EIN)
26-2518277

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: FID MGD INC PORT

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	5126391

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
VANTAGE SPECIALTY CHEMICALS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VANTAGE OLEOCHEMICALS, INC.

D Employer Identification Number (EIN)
26-2518277

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)	0	10035236
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1384408	1295628
(9) Value of interest in common/collective trusts	1c(9)	4980536	5126391
(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)	23746739	28630196
(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	30111683	45087451
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	30111683	45087451

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)	1192454	
(B) Participants	2a(1)(B)	1926769	
(C) Others (including rollovers)	2a(1)(C)	291705	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		3410928
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	62030	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		62030
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	861312	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		861312
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		87486
(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)		2863846
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		7285602
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2249189	
(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)		2249189
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		86301
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	9580	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		9580
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2345070
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4940532
l Transfers of assets:			
(1) To this plan	2l(1)		10035236
(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: CROWE HORWATH LLP **(2)** EIN: 35-0921680

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ **Yes** ☒ **No**

If "Yes," enter the amount of any plan assets that reverted to the employer this year **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
VANTAGE SPECIALTY CHEMICALS 401(K)

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VANTAGE OLEOCHEMICALS, INC.

D Employer Identification Number (EIN)
26-2518277

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):

VANTAGE SPECIALTY CHEMICALS
401(k) AND PROFIT SHARING PLAN
(f/k/a H.I.G. CHEMICALS, INC. 401(k) PLAN)

Chicago, Illinois

FINANCIAL STATEMENTS

December 31, 2012 and 2011

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
Chicago, Illinois

FINANCIAL STATEMENTS
December 31, 2012 and 2011

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Vantage Specialty Chemicals 401(k) and Profit Sharing Plan
(f/k/a H.I.G. Chemicals, Inc. 401(k) Plan)
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Vantage Specialty Chemicals 401(k) and Profit Sharing Plan (f/k/a H.I.G. Chemicals, Inc. 401(k) Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the trustee as of December 31, 2012 and 2011 and for the year ended December 31, 2012 that the information provided to the plan administrator by the trustee is complete and accurate.

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.

(Continued)

Other Matter

The supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2012 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for purposes of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

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 Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Crowe Horwath LLP

Crowe Horwath LLP

Oak Brook, Illinois
October 15, 2013

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2012 and 2011

	2012	2011
ASSETS		
Investments, at fair value (Note 4)	$ 33,756,588	$ 28,727,274
Receivables		
Participant contributions	56,467	46,663
Employer contributions	40,050	18,704
Notes receivable from participants	1,295,628	1,384,408
	1,392,145	1,449,775
Total assets	35,148,733	30,177,049
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(146,704)	(122,839)
NET ASSETS AVAILABLE FOR BENEFITS	$ 35,002,029	$ 30,054,210

See accompanying notes to financial statements.

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2012

Additions to net assets attributed to:	
Investment income	
Net appreciation in fair value of investments (Note 4)	$ 2,863,848
Dividends from mutual funds	861,312
Interest from collective trust	63,621
	3,788,781
Interest income on notes receivable from participants	62,030
Contributions	
Participants	1,936,574
Employer	1,213,799
Rollover	291,705
Total contributions	3,442,078
Total additions	7,292,889
Deductions from net assets attributed to:	
Benefits paid to participants	2,335,490
Administrative expenses	9,580
Total deductions	2,345,070
Net increase	4,947,819
Net assets available for benefits:	
Beginning of year	30,054,210
End of year	$ 35,002,029

See accompanying notes to financial statements.

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan ("the Plan"), formerly called the H.I.G. Chemicals, Inc. 401(k) Plan, provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan that covers eligible employees of Vantage Specialty Chemicals, Inc. ("the Company") who have attained the age of 21 years old. Employees become eligible to enroll in the Plan on the first day of employment.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective September 1, 2012, the Plan name was changed from H.I.G. Chemicals, Inc. 401(k) Plan to the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan.

Contributions: Each year, participants may contribute to the Plan up to 60% of compensation, as defined by the Plan, not to exceed limits imposed by the Internal Revenue code. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Participants working at the Chicago, Illinois, location of the Company and hired prior to February 12, 2010 are eligible for a non-discretionary matching employer contribution not to exceed three percent of compensation. Participants working at the Gurnee, Illinois, location of the Company and hired prior to February 12, 2010 are eligible for a non-discretionary matching employer contribution not to exceed four percent of compensation. All participants hired after February 12, 2010, are eligible for a discretionary matching employer contribution not to exceed three percent of compensation.

Participants working at the Chicago, Illinois, location of the Company and hired prior to February 12, 2010, are eligible for a nonelective employer contribution ranging from five to seventeen percent of compensation.

Participant Accounts: The Plan maintains a separate account for each participant. This account consists of the participant's contributions, the participant's share of employer contributions, and their share of the Plan's net earnings and losses, and is charged with his or her withdrawals and an allocation of administrative expenses. 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 the participant's vested account.

Investment Options: Participants direct the investment of their contributions and the Company contributions into the various investment options offered by the Plan. Participants may change their investment options daily.

Vesting: Participants are fully vested in their voluntary contributions, matching contributions and earnings thereon. Company nonelective contributions and earnings thereon vest as follows:

Years of Service	Vested
Less than 3	0%
3 and over	100

Upon termination of participation in the Plan, the nonvested portion of a former participant's balance is forfeited. Participants are fully vested in the amount in their accounts attributable to the Company's contributions upon the attainment of normal retirement age, disability, or death.

(Continued)

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Payment of Benefits: On termination of service, death, disability, or retirement, a participant may receive a lump-sum amount equal to the vested value of his or her account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. A participant may be eligible for a withdrawal due to early retirement or financial hardship in certain circumstances.

Allocation of Forfeitures: Forfeitures of employer contributions and the earnings on those contributions resulting from participants who leave the Company prior to vesting are retained in an unallocated forfeiture account. Forfeitures may be used to pay administrative expenses of the Plan or reduce future Company contributions.

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

Notes Receivable from Participants: Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at a reasonable fixed rate as determined by the loan administrator at the time the loan is made. Principal and interest are paid ratably through payroll deductions.

Administrative Expenses: The Company pays substantially all administrative expenses of the Plan. Certain other expenses are paid by the Plan. Loan origination and maintenance fees are deducted from the participant's account. Investment management fees and certain operating expenses charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, these management fees and operating expenses are reflected as a reduction of investment return for such investments.

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting: The financial statements of the Plan have been prepared on the accrual basis of accounting.

Risks and Uncertainties: The Plan holds various investments. Investments are exposed to various risks, such as interest rate, market, liquidity, and credit risks. Due to the level of risks associated with certain investments, and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures, and actual results could differ from these estimates.

Payment of Benefits: Benefits are recorded by the Plan when paid.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

(Continued)

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Fully Benefit-Responsive Investment Contracts: While Plan investments are presented at fair value in the statement of net assets available for benefits, any material difference between the fair value of the Plan's direct and indirect interests in fully benefit-responsive investment contracts and their contract value is presented as an adjustment line in the statement of net assets available for benefits, because contract value is the relevant measurement attribute for that portion of the Plan's net assets available for benefits. Contract value represents contributions made to a contract, plus earnings, less participant withdrawals and administrative expenses. Participants in fully benefit-responsive contracts may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The Plan holds an indirect interest in such contracts through its investment in a stable value collective trust fund.

NOTE 3 - FAIR VALUE MEASUREMENTS

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs when measuring fair value. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurements) and gives the lowest priority to unobservable inputs (Level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

> Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.
>
> Level 2: Significant other observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.
>
> Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

Mutual funds: The fair values of mutual fund investments are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

Stable value collective trust fund: The fair values of participation units in stable value collective trust fund are based upon the net asset values of such fund, after adjustments to reflect all fund investments at fair value, including direct and indirect interests in fully benefit-responsive contracts, as reported in the audited financial statements of the fund (Level 2 inputs). The investment objective of the collective trust

(Continued)

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

fund is to seek the preservation of capital, and to provide a competitive level of income over time consistent with the preservation of capital. To achieve its investment objective, the fund invests in conventional and synthetic investment contracts issued by insurance companies, banks, and other financial institutions, debt obligations issued or guaranteed by the U.S. government, U.S government agencies or U.S. government-sponsored corporations or agencies, and other similar fixed income securities. The fund provides for daily redemptions by the Plan at reported net asset value per share, with no advance notification requirements.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Investments measured at fair value on a recurring basis are summarized below:

	Investment Assets at Fair Value on a Recurring Basis As of December 31, 2012		
	Level 1	Level 2	Level 3
Investments			
Mutual funds			
Diversified emerging markets	$ 1,538,869	$ -	$ -
Foreign large blend	1,292,594	-	-
Foreign small/mid growth	741,978	-	-
High-yield bonds	940,808	-	-
Intermediate-term bond	2,526,447	-	-
Large blend	1,668,891	-	-
Large growth	3,804,738	-	-
Large value	2,234,945	-	-
Mid-cap blend	3,046,988	-	-
Mid-cap growth	888,129	-	-
Mid-cap value	184,937	-	-
Moderate allocation	884,558	-	-
Real estate	198,802	-	-
Retirement income	833,087	-	-
Short Government	238	-	-
Small blend	789,032	-	-
Small Growth	9,349	-	-
Small Value	82,917	-	-
Small-Cap Blend	416	-	-
Target date 2000-2010	82,352	-	-
Target date 2011-2015	29,162	-	-
Target date 2016-2020	1,683,934	-	-
Target date 2021-2025	710,368	-	-
Target date 2026-2030	1,089,296	-	-
Target date 2031-2035	242,149	-	-
Target date 2036-2040	320,746	-	-
Target date 2041-2045	124,487	-	-
Target date 2046-2050	267,168	-	-
Target date 2051+	26,286	-	-
World bond	317,242	-	-
World stock	2,069,284	-	-
Collective trusts-Stable value fund	-	5,126,391	-
	$ 28,630,197	$ 5,126,391	$ -

(Continued)

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

	Investment Assets at Fair Value on a Recurring Basis As of December 31, 2011		
	Level 1	Level 2	Level 3
Investments			
Mutual funds			
Diversified emerging markets	$ 1,148,763	$ -	$ -
Foreign large blend	1,321,754	-	-
Foreign small/mid growth	835,432	-	-
High-yield bonds	695,325	-	-
Intermediate-term bond	1,965,113	-	-
Large blend	1,107,496	-	-
Large growth	3,548,302	-	-
Large value	1,901,880	-	-
Mid-cap blend	2,485,455	-	-
Mid-cap growth	1,017,665	-	-
Mid-cap value	100,185	-	-
Moderate allocation	774,711	-	-
Real estate	114,919	-	-
Retirement income	823,291	-	-
Small blend	775,943	-	-
Target date 2000-2010	60,542	-	-
Target date 2011-2015	25,930	-	-
Target date 2016-2020	1,327,899	-	-
Target date 2021-2025	386,031	-	-
Target date 2026-2030	620,053	-	-
Target date 2031-2035	154,020	-	-
Target date 2036-2040	189,874	-	-
Target date 2041-2045	70,026	-	-
Target date 2050+	101,839	-	-
World bond	368,145	-	-
World stock	1,826,146	-	-
Collective trusts			
Stable value fund	-	4,980,535	-
	$ 23,746,739	$ 4,980,535	$ -

There were no significant transfers between Level 1 and Level 2 in 2012 or 2011.

NOTE 4 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company, the trustee of the Plan. This information has not been audited by independent accountants.

(Continued)

NOTE 4 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS (Continued)

The following table presents the fair values of investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	2012	2011
Investments at fair value:		
Mutual funds		
PIMCO Total Return Administration	$ 2,526,447	$ 1,965,113
Mainstay Large Cap Growth	2,721,168	2,482,024
T. Rowe Price Equity Income Fund	1,999,563	1,775,839
Oppenheimer Global Fund	2,069,284	1,826,146
Fidelity Low-Priced Stock Fund	2,795,526	2,485,455
Collective trusts		
Fidelity Managed Income Portfolio		
(Contract values: 2012 - $4,979,687; 2011 - $4,857,696)	$ 5,126,391	$ 4,980,535

The Plan trustee has also certified that the net appreciation of mutual fund investments (including gains and losses on investments bought and sold, as well as held, during the year) was $2,863,848 in 2012.

Interest and dividend income, excluding interest income on notes receivable from participants, was $924,933 during 2012.

NOTE 5 - TAX STATUS

The Internal Revenue Service issued an opinion letter dated March 31, 2008 indicating that the prototype adopted by the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code. Although the Plan has been amended from the original prototype document, Plan management believes that the Plan is currently being operated in accordance with the Internal Revenue Code.

NOTE 6 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain investments are managed and administered by Fidelity Management Trust Company, the trustee, and Fidelity Investments, an affiliate of Fidelity Management Trust Company. Therefore, these investments are considered party-in-interest transactions. Administrative expenses of $9,580 were paid to the trustee of the Plan during 2012. Certain other professional fees for the administration and audit of the Plan were paid by the Company. Notes receivable from participants are also considered party-in-interest transactions.

(Continued)

NOTE 7 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	2012	2011
Net assets available for benefits per the financial statements	$ 35,002,029	$ 30,054,210
Participant contributions receivable	(56,467)	(46,663)
Employer contributions receivable	(40,050)	(18,704)
Plan transfer	10,035,236	-
Difference between fair value and contract value of stable value fund	146,704	122,839
Rounding adjustment	(1)	-
Net assets per the Form 5500	$ 45,087,451	$ 30,111,682

The following is a reconciliation of the net change in assets available for plan benefits for the year ended December 31, 2012 per the financial statements to net income per the Form 5500:

Increase in net assets available for benefits per the financial statements	$ 4,947,819
Participant contributions	(9,804)
Employer contributions	(21,346)
Change in difference between fair value and contract value of stable value fund	23,865
Rounding adjustment	(2)
Net income per the Form 5500	$ 4,940,532

NOTE 8 - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 15, 2013, which is the date the financial statements were available to be issued.

Effective January 1, 2013, the following plans of related employers were merged into the Plan: My Company's 401(k) Savings Plan (former plan sponsor was Ruger Chemical Co., Inc.) and Lipo Chemicals Inc. 401(k) Profit Sharing Plan and Trust, and related assets were transferred into the Plan. Furthermore, the Plan was amended effective January 1, 2013 to change the following provisions:

- Definition of compensation was modified to exclude the value of restricted stock and certain stock options, as well as severance pay received prior to termination of employment;
- Non-discretionary matching employer contribution for the participants hired prior to February 12, 2010 was eliminated. Effective January 1, 2013, all Plan participants are eligible for a discretionary employer matching contribution not to exceed three percent of compensation;
- Non-elective employer contribution for employees hired prior to February 12, 2010 was eliminated.
- Effective January 1, 2013, all participants are to receive non-elective employer contribution based on a discretionary formula; and
- Vesting provisions for non-elective and matching employer contributions changed to a 6-year graded schedule. In addition, participants in the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan became 100% vested in discretionary match and discretionary profit sharing employer contributions.

SUPPLEMENTAL SCHEDULE

Name of Plan Sponsor: Vantage Oleochemicals, Inc.
Employer Identification Number: 26-2518277
Three-Digit Plan Number: 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[1]	(e) Current Value
		Mutual Funds		
	Allianz	Allianz NFJ Dividend Value Admin		$ 221,115
	American Century	American Century Income & Growth Institutional		14,267
	American Funds	American Funds Euro Pacific Growth R4		79
	American Funds	American Funds Euro Pacific Growth R5		82,560
	BlackRock Municipal	BlackRock Small Cap Growth Equity Inv A		9,349
*	Fidelity Investments	Fidelity Balanced		856,020
*	Fidelity Investments	Fidelity Capital and Income		940,808
*	Fidelity Investments	Fidelity Freedom 2000		27,907
*	Fidelity Investments	Fidelity Freedom 2005		26,466
*	Fidelity Investments	Fidelity Freedom 2010		27,979
*	Fidelity Investments	Fidelity Freedom 2015		29,162
*	Fidelity Investments	Fidelity Freedom 2020		1,683,934
*	Fidelity Investments	Fidelity Freedom 2025		710,368
*	Fidelity Investments	Fidelity Freedom 2030		1,089,296
*	Fidelity Investments	Fidelity Freedom 2035		242,149
*	Fidelity Investments	Fidelity Freedom 2040		320,746
*	Fidelity Investments	Fidelity Freedom 2045		124,487
*	Fidelity Investments	Fidelity Freedom 2050		9
*	Fidelity Freedom	Fidelity Freedom Income		833,087
*	Fidelity Investments	Fidelity Freedom K 2050		267,159
*	Fidelity Investments	Fidelity Freedom K 2055		26,286
*	Fidelity Investments	Fidelity International Discovery		1,209,955
*	Fidelity Investments	Fidelity Low-Priced Stock		2,795,526
*	Fidelity Investments	Fidelity Magellan		1,083,570
*	Fidelity Investments	Fidelity Real Estate Income		198,802
*	Fidelity Investments	Fidelity Spartan 500 Index		1,431,927
*	Fidelity Investments	Fidelity Spartan Mid-Cap Index Advantage		251,462
*	Fidelity Investments	Fidelity Spartan Small-Cap Index Advantage		416
	Franklin Managed Trust	Franklin Rising Dividends		79,920
	Janus Capital Group	Janus Balanced T		28,538
	Mainstay	Mainstay Large Cap Growth Fund		2,721,168
	Manning & Napier	Manning & Napier Pro-Blend Max Term		157,044
	Morgan Stanley	Morgan Stanley Inst Mid-Cap Growth		888,129
	Oppenheimer	Oppenheimer Developing Markets Fund		1,538,869
	Oppenheimer	Oppenheimer Global Fund		2,069,284
	Oppenheimer	Oppenheimer International Bond Fund		317,242
	Oppenheimer	Oppenheimer International Small Co. Fund		741,978
	PIMCO	PIMCO Total Return Institutional Class		2,526,447
	Principal Global Investors	Principal LifeTime Strategic Income R3 Fund		3,953
	Principal Global Investors	Principal LifeTime 2010 R3 Fund		10,752
	Principal Global Investors	Principal LifeTime 2020 R3 Fund		20,173
	Principal Global Investors	Principal LifeTime 2030 R3 Fund		25,548
	Principal Global Investors	Principal LifeTime 2040 R3 Fund		7,472
	Principal Global Investors	Principal LifeTime 2050 R3 Fund		1,473
	RidgeWorth	RidgeWorth Mid-Cap Value Equity Fund		184,937

(Continued)
See report of independent auditors.

Name of plan sponsor: Vantage Oleochemicals, Inc.
Employer identification: 26-2518277
Three-digit plan number: 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[1]	(e) Current Value
		Mutual Funds (Continued)		
	Royce Fund	Royce Opportunity Institutional		$ 82,917
	T. Rowe Price	T. Rowe Price Equity Income Fund		1,999,563
	Vanguard	Vanguard Short-Term Treasury Adm		237
	Wells Fargo	Wells Fargo Advantage Small Cap Value		789,032
				28,699,567
		Collective Trust		
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio		5,126,391
		Group Annuity Contract		
*	Principal Life Insurance Company	Principal Fixed Income Option 401(a)/(k)		1,823,543
		Notes Receivable		
*	Notes receivable from participants	Interest between 4.25% and 9.25%, maturing through 2030		1,442,779
				$ 37,092,280

[1] Cost information not required for participant-directed investments.
* Party-in-interest.

VANTAGE SPECIALTY CHEMICALS
401(k) AND PROFIT SHARING PLAN
(f/k/a H.I.G. CHEMICALS, INC. 401(k) PLAN)

Chicago, Illinois

FINANCIAL STATEMENTS

December 31, 2012 and 2011

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
Chicago, Illinois

FINANCIAL STATEMENTS
December 31, 2012 and 2011

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Vantage Specialty Chemicals 401(k) and Profit Sharing Plan
(f/k/a H.I.G. Chemicals, Inc. 401(k) Plan)
Chicago, Illinois

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Vantage Specialty Chemicals 401(k) and Profit Sharing Plan (f/k/a H.I.G. Chemicals, Inc. 401(k) Plan), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statement of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the trustee as of December 31, 2012 and 2011 and for the year ended December 31, 2012 that the information provided to the plan administrator by the trustee is complete and accurate.

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.

(Continued)

Other Matter

The supplemental Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2012 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for purposes of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

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 Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Crowe Horwath LLP

Crowe Horwath LLP

Oak Brook, Illinois
October 15, 2013

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2012 and 2011

	2012	2011
ASSETS		
Investments, at fair value (Note 4)	$ 33,756,588	$ 28,727,274
Receivables		
Participant contributions	56,467	46,663
Employer contributions	40,050	18,704
Notes receivable from participants	1,295,628	1,384,408
	1,392,145	1,449,775
Total assets	35,148,733	30,177,049
Adjustment from fair value to contract value for fully benefit-responsive investment contracts	(146,704)	(122,839)
NET ASSETS AVAILABLE FOR BENEFITS	$ 35,002,029	$ 30,054,210

See accompanying notes to financial statements.

VANTAGE SPECIALTY CHEMICALS 401(k) AND PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2012

Additions to net assets attributed to:	
Investment income	
Net appreciation in fair value of investments (Note 4)	$ 2,863,848
Dividends from mutual funds	861,312
Interest from collective trust	63,621
	3,788,781
Interest income on notes receivable from participants	62,030
Contributions	
Participants	1,936,574
Employer	1,213,799
Rollover	291,705
Total contributions	3,442,078
Total additions	7,292,889
Deductions from net assets attributed to:	
Benefits paid to participants	2,335,490
Administrative expenses	9,580
Total deductions	2,345,070
Net increase	4,947,819
Net assets available for benefits:	
Beginning of year	30,054,210
End of year	$ 35,002,029

See accompanying notes to financial statements.

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan ("the Plan"), formerly called the H.I.G. Chemicals, Inc. 401(k) Plan, provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan that covers eligible employees of Vantage Specialty Chemicals, Inc. ("the Company") who have attained the age of 21 years old. Employees become eligible to enroll in the Plan on the first day of employment.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Effective September 1, 2012, the Plan name was changed from H.I.G. Chemicals, Inc. 401(k) Plan to the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan.

Contributions: Each year, participants may contribute to the Plan up to 60% of compensation, as defined by the Plan, not to exceed limits imposed by the Internal Revenue code. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

Participants working at the Chicago, Illinois, location of the Company and hired prior to February 12, 2010 are eligible for a non-discretionary matching employer contribution not to exceed three percent of compensation. Participants working at the Gurnee, Illinois, location of the Company and hired prior to February 12, 2010 are eligible for a non-discretionary matching employer contribution not to exceed four percent of compensation. All participants hired after February 12, 2010, are eligible for a discretionary matching employer contribution not to exceed three percent of compensation.

Participants working at the Chicago, Illinois, location of the Company and hired prior to February 12, 2010, are eligible for a nonelective employer contribution ranging from five to seventeen percent of compensation.

Participant Accounts: The Plan maintains a separate account for each participant. This account consists of the participant's contributions, the participant's share of employer contributions, and their share of the Plan's net earnings and losses, and is charged with his or her withdrawals and an allocation of administrative expenses. 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 the participant's vested account.

Investment Options: Participants direct the investment of their contributions and the Company contributions into the various investment options offered by the Plan. Participants may change their investment options daily.

Vesting: Participants are fully vested in their voluntary contributions, matching contributions and earnings thereon. Company nonelective contributions and earnings thereon vest as follows:

Years of Service	Vested
Less than 3	0%
3 and over	100

Upon termination of participation in the Plan, the nonvested portion of a former participant's balance is forfeited. Participants are fully vested in the amount in their accounts attributable to the Company's contributions upon the attainment of normal retirement age, disability, or death.

(Continued)

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Payment of Benefits: On termination of service, death, disability, or retirement, a participant may receive a lump-sum amount equal to the vested value of his or her account. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. A participant may be eligible for a withdrawal due to early retirement or financial hardship in certain circumstances.

Allocation of Forfeitures: Forfeitures of employer contributions and the earnings on those contributions resulting from participants who leave the Company prior to vesting are retained in an unallocated forfeiture account. Forfeitures may be used to pay administrative expenses of the Plan or reduce future Company contributions.

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

Notes Receivable from Participants: Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at a reasonable fixed rate as determined by the loan administrator at the time the loan is made. Principal and interest are paid ratably through payroll deductions.

Administrative Expenses: The Company pays substantially all administrative expenses of the Plan. Certain other expenses are paid by the Plan. Loan origination and maintenance fees are deducted from the participant's account. Investment management fees and certain operating expenses charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, these management fees and operating expenses are reflected as a reduction of investment return for such investments.

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting: The financial statements of the Plan have been prepared on the accrual basis of accounting.

Risks and Uncertainties: The Plan holds various investments. Investments are exposed to various risks, such as interest rate, market, liquidity, and credit risks. Due to the level of risks associated with certain investments, and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures, and actual results could differ from these estimates.

Payment of Benefits: Benefits are recorded by the Plan when paid.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

(Continued)

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Fully Benefit-Responsive Investment Contracts: While Plan investments are presented at fair value in the statement of net assets available for benefits, any material difference between the fair value of the Plan's direct and indirect interests in fully benefit-responsive investment contracts and their contract value is presented as an adjustment line in the statement of net assets available for benefits, because contract value is the relevant measurement attribute for that portion of the Plan's net assets available for benefits. Contract value represents contributions made to a contract, plus earnings, less participant withdrawals and administrative expenses. Participants in fully benefit-responsive contracts may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The Plan holds an indirect interest in such contracts through its investment in a stable value collective trust fund.

NOTE 3 - FAIR VALUE MEASUREMENTS

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs when measuring fair value. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurements) and gives the lowest priority to unobservable inputs (Level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

> Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.
>
> Level 2: Significant other observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.
>
> Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

Mutual funds: The fair values of mutual fund investments are determined by obtaining quoted prices on nationally recognized securities exchanges (Level 1 inputs).

Stable value collective trust fund: The fair values of participation units in stable value collective trust fund are based upon the net asset values of such fund, after adjustments to reflect all fund investments at fair value, including direct and indirect interests in fully benefit-responsive contracts, as reported in the audited financial statements of the fund (Level 2 inputs). The investment objective of the collective trust

(Continued)

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

fund is to seek the preservation of capital, and to provide a competitive level of income over time consistent with the preservation of capital. To achieve its investment objective, the fund invests in conventional and synthetic investment contracts issued by insurance companies, banks, and other financial institutions, debt obligations issued or guaranteed by the U.S. government, U.S government agencies or U.S. government-sponsored corporations or agencies, and other similar fixed income securities. The fund provides for daily redemptions by the Plan at reported net asset value per share, with no advance notification requirements.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Investments measured at fair value on a recurring basis are summarized below:

	Investment Assets at Fair Value on a Recurring Basis As of December 31, 2012		
	Level 1	Level 2	Level 3
Investments			
Mutual funds			
Diversified emerging markets	$ 1,538,869	$ -	$ -
Foreign large blend	1,292,594	-	-
Foreign small/mid growth	741,978	-	-
High-yield bonds	940,808	-	-
Intermediate-term bond	2,526,447	-	-
Large blend	1,668,891	-	-
Large growth	3,804,738	-	-
Large value	2,234,945	-	-
Mid-cap blend	3,046,988	-	-
Mid-cap growth	888,129	-	-
Mid-cap value	184,937	-	-
Moderate allocation	884,558	-	-
Real estate	198,802	-	-
Retirement income	833,087	-	-
Short Government	238	-	-
Small blend	789,032	-	-
Small Growth	9,349	-	-
Small Value	82,917	-	-
Small-Cap Blend	416	-	-
Target date 2000-2010	82,352	-	-
Target date 2011-2015	29,162	-	-
Target date 2016-2020	1,683,934	-	-
Target date 2021-2025	710,368	-	-
Target date 2026-2030	1,089,296	-	-
Target date 2031-2035	242,149	-	-
Target date 2036-2040	320,746	-	-
Target date 2041-2045	124,487	-	-
Target date 2046-2050	267,168	-	-
Target date 2051+	26,286	-	-
World bond	317,242	-	-
World stock	2,069,284	-	-
Collective trusts-Stable value fund	-	5,126,391	-
	$ 28,630,197	$ 5,126,391	$ -

(Continued)

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

	Investment Assets at Fair Value on a Recurring Basis As of December 31, 2011		
	Level 1	Level 2	Level 3
Investments			
Mutual funds			
Diversified emerging markets	$ 1,148,763	$ -	$ -
Foreign large blend	1,321,754	-	-
Foreign small/mid growth	835,432	-	-
High-yield bonds	695,325	-	-
Intermediate-term bond	1,965,113	-	-
Large blend	1,107,496	-	-
Large growth	3,548,302	-	-
Large value	1,901,880	-	-
Mid-cap blend	2,485,455	-	-
Mid-cap growth	1,017,665	-	-
Mid-cap value	100,185	-	-
Moderate allocation	774,711	-	-
Real estate	114,919	-	-
Retirement income	823,291	-	-
Small blend	775,943	-	-
Target date 2000-2010	60,542	-	-
Target date 2011-2015	25,930	-	-
Target date 2016-2020	1,327,899	-	-
Target date 2021-2025	386,031	-	-
Target date 2026-2030	620,053	-	-
Target date 2031-2035	154,020	-	-
Target date 2036-2040	189,874	-	-
Target date 2041-2045	70,026	-	-
Target date 2050+	101,839	-	-
World bond	368,145	-	-
World stock	1,826,146	-	-
Collective trusts			
Stable value fund	-	4,980,535	-
	$ 23,746,739	$ 4,980,535	$ -

There were no significant transfers between Level 1 and Level 2 in 2012 or 2011.

NOTE 4 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Management Trust Company, the trustee of the Plan. This information has not been audited by independent accountants.

(Continued)

NOTE 4 - UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLE FROM PARTICIPANTS (Continued)

The following table presents the fair values of investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	2012	2011
Investments at fair value:		
Mutual funds		
PIMCO Total Return Administration	$ 2,526,447	$ 1,965,113
Mainstay Large Cap Growth	2,721,168	2,482,024
T. Rowe Price Equity Income Fund	1,999,563	1,775,839
Oppenheimer Global Fund	2,069,284	1,826,146
Fidelity Low-Priced Stock Fund	2,795,526	2,485,455
Collective trusts		
Fidelity Managed Income Portfolio		
(Contract values: 2012 - $4,979,687; 2011 - $4,857,696)	$ 5,126,391	$ 4,980,535

The Plan trustee has also certified that the net appreciation of mutual fund investments (including gains and losses on investments bought and sold, as well as held, during the year) was $2,863,848 in 2012.

Interest and dividend income, excluding interest income on notes receivable from participants, was $924,933 during 2012.

NOTE 5 - TAX STATUS

The Internal Revenue Service issued an opinion letter dated March 31, 2008 indicating that the prototype adopted by the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code. Although the Plan has been amended from the original prototype document, Plan management believes that the Plan is currently being operated in accordance with the Internal Revenue Code.

NOTE 6 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain investments are managed and administered by Fidelity Management Trust Company, the trustee, and Fidelity Investments, an affiliate of Fidelity Management Trust Company. Therefore, these investments are considered party-in-interest transactions. Administrative expenses of $9,580 were paid to the trustee of the Plan during 2012. Certain other professional fees for the administration and audit of the Plan were paid by the Company. Notes receivable from participants are also considered party-in-interest transactions.

(Continued)

NOTE 7 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	2012	2011
Net assets available for benefits per the financial statements	$ 35,002,029	$ 30,054,210
Participant contributions receivable	(56,467)	(46,663)
Employer contributions receivable	(40,050)	(18,704)
Plan transfer	10,035,236	-
Difference between fair value and contract value of stable value fund	146,704	122,839
Rounding adjustment	(1)	-
Net assets per the Form 5500	$ 45,087,451	$ 30,111,682

The following is a reconciliation of the net change in assets available for plan benefits for the year ended December 31, 2012 per the financial statements to net income per the Form 5500:

Increase in net assets available for benefits per the financial statements	$ 4,947,819
Participant contributions	(9,804)
Employer contributions	(21,346)
Change in difference between fair value and contract value of stable value fund	23,865
Rounding adjustment	(2)
Net income per the Form 5500	$ 4,940,532

NOTE 8 - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 15, 2013, which is the date the financial statements were available to be issued.

Effective January 1, 2013, the following plans of related employers were merged into the Plan: My Company's 401(k) Savings Plan (former plan sponsor was Ruger Chemical Co., Inc.) and Lipo Chemicals Inc. 401(k) Profit Sharing Plan and Trust, and related assets were transferred into the Plan. Furthermore, the Plan was amended effective January 1, 2013 to change the following provisions:

- Definition of compensation was modified to exclude the value of restricted stock and certain stock options, as well as severance pay received prior to termination of employment;
- Non-discretionary matching employer contribution for the participants hired prior to February 12, 2010 was eliminated. Effective January 1, 2013, all Plan participants are eligible for a discretionary employer matching contribution not to exceed three percent of compensation;
- Non-elective employer contribution for employees hired prior to February 12, 2010 was eliminated.
- Effective January 1, 2013, all participants are to receive non-elective employer contribution based on a discretionary formula; and
- Vesting provisions for non-elective and matching employer contributions changed to a 6-year graded schedule. In addition, participants in the Vantage Specialty Chemicals 401(k) and Profit Sharing Plan became 100% vested in discretionary match and discretionary profit sharing employer contributions.

SUPPLEMENTAL SCHEDULE

Name of Plan Sponsor: Vantage Oleochemicals, Inc.
Employer Identification Number: 26-2518277
Three-Digit Plan Number: 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[1]	(e) Current Value
		Mutual Funds		
	Allianz	Allianz NFJ Dividend Value Admin		$ 221,115
	American Century	American Century Income & Growth Institutional		14,267
	American Funds	American Funds Euro Pacific Growth R4		79
	American Funds	American Funds Euro Pacific Growth R5		82,560
	BlackRock Municipal	BlackRock Small Cap Growth Equity Inv A		9,349
*	Fidelity Investments	Fidelity Balanced		856,020
*	Fidelity Investments	Fidelity Capital and Income		940,808
*	Fidelity Investments	Fidelity Freedom 2000		27,907
*	Fidelity Investments	Fidelity Freedom 2005		26,466
*	Fidelity Investments	Fidelity Freedom 2010		27,979
*	Fidelity Investments	Fidelity Freedom 2015		29,162
*	Fidelity Investments	Fidelity Freedom 2020		1,683,934
*	Fidelity Investments	Fidelity Freedom 2025		710,368
*	Fidelity Investments	Fidelity Freedom 2030		1,089,296
*	Fidelity Investments	Fidelity Freedom 2035		242,149
*	Fidelity Investments	Fidelity Freedom 2040		320,746
*	Fidelity Investments	Fidelity Freedom 2045		124,487
*	Fidelity Investments	Fidelity Freedom 2050		9
*	Fidelity Freedom	Fidelity Freedom Income		833,087
*	Fidelity Investments	Fidelity Freedom K 2050		267,159
*	Fidelity Investments	Fidelity Freedom K 2055		26,286
*	Fidelity Investments	Fidelity International Discovery		1,209,955
*	Fidelity Investments	Fidelity Low-Priced Stock		2,795,526
*	Fidelity Investments	Fidelity Magellan		1,083,570
*	Fidelity Investments	Fidelity Real Estate Income		198,802
*	Fidelity Investments	Fidelity Spartan 500 Index		1,431,927
*	Fidelity Investments	Fidelity Spartan Mid-Cap Index Advantage		251,462
*	Fidelity Investments	Fidelity Spartan Small-Cap Index Advantage		416
	Franklin Managed Trust	Franklin Rising Dividends		79,920
	Janus Capital Group	Janus Balanced T		28,538
	Mainstay	Mainstay Large Cap Growth Fund		2,721,168
	Manning & Napier	Manning & Napier Pro-Blend Max Term		157,044
	Morgan Stanley	Morgan Stanley Inst Mid-Cap Growth		888,129
	Oppenheimer	Oppenheimer Developing Markets Fund		1,538,869
	Oppenheimer	Oppenheimer Global Fund		2,069,284
	Oppenheimer	Oppenheimer International Bond Fund		317,242
	Oppenheimer	Oppenheimer International Small Co. Fund		741,978
	PIMCO	PIMCO Total Return Institutional Class		2,526,447
	Principal Global Investors	Principal LifeTime Strategic Income R3 Fund		3,953
	Principal Global Investors	Principal LifeTime 2010 R3 Fund		10,752
	Principal Global Investors	Principal LifeTime 2020 R3 Fund		20,173
	Principal Global Investors	Principal LifeTime 2030 R3 Fund		25,548
	Principal Global Investors	Principal LifeTime 2040 R3 Fund		7,472
	Principal Global Investors	Principal LifeTime 2050 R3 Fund		1,473
	RidgeWorth	RidgeWorth Mid-Cap Value Equity Fund		184,937

(Continued)
See report of independent auditors.

Name of plan sponsor: Vantage Oleochemicals, Inc.
Employer identification: 26-2518277
Three-digit plan number: 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[1]	(e) Current Value
		Mutual Funds (Continued)		
	Royce Fund	Royce Opportunity Institutional		$ 82,917
	T. Rowe Price	T. Rowe Price Equity Income Fund		1,999,563
	Vanguard	Vanguard Short-Term Treasury Adm		237
	Wells Fargo	Wells Fargo Advantage Small Cap Value		789,032
				28,699,567
		Collective Trust		
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio		5,126,391
		Group Annuity Contract		
*	Principal Life Insurance Company	Principal Fixed Income Option 401(a)/(k)		1,823,543
		Notes Receivable		
*	Notes receivable from participants	Interest between 4.25% and 9.25%, maturing through 2030		1,442,779
				$ 37,092,280

[1] Cost information not required for participant-directed investments.
* Party-in-interest.