Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2002

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

A & A MAINTENANCE ENTERPRISE, INC.

965 MIDLAND AVE
YONKERS, NY 10704

2b Employer Identification Number (EIN)
13-3149505

2c Sponsor's telephone number
914-969-0009

2d Business code (see instructions)
561720

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	ARMANDO RODRIGUEZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2013	ARMANDO RODRIGUEZ
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

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

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	761
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**	1077
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	3
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1080
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	1080
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1077
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE, INC.

D Employer Identification Number (EIN)
13-3149505

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions

Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier

HARTFORD LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0974148	88072	GA-807267	1077	01/01/2012	12/31/2012

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
598	0

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

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

CADARET GRANT & CO INC
200 VALLEY ROAD STE 106
MOUNT ARLINGTON, NJ 07856

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
598			3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	0
5	Current value of plan's interest under this contract in separate accounts at year end	5	401245

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

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

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

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance

e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug

i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract

m ☐ Other (specify) ▶

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

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

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE, INC.

D Employer Identification Number (EIN)
13-3149505

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

HARTFORD LIFE INSURANCE COMPANY

06-0974148

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 23 37 38 49 50 54 55 56 59 60 62 63 64 65 66	NONE	2192	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?
67 99			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MORNINGSTAR ASSOCIATES,LLC

36-4317381

(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?
49	NONE	0	Yes [X] No [ ]	Yes [ ] No [X]	19	Yes [ ] No [X]

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
HARTFORD LIFE INSURANCE COMPANY	15 23 37 38 49 50 54 55 56 59 60 62 63 64 65 66 67 99	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.
SEE ATTACHED 06-0974148	SEE ATTACHED

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MORNINGSTAR ASSOCIATES,LLC	49	19

(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.
HARTFORD LIFE INSURANCE COMPANY 06-0974148	SEE ATTACHED

(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

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(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: PUGLISI, MOORE AND CO., LTD	**b** EIN: 13-4157966	
c Position: AUDITOR		
d Address: 135 BEDFORD ROAD ARMONK, NY 10504	**e** Telephone: 914-273-8300	

Explanation: DIFFERENT ENGAGEMENT PARTNER

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
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE, INC.

D Employer Identification Number (EIN)
13-3149505

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: HARTFORD ADVANTAGE TK

b Name of sponsor of entity listed in (a): HARTFORD LIFE INSURANCE 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)
06-0974148-000	P	336365

a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT K

b Name of sponsor of entity listed in (a): HARTFORD LIFE INSURANCE 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)
06-0974148-000	P	64880

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
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE, INC.

D Employer Identification Number (EIN)
13-3149505

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(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)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	0
(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)	47208	46730
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(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)	286390	401245
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	333598	447975
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	333598	447975

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)	41127	
(B) Participants	2a(1)(B)	51366	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		92493
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(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)	1206	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1206
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		34347
(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)		0
c Other income	2c		269
d Total income. Add all **income** amounts in column (b) and enter total	2d		128315
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	11746	
(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)		11746
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
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)	2192	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2192
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		13938
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		114377
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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: PMG PROFESSIONAL GROUP, LLP **(2)** EIN: 46-2336730

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		100000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

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

A Name of plan
A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
A & A MAINTENANCE ENTERPRISE, INC.

D Employer Identification Number (EIN)
13-3149505

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**

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): 06-0974148

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** 0

b Enter the amount contributed by the employer to the plan for this plan year **6b** 0

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** 0

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):

A & A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE

December 31, 2012

A & A MAINTENANCE ENTERPRISE, INC. 401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
December 31, 2012

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PMG
Professional Group, LLP

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
A & A Maintenance Enterprise, Inc. 401(k) Plan and Trust

Report on the Financial Statement
We were engaged to audit the accompanying financial statements of A & A Maintenance Enterprise, Inc. 401(k) Plan and Trust, which comprise the statement of net assets available for benefits as of December 31, 2012, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

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

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

Basis for Disclaimer of Opinion
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Hartford Life Insurance Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the custodian as of and for the year ended December 31, 2012, that the information provided to the plan administrator by the custodian is complete and accurate.

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Disclaimer of Opinion
Because of the significance of the matters 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 the financial statements referred to in the first paragraph.

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

Report on Form and Content in Compliance with DOL Rules and Regulations
The form and content of the information included in the 2012 financial statements and supplemental schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with the 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.

Other Matter - 2011 Financial Statements
The financial statements of the Plan as of December 31, 2011, were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Hartford Life Insurance Company, the custodian of the Plan. Their report, dated October 15, 2012, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the custodian, were 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.

PMG Professional Group, LLP

Armonk, New York
October 14, 2013

A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2012

	2012	2011
Assets		
Investments (at fair value)	$ 401,245	$ 286,390
Receivables		
Notes receivable from participants	46,730	47,208
Total assets	447,975	333,598
Liabilities	-	-
Net assets available for benefits	$ 447,975	$ 333,598

See accompanying notes to financial statements.

A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2012

Additions		
Additions to net assets attributed to:		
Investment income		
Net investment gain from pooled separate accounts	$	34,616
Interest income on notes receivable from participants		1,206
Contributions		
Participants		51,366
Employer		41,127
		92,493
Total additions		128,315
Deductions		
Deductions from net assets attributed to:		
Benefits paid to participants		11,746
Administrative expenses		2,192
Total deductions		13,938
Net increase		114,377
Net assets available for benefits		
Beginning of year		333,598
End of year	$	447,975

See accompanying notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 1 - Description of plan

The following description of the A & A Maintenance Enterprise, Inc. (the "Company") 401(k) Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions. The Plan was restated on January 1, 2012 and January 31, 2011 and it had an original effective date of January 1, 2002.

General and eligibility

The Plan is a defined contribution plan covering all full-time employees of the Company who are not covered by a collective bargaining agreement or nonresident aliens and who have at least 3 months of service and are age 21 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, participants may elect to have a percentage or dollar amount deducted on a pretax basis from their compensation or make catch-up contributions up to the maximum allowable under the Internal Revenue Code (IRC). Participants may elect to suspend their contributions or change their designation as pre-tax based on the terms of the Plan documents as prescribed by the administrator. Additionally, a paid bonus contribution election is available, subject to certain limits. Participants may also contribute amounts representing distributions from certain other retirement plans or annuities based on the Plan documents. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers various equity funds as investment options for participants. Contributions are subject to certain limitations.

Safe harbor matching contributions are made by the Company each payroll period equal to (1) 100% of the employee's 401(k) contributions up to 3% of the employee's compensation and (2) 50% of the amount of the employee's 401(k) contributions that exceed 3% but do not exceed 5% of the employee's compensation. Qualified nonelective contributions may be made at the option of the Company. Additionally, a discretionary nonelective contributions may be made at the option of the Company based on a ratio of the participant's compensation and the Company can designate a portion of such contributions as qualified nonelective contributions. The Company's contributions are invested according to the participant's investments options.

Participant's accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution, if any, and (b) Plan earnings (losses), and charged with 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.

Note 1 - Description of plan (continued)

Vesting

Participants are immediately vested in their contributions, matching safe harbor contributions, and qualified nonelective contributions, plus actual earnings thereon. Vesting in the Company's nonelective contribution portion of their accounts is based on years of continuous service. A participant is 100% vested after six years of credited service or upon normal retirement age A participant's vesting percentage increases to 100% if, while employed with the Company, the employee dies or becomes disabled.

Notes receivables from participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to 50% of their vested account balance, reduced by any outstanding loans. The loans are secured by the balance in the participant's account and bear interest rates that are commensurate with local prevailing rates as determined by the plan administrator. Principal and interest is paid ratably through payroll deductions.

Payment of benefits

Benefit payments are paid in a single sum or in minimum required distributions. Participants may withdraw their nonelective contributions after 60 months of participation in the Plan and after reaching age 59 1/2. Participants may receive hardship withdrawals from their pre-tax contributions based on the terms of the Plan document. Distribution to beneficiary of participant who dies before their required beginning date will be made either; (1) in full within 5 years of the participant's death or (2) in installments over the beneficiary's life expectancy, as elected by the participant or the beneficiary.

Forfeited accounts

At December 31, 2012, forfeited non-vested accounts totaled none. These accounts, if any, will be used to reduce future employer contributions.

Note 2 - Summary of significant accounting policies

Date of management's review

Subsequent events were evaluated through October 14, 2013, which is the date the financial statements were available to be issued.

Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Basis of accounting

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

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participants' loans are reclassified as distributions based on the terms on the Plan document.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

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 includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of benefits

Benefits are recorded when paid.

Operating expenses

All expenses of maintaining the Plan are paid by the Company.

Note 3 - Fair value measurements

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

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 or 3 inputs were available to the Plan.

Level 1 fair value measurements

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

The following table sets forth, which are Level 1 within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2012:

Mutual funds		
U.S. equity funds	$	380,770
Bond funds		11,282
International equity funds		9,193
Total assets at fair value	$	401,245

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 4 - Information prepared and certified by custodian

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by the custodian as of December 31, 2012.

Investments, at fair value:		
American Funds Income FD of America R3	$	206,995
Col Seligman Communications and Info A		11,072
Blackrock Lifepath 2040 A		4,928
Invesco Real Estate E		17,215
American Funds Cap Wld Gr Inc R3		3,265
Alger Cap Apprec Inst I		3,998
Lord Abbett Value Opps A		14,712
Victory Special Value A		15,396
Invesco Small Cap Disovery A		22,147
MFS Utilities		3,471
American Funds Bond Fund of Amer R3		10,216
Janus Overseas S		6,727
Davis Financial A		16,223
Hartford Life Global Research Fund		2,466
Hartford Life Healthcare HLS 1B		256
Hartford Life Growth Opps HLS 1B		16,802
Hartford Life Money Mkt HLS 1B		40,624
Hartford Life Value HLS 1b		3,666
Hartford Life Total Return Bond HLS 1B		1,066
Total	$	401,245

Note 5 - Investments

The following presents investments that represent five percent (5%) or more of the Plan's net assets.

Investments:		
American Funds Capital Income	$	206,995
Hartford Money Market		40,624
Invesco Small Cap		22,148

During 2012, the Plan's mutual fund investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $34,616.

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 6 - Related party transactions

Certain Plan investments are shares of mutual funds managed by Hartford Life Insurance Company (Hartford). Hartford is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the administrative services amounted to $2,192.

Additionally, Cadaret Grant & Co. Inc. (Cadaret) is a third party administrator as defined by the Plan. Commission fees paid to Cadaret amounted to $598.

These party-in-interest transactions are exempt from prohibited transactions rules of ERISA.

Note 7 - Plan termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of a Plan termination, participants will become 100% vested in their employer accounts.

Note 8 - Reconciliation of financial statements to Schedule H of Form 5500

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

Net assets available for benefits per the financial statements	$ 447,975
Net assets available for benefits per Schedule H of Form 5500	$ 447,975

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2012 to Schedule H of Form 5500:

Benefits paid to participants per the financial statements	$ 11,746
Benefits paid to participants per Schedule H of Form 5500	$ 11,746

Amounts allocated to withdrawing participants are recorded on the Schedule H of Form 5500 for benefit claims that have been processed and approved for payment prior to December 31.

Note 9 - Tax status

The Plan (and trust established under the Plan) obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is a qualified and the related trust is tax-exempt.

The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2006 and the United States Department of Labor is no longer subject to examine any financial statements prior to 2006.

Note 10 - Risks and uncertainties

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

Note 11 - Employer contributions

The Company made safe harbor matching contributions of $41,127.

A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

SUPPLEMENTAL SCHEDULE
Year Ended December 31, 2012

EIN: 13-3149505 / PN: 001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)

(a)	(b Identity of issuer, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest collateral, par or maturity value	(d Cost	(e) Current value
	American Funds	Income FD of America R3	N/A	$ 206,995
	Columbia Seligman	Communications and Info A	N/A	11,072
	Blackrock	Lifepath 2040A	N/A	4,928
	Invesco	Real Estate E	N/A	17,215
	American Funds	Cap Wld Gr Inc R3	N/A	3,265
	Alger	Capital Apprec Inst I	N/A	3,998
	Lord Abbot	Value Opps A	N/A	14,712
	Victory	Special Value A	N/A	15,396
	Invesco	Small Cap Discovery A	N/A	22,147
	MFS	Utilities	N/A	3,471
	American Funds	Bond Fund of Amer R3	N/A	10,216
	Janus	Overseas S	N/A	6,727
	Davis	Financial A	N/A	16,223
*	Hartford Life Insurance Co.	Global Research Fund	N/A	2,466
*	Hartford Life Insurance Co.	Healthcare HLS 1B	N/A	256
*	Hartford Life Insurance Co.	Growth Opps HLS 1B	N/A	16,802
*	Hartford Life Insurance Co.	Money Mkt HLS IB	N/A	40,624
*	Hartford Life Insurance Co.	Vaue HLS 1B	N/A	3,666
*	Hartford Life Insurance Co.	Total Return Bond HLS 1B	N/A	1,066
				401,245
	Participant loans	Interest rates range from 3.25% to 5%		46,730
				$ 447,975

(a) An asterisk is placed in this column on the line of each identified person known to be a related party-in-interest.
N/A - Cost is not applicable as these are participant directed investments.

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

Plan Name A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST **EIN:** 13-3149505
Plan Sponsor's Name A & A MAINTENANCE ENTERPRISE, INC. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	American Funds	Income FD of America R3	0	206,995
	Columbia Seligman	Communications and Info A	0	11,072
	Blackrock	Lifepath 2040 A	0	4,928
	Invesco	Real Estate E	0	17,215
	American Funds	Cap Wld Gr Inc R3	0	3,265
	Alger	Capital Apprec Inst I	0	3,998
	Lord Abbott	Value Opps A	0	14,712

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

Plan Name A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST **EIN:** 13-3149505
Plan Sponsor's Name A & A MAINTENANCE ENTERPRISE, INC. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Victory	Special Value A	0	15,396
	Invesco	Small Cap Discovery A	0	22,147
	MFS	Utilities	0	3,471
	American Funds	Bond Fund of Amer R3	0	10,216
	Janus	Overseas S	0	6,727
	Davis	Financial A	0	16,223
*	Hartford Life	Global Research HLS 1B	0	2,466

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

Plan Name A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST **EIN:** 13-3149505
Plan Sponsor's Name A & A MAINTENANCE ENTERPRISE, INC. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	Hartford Life	Healthcare HLS 1B	0	256
*	Hartford Life	Growth Opps HLS 1B	0	16,802
*	Hartford Life	Money Mkt HLS 1B	0	40,624
*	Hartford Life	Total Return Bond HLS 1B	0	1,066
*	Hartford Life	Value HLS 1B	0	3,666
	Participart Loans	Range of Interest Rates Rates range from 3.25% to 5%	0	46,730

A & A MAINTENANCE ENTERPRISE, INC.
401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE

December 31, 2012

A & A MAINTENANCE ENTERPRISE, INC. 401(k) PLAN AND TRUST

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULE
December 31, 2012

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PMG
Professional Group, LLP

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
A & A Maintenance Enterprise, Inc. 401(k) Plan and Trust

Report on the Financial Statement
We were engaged to audit the accompanying financial statements of A & A Maintenance Enterprise, Inc. 401(k) Plan and Trust, which comprise the statement of net assets available for benefits as of December 31, 2012, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

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

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

Basis for Disclaimer of Opinion
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Hartford Life Insurance Company, the custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the custodian as of and for the year ended December 31, 2012, that the information provided to the plan administrator by the custodian is complete and accurate.

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Disclaimer of Opinion
Because of the significance of the matters 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 the financial statements referred to in the first paragraph.

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

Report on Form and Content in Compliance with DOL Rules and Regulations
The form and content of the information included in the 2012 financial statements and supplemental schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with the 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.

Other Matter - 2011 Financial Statements
The financial statements of the Plan as of December 31, 2011, were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Hartford Life Insurance Company, the custodian of the Plan. Their report, dated October 15, 2012, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the custodian, were 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.

PMG Professional Group, LLP

Armonk, New York
October 14, 2013

A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2012

	2012	2011
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Investments (at fair value)	$ 401,245	$ 286,390
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A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2012

Additions		
Additions to net assets attributed to:		
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Net investment gain from pooled separate accounts	$	34,616
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Contributions		
Participants		51,366
Employer		41,127
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Total additions		128,315
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Deductions from net assets attributed to:		
Benefits paid to participants		11,746
Administrative expenses		2,192
Total deductions		13,938
Net increase		114,377
Net assets available for benefits		
Beginning of year		333,598
End of year	$	447,975

See accompanying notes to financial statements.

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 1 - Description of plan

The following description of the A & A Maintenance Enterprise, Inc. (the "Company") 401(k) Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions. The Plan was restated on January 1, 2012 and January 31, 2011 and it had an original effective date of January 1, 2002.

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Contributions

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Participant's accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution, if any, and (b) Plan earnings (losses), and charged with 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.

Note 1 - Description of plan (continued)

Vesting

Participants are immediately vested in their contributions, matching safe harbor contributions, and qualified nonelective contributions, plus actual earnings thereon. Vesting in the Company's nonelective contribution portion of their accounts is based on years of continuous service. A participant is 100% vested after six years of credited service or upon normal retirement age A participant's vesting percentage increases to 100% if, while employed with the Company, the employee dies or becomes disabled.

Notes receivables from participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to 50% of their vested account balance, reduced by any outstanding loans. The loans are secured by the balance in the participant's account and bear interest rates that are commensurate with local prevailing rates as determined by the plan administrator. Principal and interest is paid ratably through payroll deductions.

Payment of benefits

Benefit payments are paid in a single sum or in minimum required distributions. Participants may withdraw their nonelective contributions after 60 months of participation in the Plan and after reaching age 59 1/2. Participants may receive hardship withdrawals from their pre-tax contributions based on the terms of the Plan document. Distribution to beneficiary of participant who dies before their required beginning date will be made either; (1) in full within 5 years of the participant's death or (2) in installments over the beneficiary's life expectancy, as elected by the participant or the beneficiary.

Forfeited accounts

At December 31, 2012, forfeited non-vested accounts totaled none. These accounts, if any, will be used to reduce future employer contributions.

Note 2 - Summary of significant accounting policies

Date of management's review

Subsequent events were evaluated through October 14, 2013, which is the date the financial statements were available to be issued.

Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Basis of accounting

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

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participants' loans are reclassified as distributions based on the terms on the Plan document.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

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 includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of benefits

Benefits are recorded when paid.

Operating expenses

All expenses of maintaining the Plan are paid by the Company.

Note 3 - Fair value measurements

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

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. No Level 2 or 3 inputs were available to the Plan.

Level 1 fair value measurements

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

The following table sets forth, which are Level 1 within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2012:

Mutual funds		
U.S. equity funds	$	380,770
Bond funds		11,282
International equity funds		9,193
Total assets at fair value	$	401,245

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 4 - Information prepared and certified by custodian

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by the custodian as of December 31, 2012.

Investments, at fair value:		
American Funds Income FD of America R3	$	206,995
Col Seligman Communications and Info A		11,072
Blackrock Lifepath 2040 A		4,928
Invesco Real Estate E		17,215
American Funds Cap Wld Gr Inc R3		3,265
Alger Cap Apprec Inst I		3,998
Lord Abbett Value Opps A		14,712
Victory Special Value A		15,396
Invesco Small Cap Disovery A		22,147
MFS Utilities		3,471
American Funds Bond Fund of Amer R3		10,216
Janus Overseas S		6,727
Davis Financial A		16,223
Hartford Life Global Research Fund		2,466
Hartford Life Healthcare HLS 1B		256
Hartford Life Growth Opps HLS 1B		16,802
Hartford Life Money Mkt HLS 1B		40,624
Hartford Life Value HLS 1b		3,666
Hartford Life Total Return Bond HLS 1B		1,066
Total	$	401,245

Note 5 - Investments

The following presents investments that represent five percent (5%) or more of the Plan's net assets.

Investments:		
American Funds Capital Income	$	206,995
Hartford Money Market		40,624
Invesco Small Cap		22,148

During 2012, the Plan's mutual fund investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $34,616.

NOTES TO FINANCIAL STATEMENTS
December 31, 2012

Note 6 - Related party transactions

Certain Plan investments are shares of mutual funds managed by Hartford Life Insurance Company (Hartford). Hartford is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the administrative services amounted to $2,192.

Additionally, Cadaret Grant & Co. Inc. (Cadaret) is a third party administrator as defined by the Plan. Commission fees paid to Cadaret amounted to $598.

These party-in-interest transactions are exempt from prohibited transactions rules of ERISA.

Note 7 - Plan termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of a Plan termination, participants will become 100% vested in their employer accounts.

Note 8 - Reconciliation of financial statements to Schedule H of Form 5500

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

Net assets available for benefits per the financial statements	$ 447,975
Net assets available for benefits per Schedule H of Form 5500	$ 447,975

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2012 to Schedule H of Form 5500:

Benefits paid to participants per the financial statements	$ 11,746
Benefits paid to participants per Schedule H of Form 5500	$ 11,746

Amounts allocated to withdrawing participants are recorded on the Schedule H of Form 5500 for benefit claims that have been processed and approved for payment prior to December 31.

Note 9 - Tax status

The Plan (and trust established under the Plan) obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is a qualified and the related trust is tax-exempt.

The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2006 and the United States Department of Labor is no longer subject to examine any financial statements prior to 2006.

Note 10 - Risks and uncertainties

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

Note 11 - Employer contributions

The Company made safe harbor matching contributions of $41,127.

A & A MAINTENACE ENTERPRISE, INC. 401(k) PLAN AND TRUST

SUPPLEMENTAL SCHEDULE
Year Ended December 31, 2012

EIN: 13-3149505 / PN: 001

Schedule H, line 4i - Schedule of Assets (Held at End of Year)

(a)	(b Identity of issuer, borrower, lessor or similar party	(c) Description of investments including maturity date, rate of interest collateral, par or maturity value	(d Cost	(e) Current value
	American Funds	Income FD of America R3	N/A	$ 206,995
	Columbia Seligman	Communications and Info A	N/A	11,072
	Blackrock	Lifepath 2040A	N/A	4,928
	Invesco	Real Estate E	N/A	17,215
	American Funds	Cap Wld Gr Inc R3	N/A	3,265
	Alger	Capital Apprec Inst I	N/A	3,998
	Lord Abbot	Value Opps A	N/A	14,712
	Victory	Special Value A	N/A	15,396
	Invesco	Small Cap Discovery A	N/A	22,147
	MFS	Utilities	N/A	3,471
	American Funds	Bond Fund of Amer R3	N/A	10,216
	Janus	Overseas S	N/A	6,727
	Davis	Financial A	N/A	16,223
*	Hartford Life Insurance Co.	Global Research Fund	N/A	2,466
*	Hartford Life Insurance Co.	Healthcare HLS 1B	N/A	256
*	Hartford Life Insurance Co.	Growth Opps HLS 1B	N/A	16,802
*	Hartford Life Insurance Co.	Money Mkt HLS IB	N/A	40,624
*	Hartford Life Insurance Co.	Vaue HLS 1B	N/A	3,666
*	Hartford Life Insurance Co.	Total Return Bond HLS 1B	N/A	1,066
				401,245
	Participant loans	Interest rates range from 3.25% to 5%		46,730
				$ 447,975

(a) An asterisk is placed in this column on the line of each identified person known to be a related party-in-interest.
N/A - Cost is not applicable as these are participant directed investments.

A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST (THE "PLAN")
PLAN ID: 807267
As of **09/06/13**

IMPORTANT NOTICE

Plan and Investment-Related Information
Including Investment Option Performance History, Fees and Expenses

The following information is being provided to you by, or at the direction of, your Plan Fiduciary to help provide you with important disclosures and information regarding any Plan account you may maintain.

Please note that nothing in this Notice is intended to serve as a substitute for investment, fee and expense information that may be available to you in a summary plan description, prospectus, or in other disclosure materials. Before making any investment decisions regarding your account, you should review all information available to you and not rely solely upon the information contained in this Notice.

In addition, please be mindful that:

- **An investment's past performance is no guarantee of future results.**
- **To help achieve long-term retirement security, you should give careful consideration to the benefits of a well-balanced and diversified investment portfolio.**
- **Fees and expenses are only one of several factors you should consider when making investment decisions. For more information and an example demonstrating the long-term effect of fees and expenses, please visit:** http://www.dol.gov/ebsa/publications/401k_employee.html.

Please review this information carefully, and note that no other action on your part is required at this time. However, if you would like to enroll or make changes to your account, simply log-in to **www.thehartford.com/retirementplans/access** at any time, or call the Participant Service Center at **1-888-547-1405**. Representatives are available Monday through Friday, 8:00 a.m. – 8:00 p.m. Eastern Time.

Your Plan Sponsor can provide you with the following additional information regarding your Plan, upon your request:

- Copies of prospectuses (or any short-form or summary prospectuses, or similar documents) relating to your Plan's investment options.
- Copies of any financial statements or reports, such as statements of additional information, shareholder reports and similar materials relating to your Plan's investment options to the extent such materials are provided to the plan.
- A statement of the value of a share or unit of each investment option in your Plan, as well as the date of the valuation.
- A list of the assets comprising the portfolio of each investment option which constitute Plan assets and the value of each such asset (or the proportion of the investment which it comprises).

If you'd like any additional information or have any questions about this notice, please contact your Plan Sponsor. Contact information: A & A MAINTENANCE ENTERPRISE, INC. 401(K) PLAN AND TRUST, INC., 965 MIDLAND AVE, YONKERS NY 10704 1027.

GETTING STARTED

Below is a Notice Summary that will help you navigate the information provided in this document. An investment Glossary of Terms is available at the following website: **www.thehartford.com/retirementplans/access**

Notice Summary

Part I:

General Plan information, including:

- Your right to direct investments in your Plan account
- Restrictions that may apply to your investment direction
- Exercising voting, tender and other rights
- The Plan's investment options
- The Plan's administrative fees and expenses
- The Plan's individual fees and expenses

Part II:

Plan Investment Option Information, including, where applicable:

- The fees and expenses charged for each investment option in the Plan
- Historical and benchmark performance for any Plan variable return investment options
- Any restrictions applicable to any investment option
- Objectives/goals and pricing information for any Plan annuity options

PART I

GENERAL PLAN INFORMATION

Your right to direct investments in your Plan account

- You may direct your contributions into the investment options available through the Plan, subject to the terms of your Plan and the limitations and restrictions described in this notice. Please refer to your Summary Plan Description or contact your Plan Sponsor.

Restrictions that may apply to your investment direction

- You may change how contributions to your account are invested on any day the New York Stock Exchange is open for business, subject to the terms of your Plan and the limitations and restrictions described in this notice, including any restrictions described in the investment performance and fees section of this Notice. Please note that, if you initiate in excess of 20 exchanges among the investment options offered in the plan during a calendar year, you must submit any subsequent changes using the form provided by The Hartford. Note: the 20-exchange limit does not apply to Fund exchanges that occur automatically as part of an asset allocation or Dollar Cost Averaging program that operates pursuant to your plan's recordkeeping system. Reallocations made based on a Fund merger or liquidation also do not count toward this transfer limit. Additionally, changes your plan sponsor or other plan fiduciary make to your plan's Fund line-up do not count towards this transfer limit.

Exercising voting, tender and other rights

- Voting, Tender and Similar Rights - Generally, any voting, tender or similar rights regarding the investment options available through your Plan will be exercised by your Plan Sponsor, or your Plan Sponsor's designee. Certain exceptions may apply; if your Plan Sponsor, or its designee, receives materials relating to the exercise of voting, tender or similar rights that are passed through to you, the Plan presently intends to provide them to you. You will generally have the ability to exercise voting, tender or similar rights, regarding any investments in a self-directed brokerage account. If your plan offers Company Stock, you have the right to exercise any voting, tender or similar rights on company common stock credited to your Plan account. If applicable, you will receive proxy, tender or exchange materials along with further instructions, which you must follow in order to exercise any voting, tender or similar rights.

The Plan's investment options

- The Plan provides investment options into which you can direct your contributions. The investment performance and fees section of this document lists these investment options and provides information regarding each alternative. A copy of this document, including the chart comparing investment options, is available on the Web site or can be obtained by contacting your Plan Sponsor.

THE PLAN'S ADMINISTRATIVE FEES AND EXPENSES:

The Plan pays certain outside service providers for Plan administrative services, such as legal, trustee/custodial accounting and recordkeeping services. The funds for the payment of such service expenses may be deducted from individual Plan accounts, unless the Plan Sponsor elects, at its own discretion, to pay for some or all of the Plan's administrative service expenses through non-Plan assets. The cost for these expenses may vary from year to year and is based on a variety of factors.

THE PLAN'S ADMINISTRATIVE FEES AND EXPENSES (CONTINUED):

As of the date of these materials, the Plan administrative fees and expenses listed below may be deducted from Plan accounts as applicable. Your quarterly account statement will show any administrative fees charged to your account. To the extent that any other applicable Plan administrative expenses are not charged against forfeitures, paid by the employer, or reimbursed by a third party, the Plan may charge such expenses on a pro rata (i.e., based on the relative size of each participant account), or per capita basis (i.e., a flat fee assessed against each individual account).

Please note: The fees listed below are shown as full dollar amounts, as a percentage of your account balance, or, if applicable, as a dollar amount per each investment option you select. In addition, any applicable fee minimums or maximums associated with a particular charge will be displayed below. All fees and expenses are displayed as charges on an annualized basis (unless otherwise indicated below in the Charge Frequency column) and subject to change at any time. All fees actually deducted from your account during a particular Plan quarter will be reflected and identified on your Plan's quarterly account statement.

Please also note: In addition to the Plan Administrative Fee amounts listed below, some of the Plan's Administrative fees may have been paid through revenue sharing arrangements, maintained with one or more of the Plan's investment options in which you may be invested.

Type of Plan Administrative Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency	Allocation
PLAN MAINTENANCE FEE	$375.00	N/A	N/A	Flat Dollar per Plan	Quarterly	Per Capita
PARTICIPANT FEE	$5.00	N/A	N/A	Flat Dollar per Participant	Quarterly	

For further information or detail regarding any fees described as "Ad Hoc or miscellaneous fees" on your statement, you may contact the Participant Service Center or your plan sponsor.

THE PLAN'S INDIVIDUAL FEES AND EXPENSES:

The Plan assesses certain fees against individual participant accounts, rather than against the Plan as a whole, when individual participants initiate certain transactions or utilize certain plan services. These fees may arise from, among other items, a participant's use of a feature available under the Plan (e.g., participant loans, exercising withdrawal/distribution rights), the addition of a service (e.g., investment advice or brokerage window services), or the application of applicable law (e.g., processing a domestic relations order issued by a court). The following list includes the individual participant fees and expenses that could be charged to you, based on your usage. Your quarterly account statement will show any individual fees charged to your account. In addition, buying, selling or holding some investments may result in charges to an individual account, such as sales charges or redemption fees. For information regarding such investment-related fees and expenses, please refer to the investment performance and fees section of this Notice.

Please note: The fees listed below are shown as full dollar amounts, as a percentage of your account balance, or, if applicable, as a dollar amount per each investment option you select. In addition, any applicable fee minimums or maximums associated with a particular charge will be displayed below. All fees and expenses are displayed as charges on an annualized basis (unless otherwise indicated below in the Charge Frequency column) and subject to change at any time. All fees actually deducted from your account during a particular Plan quarter will be reflected and identified on your Plan's quarterly account statement.

THE PLAN'S INDIVIDUAL FEES AND EXPENSES (CONTINUED):

The Plan may impose service charges on individual accounts as follows:

Withdrawal/Distribution Fee

Described and listed below are any fees associated with taking a withdrawal or distribution from your Plan account.
Please refer to Plan Disclosure Statement in plan documents

Withdrawal/Distribution Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
None		N/A	N/A	Not Available	Not Available

Loan Fee

Described and listed below are any fees associated with taking a loan from your Plan account.
Loan Cancellation Fee $75.00 per ttranscaction
Loan Initiation Fee $50.00 per transcation
Please refer to Plan Disclosure Statement in plan documents

Loan Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
LOAN MAINTENANCE FEE	$4.00	N/A	N/A	Flat Dollar per Loan	Quarterly
LOAN INITIATION FEE	$50.00	N/A	N/A	Flat Dollar per Transaction	On-Request
LOAN CANCELLATION FEE	$75.00	N/A	N/A	Flat Dollar per Transaction	On-Request

Qualified Domestic Relations (QDRO) Fee

Described and listed below are any fees associated with the processing of any Domestic Relations Order (DRO) issued by a court with respect to the assets maintained in your Plan account. Please refer to the Plan Disclosure Statement in plan documents

Qualified Domestic Relations (QDRO) Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
None		N/A	N/A	Not Available	Not Available

Guidance and Advice Fee

Described and listed below are any fees associated with any investment guidance or investment advice services available through your Plan. Please refer to Plan Disclosure Statement in pan documents.

Guidance and Advice Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
None		N/A	N/A	Not Available	Not Available

Additional Guidance and Advice Fee Information: Please refer to Plan Disclosure Statement in pan documents

Managed Account Fee

Described and listed below are any fees associated with any investment management services available through your Plan. Please refer to Plan Disclosure Statement in pan documents

Managed Account Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
None		N/A	N/A	Not Available	Not Available

Additional Managed Account Fee Information: Please refer to Plan Disclosure Statement in pan documents

Other Fee

Described and listed below are any other fees associated with your Plan, its services and features.
Please refer to Plan Disclosure Statement provided in plan documents

Other Fee	Fee Amount/Percentage	Minimum	Maximum	Calculation Method	Charge Frequency
None		N/A	N/A	Not Available	Not Available

Additional Other Fee Information: Please refer to Plan Disclosure Statement in pan documents

For further information or detail regarding any fees described as "Ad Hoc or miscellaneous fees" on your statement, you may contact the Participant Service Center or your plan sponsor

PART II

YOUR PLAN'S INVESTMENT OPTIONS
07/31/13

INTRODUCTION:

The table appearing in Part II is intended to provide you with information regarding the investment options in your Plan, including information regarding investment performance history, fees and expenses, and any investment restrictions applicable as of the date of this material. For your Plan's variable return investment options, we have additionally provided benchmark information against which each investment option's performance can be compared.

Fees and expenses are among many factors to consider when you decide to invest in an option. You may also want to think about whether an investment in a particular option, along with your other investments, fits with your personal circumstances and will help you achieve your investment goals.

The performance data shown represents past performance and is no guarantee of future results. The investment return and principal value of an investment may fluctuate so that when shares/units are redeemed they may be worth more or less than their original cost. Current performance may vary from the performance data quoted.

You may obtain additional information about your Plan's investment options, including updated performance data, portfolio turnover rates, principal strategies, goals and objectives, and a glossary of commonly-used investment terms, by logging in to your Plan account at the following website: **www.thehartford.com/retirementplans/access.**

The cumulative effect of fees and expenses can substantially reduce the growth of your retirement Plan account. Visit the Department of Labor's Website for an example showing the long-term effect of fees and expenses at http://www.dol.gov/ebsa/publications/401k_employee.html.

To request additional information regarding your Plan, or to obtain a free paper copy of these materials or any Plan information provided online, please contact your Plan Sponsor.

VARIABLE RETURN INVESTMENT OPTIONS

The table below focuses on investment options that do not have a fixed or stated rate of return.

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

As of **07/31/13**

ASSET CLASS **Fund Name** **Morningstar Category** **Benchmark**	**Gross Annual Underlying Fund Expense Ratio**[1]	**Program and Administrative Charge**[2]	**Total Gross Annual Expense Ratio**[3]		**Investment Option Performance**[4]			**Inception Date**
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
STABLE VALUE/MONEY MARKET								
HARTFORD MONEY MARKET HLS IB	0.67%	1.25%	1.92%	$19.20	-1.25%	-1.14%	0.17%	06/30/80
Money Market-Taxable								
USTREAS T-Bill Auction Ave 3 Mon					0.08%	0.17%	1.68%	N/A

Fees and Restrictions:[6] **N/A**

Money market investments are not insured or guaranteed by the Federal Deposit Insurance Corporation (FDIC) or any other government agency. Although these investments seek to preserve their value at $1.00 per share, it is possible to lose money by investing in them. If a money market investment is pending liquidation under the U.S. Treasury Department's Guarantee Program, there may be a period of time in which assets cannot be invested or redeemed.

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
BOND								
AMERICAN FUNDS BND FD OF AMER R3	0.92%	1.25%	2.17%	$21.70	-2.79%	2.55%	2.44%	05/28/74
Intermediate-Term Bond								
Barclays US Govt/Credit 5-10 Yr TR USD					-2.06%	6.87%	5.82%	N/A
Fees and Restrictions:[6] N/A								
GOLDMANSACHS GOVERNMENT INCOME A	1.00%	1.25%	2.25%	$22.50	-3.91%	2.85%	2.74%	02/10/93
Intermediate Government								
Barclays US Government TR USD					-2.54%	4.26%	4.50%	N/A
Fees and Restrictions:[6] N/A								

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
BOND								
HARTFORD TOTAL RET BOND HLS IB	0.75%	1.25%	2.00%	$20.00	-2.47%	3.73%	3.06%	08/31/77
Intermediate-Term Bond								
Barclays US Govt/Credit 5-10 Yr TR USD					-2.06%	6.87%	5.82%	N/A
Fees and Restrictions:[6] N/A								
Corporate bonds, U.S. Treasury bills and U.S. government bonds will fluctuate in value, and the return of principal is not guaranteed if sold before maturity.								
ASSET ALLOCATION/BALANCED								
AMERICAN FUNDS INC FD OF AMER R3	0.96%	1.25%	2.21%	$22.10	13.48%	5.83%	6.20%	12/01/73
Moderate Allocation								
Morningstar Moderately Aggr Target Risk					18.38%	6.68%	8.58%	N/A
Fees and Restrictions:[6] N/A								

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
ASSET ALLOCATION/BALANCED								
BLACKROCK LIFEPATH 2020 A	1.39%	1.25%	2.64%	$26.40	7.00%	3.28%	4.43%	03/01/94
Target Date 2016-2020								
Morningstar Lifetime Moderate 2020					11.88%	6.43%	8.84%	N/A
Fees and Restrictions:[6] N/A								
BLACKROCK LIFEPATH 2030 A	1.41%	1.25%	2.66%	$26.60	10.41%	3.12%	4.70%	03/01/94
Target Date 2026-2030								
Morningstar Lifetime Moderate 2030					17.71%	6.53%	9.31%	N/A
Fees and Restrictions:[6] N/A								

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
ASSET ALLOCATION/BALANCED								
BLACKROCK LIFEPATH 2040 A	1.43%	1.25%	2.68%	$26.80	13.18%	2.90%	4.78%	03/01/94
Target Date 2036-2040								
Morningstar Lifetime Moderate 2040					20.67%	6.61%	9.55%	N/A
Fees and Restrictions:[6] N/A								
BLACKROCK LIFEPATH RETIREMENT A	1.38%	1.25%	2.63%	$26.30	3.85%	3.93%	3.88%	03/01/94
Retirement Income								
Morningstar Lifetime Moderate Income					5.98%	5.59%	6.99%	N/A
Fees and Restrictions:[6] N/A								

Asset Allocation doesn’t ensure a profit or protect against loss.

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
LARGE-CAP								
ALGER CAP APP INSTITUTIONAL I	1.19%	1.25%	2.44%	$24.40	20.76%	7.64%	9.16%	11/08/93
Large Growth								
Russell 1000 Growth TR USD					21.64%	9.01%	7.69%	N/A
Fees and Restrictions:[6] N/A								
THORNBURG VALUE R3	1.66%	1.25%	2.91%	$29.10	32.48%	3.45%	4.75%	10/02/95
Large Blend								
Russell 1000 TR USD					26.23%	8.49%	8.02%	N/A
Fees and Restrictions:[6] N/A								

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ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
LARGE-CAP								
HARTFORD GROWTH OPPS HLS IB	0.90%	1.25%	2.15%	$21.50	27.43%	4.37%	8.72%	03/24/87
Large Growth								
Russell 1000 Growth TR USD					21.64%	9.01%	7.69%	N/A
Fees and Restrictions:[6] N/A								
HARTFORD VALUE HLS IB	1.01%	1.25%	2.26%	$22.60	28.68%	6.91%	7.56%	04/30/01
Large Value								
Russell 1000 Value TR USD					30.73%	7.88%	8.20%	N/A
Fees and Restrictions:[6] N/A								

Stocks fluctuate in value and are subject to more risk than bonds or money market investments. Shares, when redeemed, may be worth more or less than their original cost.

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ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
MID-CAP								
VICTORY SPECIAL VALUE A	1.30%	1.25%	2.55%	$25.50	24.03%	1.86%	7.27%	12/03/93
Mid-Cap Blend								
Russell Mid Cap TR USD					32.37%	10.07%	10.91%	N/A
Fees and Restrictions:[6] N/A								
LORD ABBETT VALUE OPPS A	1.31%	1.25%	2.56%	$25.60	32.72%	9.37%	9.78%	12/30/05
Mid-Cap Blend								
Russell Mid Cap TR USD					32.37%	10.07%	7.83%	N/A
Fees and Restrictions:[6] N/A								

Mid-cap stocks generally have higher risk and reward characteristics than large company stocks.

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ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
SMALL-CAP								
INVESCO SMALL CAP DISCOVERY A	1.43%	1.25%	2.68%	$26.80	31.12%	6.37%	9.27%	11/27/00
Small Growth								
Russell 2000 Growth TR USD					35.39%	9.98%	9.62%	N/A
Fees and Restrictions:[6] **N/A**								
Small-cap stocks generally have higher risk and reward characteristics than large company stocks.								
INTERNATIONAL/GLOBAL								
AMERICAN FUNDS CAP WLD GR INC R3	1.10%	1.25%	2.35%	$23.50	20.71%	2.67%	8.40%	03/26/93
World Stock								
MSCI World NR USD					23.24%	4.27%	7.58%	N/A
Fees and Restrictions:[6] **N/A**								

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ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
INTERNATIONAL/GLOBAL								
THORNBURG INTERNATIONAL VALUE R3	1.60%	1.25%	2.85%	$28.50	13.81%	0.25%	8.32%	05/28/98
Foreign Large Growth								
MSCI EAFE Growth NR USD					22.16%	1.26%	7.97%	N/A
Fees and Restrictions:[6] N/A								
JANUS OVERSEAS S	1.01%	1.25%	2.26%	$22.60	15.17%	-4.24%	9.05%	05/02/94
Foreign Large Growth								
MSCI EAFE Growth NR USD					22.16%	1.26%	11.91%	N/A
Fees and Restrictions:[6] N/A								

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
INTERNATIONAL/GLOBAL								
HARTFORD GLOBAL RESEARCH HLS IB	1.29%	1.25%	2.54%	$25.40	24.31%	4.27%	2.88%	01/31/08
World Stock								
MSCI World NR USD					23.24%	4.27%	2.81%	N/A
Fees and Restrictions:[6] **N/A**								

Investments in international stocks involve risks associated with interest-rate and currency-exchange-rate changes as well as with market, economic, and political conditions of the countries where investments are made. There may be greater returns but also greater risks than with U.S. investments. International stocks fluctuate in value and may be worth more or less than their original cost.

SPECIALTY								
COL SELIGMN COMMUNICAT AND INF A	1.38%	1.25%	2.63%	$26.30	13.69%	6.95%	8.59%	06/23/83
Technology								
Morningstar SEC/Technology TR USD					14.89%	9.57%	8.22%	N/A
Fees and Restrictions:[6] **N/A**								

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ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
SPECIALTY								
INVESCO REAL ESTATE A	1.25%	1.25%	2.50%	$25.00	5.33%	4.85%	9.42%	12/31/96
Real Estate								
DJ US Select REIT TR USD					6.50%	6.53%	10.20%	N/A
Fees and Restrictions:[6] N/A								
MFS UTILITIES R3	1.02%	1.25%	2.27%	$22.70	19.18%	6.15%	12.84%	02/14/92
Utilities								
DJ Utilities Average TR USD					6.59%	5.21%	8.19%	N/A
Fees and Restrictions:[6] N/A								
DAVIS FINANCIAL A	0.91%	1.25%	2.16%	$21.60	26.14%	5.71%	4.82%	05/01/91
Financial								
DJ US Financial TR USD					38.18%	2.99%	1.82%	N/A
Fees and Restrictions:[6] N/A								

The performance data quoted represents past performance and does not guarantee future results. The investment return and principal value of an investment will fluctuate so that an investor's shares/units, when redeemed, may be worth more or less than their original cost. Please visit www.thehartford.com/retirementplans/access or call the participant service center at 1-888-547-1405 to obtain performance data current to the most recent month-end.

ASSET CLASS Fund Name Morningstar Category Benchmark	Gross Annual Underlying Fund Expense Ratio[1]	Program and Administrative Charge[2]	Total Gross Annual Expense Ratio[3]		Investment Option Performance[4]			Inception Date
			As a %	Per $1000 invested	Average Annual Return[5] 1 Yr.	5 Yr.	10 Yr./ Since Inception*	
SPECIALTY								
HARTFORD HEALTHCARE HLS IB	1.16%	1.25%	2.41%	$24.10	35.38%	10.10%	9.36%	05/01/00
Health								
DJ US Health Care TR USD					36.91%	12.82%	8.95%	N/A

Fees and Restrictions:[6] N/A

* Since inception return is used for funds fewer than 10 years old. The performance returns reflected in this chart are calculated to the inception date of the initial class of the fund. The performance returns reflected in this chart with respect to each benchmark investment are calculated to the inception date of the fund share class to which it is being compared.

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1 *With respect to mutual fund investment options, this expense ratio is presented as the total annual fund or class operating expenses, before waivers and reimbursements, that have been paid by the fund and stated as a percent of the fund's total net assets. With respect to investment options that are not mutual funds, the expense ratio is intended to present similar information, but may have been calculated using methodologies that differ from those used for mutual fund investment options. The Gross Annual Underlying Fund Expense Ratio presented here do not reflect the effect of the Program and Administrative Charge applicable to your Plan's Contract with The Hartford.*

2 A Program and Administrative Expense fee is deducted on the investment options in the Plan to cover administrative services under the Plan's contract with the Hartford.

3 If a Program and Administrative Charge is deducted on the investment options, the Total Gross Annual Expense Ratio is intended to reflect the effect of the Program and Administrative Charge applicable under your Plan's Contract with The Hartford by adding the charge to the Gross Annual Underlying Fund Expense Ratio for each applicable investment option.

4 If a Program and Administrative Charge is deducted on the investment options, these performance data reflect the deduction of the Program and Administrative Charge applicable to your Plan's Contract with The Hartford, but do not reflect the possible imposition of any redemption fees or charges associated with any withdrawal benefits that may be available through your Plan. Your plan sponsor may elect to have the Program and Administrative Charge deducted from your plan's contract values on a quarterly basis or may elect to pay the Program and Administrative Charge directly. In either of these cases, these performance data do not reflect the deduction of the Program and Administrative Charge applicable to your Plan's Contract with The Hartford.

5 Average annual returns are calculated as a steady compounded rate of return over the period of time indicated. Returns are historical and include change in share value and reinvestment of dividends and capital gains, if any.

6 Any fees described in this section are fees paid directly from your investment in this option (e.g. redemption fees, exchange fees, account fees, purchase fees, transfer or withdrawal fees, surrender charges).

ANNUITY OPTIONS

The tables below focus on the annuity options under the Plan.

Annuities are insurance contracts that allow you to receive a guaranteed stream of payments at regular intervals, usually beginning when you retire and lasting your entire life. Guarantees of an insurance company are subject to its long-term financial strength and claims-paying ability.

Fixed Annuity Payout Option Information

The table below focuses on the annuity options under the Plan. Annuities are insurance contracts that allow you to receive a guaranteed stream of payments at regular intervals, usually beginning when you retire and lasting your entire life. Guarantees of an insurance company are subject to its long-term financial strength and claims-paying ability.

Option name: Fixed Annuity Payout Option †.	
Objectives and goals:	To provide a guaranteed stream of retirement income for your life based on the number of annuity units you acquire during your participation in the Plan.
Pricing Factors:	The cost of each annuity unit depends on your age and interest rates when you buy it. Ordinarily the closer you are to retirement the more it will cost you to buy a unit. Subject to terms of your Plan and applicable Plan contractual arrangements, benefit forms may include a single life annuity, a life annuity with a 10, 15, or 20-year certain period, a cash refund life annuity, a joint and survivor life annuity, an annuity with monthly payments for a designated period, which may be from five to 30 years and any other payment options mutually agreed by your annuity provider and your Plan. The price per share will be adjusted accordingly based on the payment options you select. Subject to terms of your Plan and applicable Plan contractual arrangements, if you die before income payments begin, a death benefit will be provided to your beneficiary. The death benefit shall generally be equal to the participant's account value, reduced by any applicable state/municipality premium taxes, any unpaid fees or charges and any outstanding loan indebtedness. Beneficiary coverage may also be available during the benefit payout phase, subject to the annuity benefit form selected by you.

Restrictions and Fees:	Subject to terms of your Plan and applicable Plan contractual arrangements, the election of an annuity payout option is typically irrevocable and no surrenders are permitted once payments commence, with the exception of any annuity featuring monthly payments for a designated period. With respect to an annuity with monthly payments for a designated period, surrenders will generally be subject to any applicable contingent deferred sales charges (typically a percentage of the full amount of the surrender, based on certain Plan contract criteria). A Program and Administrative Charge ("Charge", also referred to as a mortality, expense risk and/or administrative charge) is applicable to the assets associated with your account. The maximum Charge applicable to your account is 1.25% per year. However, your exact Charge may be lower. Upon advance notice to your Plan, this Charge may decrease or increase. In addition to any charges described above, any amounts withdrawn from your account to purchase an annuity payout option will be subject to a deduction for any applicable state/municipality premium taxes.

† This option may be available to you if permitted under the terms of your Plan. For additional information regarding any annuity payout options that may be available to you under your Plan, as well as any associated fees and expenses, please contact your Plan Sponsor.

Variable Annuity Payout Option Information

The table below focuses on the annuity options under the Plan. Annuities are insurance contracts that allow you to receive a guaranteed stream of payments at regular intervals, usually beginning when you retire and lasting your entire life. Guarantees of an insurance company are subject to its long-term financial strength and claims-paying ability.

Option name: Variable Annuity Payout Option ††	
Objectives and goals:	To provide a source of retirement income for your life, with payment amounts that may vary depending upon underlying investment performance and any applicable fees and expenses, based upon the investment options you have selected for your account, subject to the investment options available under your Plan. For information regarding underlying investment performance, fees and expenses, please refer to the information provided in the preceding chart tables.

Pricing Factors:	The cost of each annuity unit depends on your age and interest rates when you buy it. Ordinarily the closer you are to retirement the more it will cost you to buy a unit. Subject to terms of your Plan and applicable Plan contractual arrangements, benefit forms may include a single life annuity, a life annuity with a 10, 15, or 20-year certain period, a cash refund life annuity, a joint and survivor life annuity, an annuity with monthly payments for a designated period, which may be from five to 30 years and any other payment options mutually agreed by your annuity provider and your Plan. The price per share will be adjusted accordingly based on the payment options you select. Subject to terms of your Plan and applicable Plan contractual arrangements, if you die before income payments begin, a death benefit will be provided to your beneficiary. The death benefit shall generally be equal to the participant's account value, reduced by any applicable state/municipality premium taxes, any unpaid fees or charges and any outstanding loan indebtedness. Beneficiary coverage may also be available during the benefit payout phase, subject to the annuity benefit form selected by you.
Restrictions and Fees:	For information regarding any restrictions applicable to the investment options you have selected for your account, please refer to the information provided in the preceding chart tables. Subject to terms of your Plan and applicable Plan contractual arrangements, the election of an annuity payout option is typically irrevocable and no surrenders are permitted once payments commence, with the exception of any annuity featuring monthly payments for a designated period. With respect to an annuity with monthly payments for a designated period, surrenders will generally be subject to any applicable contingent deferred sales charges (typically a percentage of the full amount of the surrender, based on certain Plan contract criteria). A Program and Administrative Charge ("Charge", also referred to as a mortality, expense risk and/or administrative charge) is applicable to the assets associated with your account. The maximum Charge applicable to your account is 1.25% per year. However, your exact Charge may be lower. Upon advance notice to your Plan, this Charge may decrease or increase. In addition to any charges described above, any amounts withdrawn from your account to purchase an annuity payout option will be subject to a deduction for any applicable state/municipality premium taxes.
†† This option may be available to you if permitted under the terms of your Plan. For additional information regarding any annuity payout options that may be available to you under your Plan, as well as any associated fees and expenses, please contact your Plan Sponsor.	

A Program & Administrative Charge is deducted on the investment options in the Plan to cover administrative services under the Plan's contract with The Hartford.

These investment options are available to your plan through a group variable annuity contract or group variable funding agreement issued by Hartford Life Insurance Company offered to fund retirement programs. Your plan does not invest directly in the underlying fund.

This table shows only the asset-based fees, charges and expenses associated with the investment choices of the group variable annuity contract, group variable funding agreement, or mutual fund program. Please refer to Part I for information on other fees and charges that may apply to your plan's contract such as a contingent deferred sales charge, annual maintenance fee, and other fees or charges, if applicable.

Please consider an investment option's objectives, risks, charges and expenses carefully before investing. This and other information about the investment options can be found in the applicable prospectuses (and/or summary prospectuses, if available), if any, or fact sheets for the investment options listed, which are available from your plan sponsor, on the participant website at www.thehartford.com/retirementplans/access or by contacting our participant service center at 1-888-547-1405 between 8:00 a.m. and 8:00 p.m. ET, Monday through Friday. Please read them carefully before investing.

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