

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 <u>01/01/2012</u> and ending <u>12/31/2012</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ 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:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information						
1a Name of plan SWISS VALLEY FARMS, CO. EMPLOYEES PENSION PLAN AND TRUST	<table border="1"> <tr> <td>1b Three-digit plan number (PN) ►</td> <td>001</td> </tr> <tr> <td>1c Effective date of plan</td> <td>05/01/1964</td> </tr> </table>	1b Three-digit plan number (PN) ►	001	1c Effective date of plan	05/01/1964		
1b Three-digit plan number (PN) ►	001						
1c Effective date of plan	05/01/1964						
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) SWISS VALLEY FARMS COOPERATIVE 247 RESEARCH PARKWAY PO BOX 4493 DAVENPORT, IA 52808	<table border="1"> <tr> <td>2b Employer Identification Number (EIN)</td> <td>74-3213641</td> </tr> <tr> <td>2c Sponsor's telephone number</td> <td>563-468-6600</td> </tr> <tr> <td>2d Business code (see instructions)</td> <td>311500</td> </tr> </table>	2b Employer Identification Number (EIN)	74-3213641	2c Sponsor's telephone number	563-468-6600	2d Business code (see instructions)	311500
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2c Sponsor's telephone number	563-468-6600						
2d Business code (see instructions)	311500						

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.	10/17/2013	THOMAS STONTZ
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2013	THOMAS STONTZ
	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) GLENN G. BLAIR BLAIR, WESTFALL & CO., PC 4427 E. 56TH STREET DAVENPORT, IA 52807			Preparer's telephone number (optional) 563-514-5522

3a Plan administrator's name and address ☒ 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		5 321
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 96	
b Retired or separated participants receiving benefits.....	6b 107	
c Other retired or separated participants entitled to future benefits.....	6c 86	
d Subtotal. Add lines 6a , 6b , and 6c	6d 289	
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e 24	
f Total. Add lines 6d and 6e	6f 313	
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	
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: 1A 1G 3H		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2012 This Form is Open to Public Inspection
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For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>SWISS VALLEY FARMS, CO. EMPLOYEES PENSION PLAN AND TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>SWISS VALLEY FARMS COOPERATIVE</u>	D Employer Identification Number (EIN) <u>74-3213641</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information																								
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2012</u>																								
2	Assets: <table><tr><td>a Market value</td><td>2a</td><td><u>15554130</u></td></tr><tr><td>b Actuarial value</td><td>2b</td><td><u>15554130</u></td></tr></table>	a Market value	2a	<u>15554130</u>	b Actuarial value	2b	<u>15554130</u>																		
a Market value	2a	<u>15554130</u>																							
b Actuarial value	2b	<u>15554130</u>																							
3	Funding target/participant count breakdown: <table><tr><td></td><td>(1) Number of participants</td><td>(2) Funding Target</td></tr><tr><td>a For retired participants and beneficiaries receiving payment.....</td><td>3a</td><td><u>127</u> <u>8544604</u></td></tr><tr><td>b For terminated vested participants.....</td><td>3b</td><td><u>90</u> <u>2785851</u></td></tr><tr><td>c For active participants:</td><td></td><td></td></tr><tr><td> (1) Non-vested benefits.....</td><td>3c(1)</td><td><u>37016</u></td></tr><tr><td> (2) Vested benefits.....</td><td>3c(2)</td><td><u>4008743</u></td></tr><tr><td> (3) Total active</td><td>3c(3)</td><td><u>104</u> <u>4045759</u></td></tr><tr><td>d Total</td><td>3d</td><td><u>321</u> <u>15376214</u></td></tr></table>		(1) Number of participants	(2) Funding Target	a For retired participants and beneficiaries receiving payment.....	3a	<u>127</u> <u>8544604</u>	b For terminated vested participants.....	3b	<u>90</u> <u>2785851</u>	c For active participants:			(1) Non-vested benefits.....	3c(1)	<u>37016</u>	(2) Vested benefits.....	3c(2)	<u>4008743</u>	(3) Total active	3c(3)	<u>104</u> <u>4045759</u>	d Total	3d	<u>321</u> <u>15376214</u>
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d Total	3d	<u>321</u> <u>15376214</u>																							
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐ <table><tr><td>a Funding target disregarding prescribed at-risk assumptions</td><td>4a</td><td></td></tr><tr><td>b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor</td><td>4b</td><td></td></tr></table>	a Funding target disregarding prescribed at-risk assumptions	4a		b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b																			
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5	Effective interest rate	5	<u>6.98 %</u>																						
6	Target normal cost.....	6	<u>93374</u>																						

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	<u>09/27/2013</u> Date
<u>DAVE HILKO</u> Signature of actuary	<u>11-05365</u> Most recent enrollment number
<u>DELOITTE CONSULTING LLP</u> Type or print name of actuary	<u>111 S. WACKER DR.</u> Firm name
<u>CHICAGO, IL 60606-4301</u> Address of the firm	<u>Telephone number (including area code)</u>

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2012
v. 120126

Part II Beginning of Year Carryover Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	2869737
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	354180
9	Amount remaining (line 7 minus line 8)	0	2515557
10	Interest on line 9 using prior year's actual return of _____%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		24711
b	Interest on (a) using prior year's effective interest rate of 6.26% except as otherwise provided (see instructions)		0
c	Total available at beginning of current plan year to add to prefunding balance		24711
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	2337641
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	177916

Part III Funding Percentages			
14	Funding target attainment percentage	14	100.00 %
15	Adjusted funding target attainment percentage	15	101.15 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	80.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/12/2012	300000				
07/02/2012	400000				
Totals ►			18(b)	700000	18(c)

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	680885
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No	
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
		0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 5.54%	2nd segment: 6.85%	3rd segment: 7.52 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	93374	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)...	34	93374	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	93374	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	680885	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	587511	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years.....	40		

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:			
a Schedule elected	☐ 2 plus 7 years ☐ 15 years		
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011		
42 Amount of acceleration adjustment	42		
43 Excess installment acceleration amount to be carried over to future plan years	43		

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	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 SWISS VALLEY FARMS, CO. EMPLOYEES PENSION PLAN AND TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SWISS VALLEY FARMS COOPERATIVE	D Employer Identification Number (EIN) 74-3213641	

Part I	Service Provider Information (see instructions)
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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
CHARLES SCHWAB INVEST. MGMT, INC.

94-3106735

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

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

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

DELOITTE CONSULTING, LLP

06-1454513

(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?
11 50	NONE	116729	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

DELOITTE & TOUCHE, LLP

13-3891517

(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?
10 50	NONE	19220	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

IRONGATE INTERNATIONAL LLC

36-4458718

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	59144	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

LAZARD ASSET MANAGEMENT CO.

13-5545100

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	11070	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

GRISANTI CAPITAL LLC

06-1547047

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	14633	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

SCHAFFER CULLEN CAP MGMT

645 FIFTH AVENUE
SUITE 1201
NEW YORK, NY 10022

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	9024	Yes ☐ No ☒	Yes ☐ No ☐	0	Yes ☐ No ☐

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

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

AMI ASSET MANAGMENT

76-0589652

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	7404	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
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(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 III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2012 This Form is Open to Public Inspection
For calendar plan year 2012 or fiscal plan year beginning <u>01/01/2012</u> and ending <u>12/31/2012</u>		
A Name of plan <u>SWISS VALLEY FARMS, CO. EMPLOYEES PENSION PLAN AND TRUST</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SWISS VALLEY FARMS COOPERATIVE</u>		D Employer Identification Number (EIN) <u>74-3213641</u>

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	42480	21002
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2211097	694224
(2) U.S. Government securities.....	1c(2)	7540407	7275627
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	5760145	6635572
(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)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		1754827
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	15554129	16381252

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	14991	15263
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	14991	15263

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	15539138	16365989
---	----	----------	----------

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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	700000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		700000

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	28	
(B) U.S. Government securities	2b(1)(B)	132272	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		132300

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	259415	
(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)		259415

(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	3552853	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	3102947	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		449906

(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	568625	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		568625

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2110246

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1030792	
(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)		1030792
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)	137447	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	115156	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		252603
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1283395

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		826851
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: BLAIR, WESTFALL & CO., PC

(2) EIN: 27-0166339

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

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

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
4d			
e Was this plan covered by a fidelity bond?	X		1000000
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4g			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	X		
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k			
l Has the plan failed to provide any benefit when due under the plan?		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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.
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For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan <u>SWISS VALLEY FARMS, CO. EMPLOYEES PENSION PLAN AND TRUST</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SWISS VALLEY FARMS COOPERATIVE</u>	D Employer Identification Number (EIN) <u>74-3213641</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____		
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	<u>6</u>

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☒ N/A

Part III	Amendments
-----------------	-------------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Schedule R (Form 5500) 2012
v. 120126

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): _____

Swiss Valley Farms, Co.
Employees' Pension Plan and Trust
Financial Statements
December 31, 2012 and 2011

**Swiss Valley Farms, co.
Employees' Pension Plan and Trust**

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Notes to Financial Statements As of December 31, 2012 and 2011, And for the Year Ended December 31, 2012	5 - 13
SUPPLEMENTAL SCHEDULES:	
Form 5500, Schedule H, Part IV, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2012	15 - 18
Form 5500, Schedule H, Part IV, line 4j – Schedule of Reportable Transactions for the Year Ended December 31, 2012	19
Note: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.	



BLAIR, WESTFALL & CO., P.C.
CERTIFIED PUBLIC ACCOUNTANTS

4427 E. 56TH STREET, DAVENPORT, IA 52807 T. 563 514 5522 F. 563 514 3334

GLENN G. BLAIR, CPA AMY M. WESTFALL, CPA

To the Investment Committee of
Swiss Valley Farms, Co, Employees' Pension Plan and Trust

Independent Auditor's Report

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Swiss Valley Farms, Co, Employees' Pension Plan and Trust, which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Plan management is responsible for the 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 on internal control relevant to the preparation and fair presentation on 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 our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatements of the financial statements, whether do to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit.

Opinion

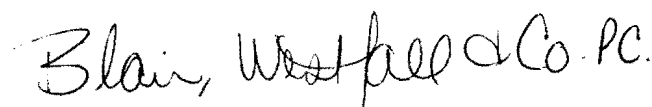
In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of Swiss Valley Farms, Co, Employees' Pension Plan and Trust as of December 31, 2012 and 2011, and the changes in its financial status for the year ended December 31, 2012 in accordance with accounting principles generally accepted in the United States of America.

Other Matter

The financial statements of Swiss Valley Farms, Co, Employees' Pension Plan and Trust as of and for the year ended December 31, 2011, were audited by other auditors whose report dated October 12, 2012, expressed an unmodified opinion on those statements.

Report on Supplemental Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules listed in the Table of Contents are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules for Reporting disclosure under the Employee Retirement Income Security Act of 1974. These schedules are the responsibility of the Plan's management and were derived from and relate directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.



BLAIR, WESTFALL & CO., P.C.
Certified Public Accountants

Davenport, Iowa
October 16, 2013

Swiss Valley Farms, Co, Employees' Pension Plan and Trust
Statements of Net Assets Available for Benefits
December 31, 2012 and 2011

	<u>2012</u>	<u>2011</u>
Investments, at fair value:		
Money market funds	\$ 694,224	\$ 2,211,097
Common Stocks	6,635,572	5,760,145
Mutual funds	1,754,827	-
U.S. Treasury notes	<u>7,275,627</u>	<u>7,540,407</u>
Total investments at fair value	<u>16,360,250</u>	<u>15,511,649</u>
 Receivables - Accrued interest	 <u>21,002</u>	 <u>42,480</u>
 Total assets	 <u>16,381,252</u>	 <u>15,554,129</u>
 Liabilities - Accrued administration expenses	 <u>15,263</u>	 <u>14,991</u>
 Net assets available for benefits	 <u><u>\$ 16,365,989</u></u>	 <u><u>\$ 15,539,138</u></u>

The notes to the Financial Statements are an integral part of this statement

Swiss Valley Farms Co. Employees' Pension Plan and Trust
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2012

Additions to net assets:

Employer contributions:	\$ 700,000
Investment income:	
Appreciation in fair value of investments	
Common stocks	454,060
Mutual funds	173,959
U.S. Treasury notes	(59,394)
Dividends	259,443
Interest	132,272
Realized gains on sale of investments	<u>449,906</u>
Net investment income	<u>1,410,246</u>
Total additions to net assets	<u>2,110,246</u>

Deductions from net assets:

Benefits paid to participants	
Lump sum benefit payments	64,636
Annuity benefit payments	966,156
Investment fees and charges	115,156
Administrative fees	<u>137,447</u>
Total deductions from net assets	<u>1,283,395</u>
Net increase (decrease)	826,851

Net assets available for benefits:

Beginning of year	<u>15,539,138</u>
End of year	<u>\$ 16,365,989</u>

The notes to the Financial Statements are an integral part of this statement

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 1. Plan Description

The following brief description of Swiss Valley Farms, Co, Employees' Pension Plan and Trust (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General:

The Plan is a defined benefit pension plan covering substantially all employees of Swiss Valley Farms Cooperative (the Company) who have met the eligibility requirements. The Company serves as the Plan administrator, along with a three-member Board of Trustees, to control and manage the operation and administration of the Plan. The Plan is subject to the provisions of the Employee Income Securities Act of 1974 (ERISA). Charles Schwab Institutional and New York life Insurance Company serve as the custodian of the Plan.

Effective January 1, 2004, accumulation of benefits under the Plan were frozen for most participants and replaced with a new defined contribution plan. The Plan was not frozen for participants who were eligible for retirement at December 31, 2004 who will continue to earn benefits under the Plan. These participants are not eligible to participate in the new defined contribution plan.

Definitions:

Normal retirement Age: Age 65

Minimum Early Retirement Age: After age 55

Final Average Monthly Earnings: Participant's average monthly Form W-2 earnings as of January 1, over the highest five consecutive of the last ten calendar years of active participation. Effective October 1, 1998: Participant's highest average compensation during the five consecutive of the last ten years of active participation.

Normal Retirement Benefit:

The sum of (a) and (b):

- (a) Past Service Benefit - 1% of final average monthly earnings on May 1, 1964 multiplied by the number of years of credited past service as of April 30, 1964.
- (b) Future Service Benefit – 1 1/2 % of final average monthly earnings for each year of service credit after April 30, 1964.

Normal Benefit Form:

Straight Life Annuity

Vesting Schedule:

100% after 5 years.

Death Benefit:

The greater of participant contributions with interest, or the actuarially equivalent present value of the normal retirement benefit accrued to the date of the participant's death.

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 1. Plan Description (continued):

Disability Benefit:

One-half the normal retirement benefit based on salary at the time of disablement and years of service to 65, payable to the earlier of the end of the disablement or 65. At 65, the benefit increases from one-half to 100% of the normal retirement benefit.

Employee Contributions:

Mandatory employee contribution discontinued as of October 1, 1998.

Interest on Employee Contributions:

Indexed to the federal mid-term rate.

Plan Amendments:

Effective June 23, 2009, the Plan was amended to modify certain provisions related to benefit payments and severance payments to comply with the Economic Growth Tax Relief and Reconciliation Act of 2001 in conjunction with the Plan's application for an updated Internal Revenue Service (IRS) determination letter (see Note 7). This amendment had no impact on the actuarial present value of accumulated plan benefits.

Effective December 31, 2009, the Plan was amended to modify certain provisions related to benefit payments to comply with the Pension Protection Act of 2006 and the Heroes Earnings Assistance and Relief Tax Act of 2008. This amendment had no impact on the actuarial value of the accumulated plan benefits.

Note 2. Summary of Significant Accounting Policies:

Basis of Accounting:

The accompanying financial statements of the Plan are prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America (GAAP).

Use of Estimates:

The preparation of financial statements in accordance with GAAP requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein; disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates. The Plan uses an actuary to determine the actuarial present value of the accumulated Plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value of accumulated Plan benefits reported in the accompanying notes to the financial statements.

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 2. Summary of Significant Accounting Policies (continued):

Investment Valuation and Income Recognition:

Investments are reported at fair value at year end. 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. Fair value is determined by the quoted market value of securities held at year end. The net appreciation or depreciation of fair value is determined by the change in the current value from the beginning of the year, if held for the entire year, to the date of sale or from the date of purchase to the end of the year. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on accrual basis. Dividends are recorded on the ex-dividend date.

Payment of Benefits:

Benefit payments to participants are recorded upon distribution.

Risks and Uncertainties:

The Plan utilizes various investments instruments. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities could occur in the near term, and that these changes could materially affect the amounts reported in the financial statements.

Administrative Expenses:

Administrative expenses of the Plan are paid by the Plan, as provided in the Plan document.

Subsequent Events:

Subsequent events have been evaluated through October 16, 2013, which is the date the financial statements were available to be issued.

Note 3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated Plan benefits are those future periodic payments that are attributable under the Plan's provisions, to the service employees have rendered. Accumulated Plan benefits include benefits expected to be paid to: (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died and (c) present employees or their beneficiaries.

The actuarial present value of accumulated Plan benefits is determined by an independent actuary and is that amount which results from applying actuarial assumptions to adjust the accumulated Plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 3. Actuarial Present Value of Accumulated Plan Benefits (continued):

The significant actuarial assumptions used in the valuations as of 2012 and 2011 are as follows:

<u>Description</u>	<u>Actuarial Present Value of Accumulated Plan Benefits</u>
1. Investment Return	6.00% per year
2. Mortality:	
Disabled participants	GATT Disabled Mortality Table
All other participants	December 31, 2012: 2012 PPA Table December 31, 2011: 2011 PPA Table
3. Termination	Sarason's T-5 Table
4. Disability	Hunter Ultimate Rates
5. Normal Retirement Age	Age 65

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits. The actuarial present value of accumulated Plan benefits as of December 31, 2012 and 2011 are as follows:

	<u>2012</u>	<u>2011</u>
Vested benefits:		
Participants and/or beneficiaries		
currently receiving benefits	\$ 8,963,158	\$ 8,988,338
Other participants	<u>8,138,430</u>	<u>7,888,090</u>
Total	17,101,588	16,876,428
Nonvested benefits	<u>142,733</u>	<u>153,927</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 17,244,321</u>	<u>\$ 17,030,355</u>

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 3. Actuarial Present Value of Accumulated Plan Benefits (continued):

The changes in the present value of accumulated Plan benefits during the valuation years ended December 31, 2012 are as follows:

Actuarial present value of accumulated plan benefits at the beginning of the period	\$ 17,030,355
Increase (decrease) attributable to:	
Benefits accumulated and experience different than assumed	224,166
Interest due to the decrease in the discount period	1,021,821
Benefits paid with interest adjustments	(1,067,667)
Change in actuarial assumptions and methods	<u>35,646</u>
Net decrease	<u>213,966</u>
Actuarial present value of accumulated plan benefits at the end of the period	<u>\$ 17,244,321</u>

Note 4. Fair Value Measurements:

In accordance with GAAP, the Plan classifies its investments into Level 1, which refers to securities values using quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to securities based on significant unobservable inputs. Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

The Plan's policy is to recognize significant transfers between levels at the end of the reporting period. For the year ended December 31, 2012, there were no significant transfers in or out of levels 1, 2, or 3.

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 4. Fair Value Measurements (continued):

The following tables set forth by level within the fair value hierarchy, a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2012 and 2011:

	Fair Value Measurement at December 31, 2012, Using			Total
	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
Money market funds	\$ 694,224	\$ -	\$ -	\$ 694,224
Common stocks:				
Common cyclical	85,530	-	-	85,530
Consumer discretionary	622,795	-	-	622,795
Consumer staples	1,006,132	-	-	1,006,132
Energy	743,688	-	-	743,688
Financial	989,077	-	-	989,077
Healthcare	989,421	-	-	989,421
Industrials	765,746	-	-	765,746
Information technology	692,819	-	-	692,819
Materials	149,929	-	-	149,929
Other	145,021	-	-	145,021
Real estate development	111,804	-	-	111,804
Telecommunication services	284,097	-	-	284,097
Utilities	49,513	-	-	49,513
Total common stocks	6,635,572	-	-	6,635,572
Mutual funds	1,754,827	-	-	1,754,827
U.S. Treasury notes	7,275,627	-	-	7,275,627
Total	<u>\$ 16,360,250</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 16,360,250</u>

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 4. Fair Value Measurements (continued):

	Fair Value Measurement at December 31, 2011, Using			Total
	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
Money market funds	\$ 2,211,097	\$ -	\$ -	\$ 2,211,097
Common stocks:				
Common cyclical	101,716	-	-	101,716
Consumer defensive	46,750	-	-	46,750
Consumer discretionary	447,510	-	-	447,510
Consumer staples	734,177	-	-	734,177
Energy	746,072	-	-	746,072
Financial	592,047	-	-	592,047
Healthcare	572,159	-	-	572,159
Industrials	740,837	-	-	740,837
Information technology	797,579	-	-	797,579
Materials	462,552	-	-	462,552
Other	87,388	-	-	87,388
Real estate development	18,384	-	-	18,384
Telecommunication services	296,360	-	-	296,360
Utilities	116,614	-	-	116,614
Total common stocks	5,760,145	-	-	5,760,145
U.S. Treasury notes	7,540,407	-	-	7,540,407
Total	<u>\$ 15,511,649</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 15,511,649</u>

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 5. Funding Policy:

Prior to an October 1, 1998 amendment, employees were required to contribute 1% of their salary to the Plan in order to participate. Present participants' accumulated contributions at December 31, 2012 and 2011 were \$500,000 and \$574,856, respectively, including interest credited at indexed to the federal mid-term rate compounded annually. The Company's funding policy is to make annual contributions to the Plan such that all employees' benefits will be fully provided for by the time they retire. The Company made contributions totaling \$700,000 for the year ended December 31, 2012 in accordance with the minimum funding requirements of ERISA.

Note 6. Investments:

The Plan's investments which represent five percent or more of net assets as of December 31, 2012 and 2011 are as follows:

	2012	2011
Schwab Institutional Money Market Fund*	\$ -	\$1,812,973
MFS Emerging Markets Debt	1,754,827	
U.S. Treasury Note, 1.75%	5,023,440	5,299,220
U.S. Treasury Note, 0.5%	1,004,531	-
U.S. Treasury Note, .025%	1,247,656	-
U.S. Treasury Note, 4.375%	-	1,436,968
U.S. Treasury Note, 1%	-	1,004,219

* Indicates a party-in-interest to the Plan

Note 7. Federal Income Tax Status:

The Internal Revenue Service (IRS) issued a favorable determination letter dated October 21, 2009, stating that the Plan as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). The Plan has been amended since receiving this determination letter. The Company and Plan management believe that the Plan, as amended, is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more-likely-than-not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2012, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdiction; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2009.

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Notes to Financial Statements
As of December 31, 2012 and 2011, and for the
Year Ended December 31, 2012

Note 8. Provisions on Termination:

Although it has not expressed any intention to do so, the Company has the right under the Plan, in certain circumstances, to discontinue at any time and to terminate the Plan subject to the provisions of ERISA. In the event the Plan is terminated, the net assets of the Plan will be allocated for payment to the participants in an order of priority determined in accordance with ERISA.

Certain benefits under the Plan are insured by the Pension benefit Guaranty Corporation (PBGC) if the Plan terminates. Generally, the PBGC guarantees most vested, normal-age retirement benefits, early retirement benefits, and certain disability and survivors' pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive benefits should the Plan be terminated at some future date will depend on the sufficiency, at that time, of the Plan's net assets to provide these benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

Note 9. Exempt Party-in-Interest Transactions:

Certain Plan investments are shares of a money market fund managed by New York Life Insurance Company (New York Life) and Charles Schwab Institutional (Charles Schwab). New York Life and Charles Schwab are custodians of the Plan as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions

Fees paid by the Plan to New York Life for investment management services for the year ended December 31, 2012 and 2011 were \$1,111 and \$1,490, respectfully. Fees charged by Charles Schwab are included in the transaction price each time a security is purchased or sold.

Supplemental Schedules

Swiss Valley Farms, Co. Employees' Pension Plan and Trust
Form 5500, Schedule H, Part IV, line 4i-Schedule of Assets
(Held at End of Year)
As of December 31, 2012

Identy of issuer, Borrower, Lessor or Similar Party

	Cost	Current Value
Money Market Funds:		
New York Life Insurance Company Money Market Funds*	223,696	223,696
Schwab Institutional Money Market Funds*	470,527	470,527
Total Money Market Funds	<u>694,223</u>	<u>694,223</u>
U.S. Treasury Notes:		
U.S. Treasury Note, 1.75%, Due 4/15/13	5,002,813	5,023,440
U.S. Treasury Note, .05%, Due 10/15/14	1,001,554	1,004,531
U.S. Treasury Note, .025%, Due 8/15/15	1,247,504	1,247,657
Total U.S. Treasury Notes	<u>7,251,871</u>	<u>7,275,628</u>
Mutual Funds:		
MFA SERS TR X EMER MK DEBT I	1,723,218	1,754,827
Total Mutual Funds	<u>1,723,218</u>	<u>1,754,827</u>
Common Stocks:		
3M COMPANY	103,122	111,420
A T & T INC NEW	56,671	64,049
ABBOTT LABORATORIES	52,356	62,880
ALLERGAN INC NEW	44,318	45,865
ALTRIA GROUP INC	48,793	62,880
AMERICAN EXPRESS COMPANY	75,241	75,299
APACHE CORP	47,431	40,035
APPLE INC	98,897	189,986
ATLANTIA SPA ADR	35,145	34,413
BARD C R INCORPORATED	47,999	55,712
BAXTER INTERNATIONAL INC	44,143	49,995
BECTON DICKINSON & CO	69,959	70,371
BLACKROCK INC CL A	76,359	89,299
BOEING CO	52,310	58,781
CHEVRON CORPORATION	52,123	61,640
CHURCH & DWIGHT CO INC	91,002	105,265
CIRRUS LOGIC INC	77,398	64,603
CISCO SYSTEMS INC	37,375	38,316
CITIRX SYS INC COM	45,424	44,950
CONOCOPHILLIPS	67,505	60,889
COSTCO WHSL CORP NEW COM	45,900	54,301
DIRECTV COM	74,092	85,272
DISNEY WALT CO	53,245	75,183
DOMINION RES INC VA NEW	29,731	35,742
DU PONT E I DE NEMOURS COM	45,373	40,930

Swiss Valley Farms Co. Employees' Pension Plan and Trust
Form 5500, Schedule H, Part 4i – Schedule of Assets
(Held at End of Year)
As of December 31, 2012 (continued)

Identify of issuer, Borrower, Lessor or Similar Party

EBAY	30,517	47,428
ECOLAB INC COM	51,738	61,115
ENBRIDGE INC COM	77,696	87,073
EXPRESS SCRIPTS HLDG COM	28,714	53,460
FEDEX CORP COM	53,935	55,949
FORD MTR CO DEL COM PAR \$0.01	69,636	88,319
GENERAL ELECTRIC COMPANY	45,097	51,425
GENUINE PARTS CO COM	35,238	43,552
HAIN CELECTIAL GRP INC COM	28,445	42,020
HCP INC COM	44,398	54,192
HEALTH CARE REIT INC COM	44,904	57,613
HEALTHCARE SVCS GP INC COM	44,596	58,656
HEINZ H J CO COM	101,453	113,918
HOLLYFRONTIES CORP COM	51,655	79,600
INTEL CORP	45,445	44,333
JOHNSON & JOHNSON	52,359	58,183
JPMORGAN CHASE & CO	127,492	167,302
KIMBERLY-CLARK CORP	52,645	70,921
KRAFT FOODS GROUP INC COM	-	25,008
LILLY ELI & CO COM	52,480	73,980
LOCKHEED MARTIN CORP	27,395	30,456
MARATHON PETR CORP COM	34,094	53,550
MASTERCARD	48,183	58,954
MC CORMICK & CO INC N-VT NON VOTING SHARES	46,162	57,177
MCKESSON CORP NEW COM	77,112	84,840
MERCK & CO INC NEW	43,792	57,725
MICROSOFT CORP	53,040	51,016
MONDELEZ INTL INC CL A	52,399	41,998
MORGAN STANLEY COM NEW	74,199	98,850
NEXTRA ENERGY INC COM	52,788	69,190
OIL STS INTL INC COM	36,003	32,193
PEPSICO INCORPORATED	70,355	72,810
PERRIGO CO	47,828	50,455
PETROFAC LTD	26,239	27,869
PETSMART INC COM	52,271	53,989
PFIZER INCORPORATED	39,730	45,268
PHILIP MORRIS INTL INC	35,650	50,602
QUALCOMM INC	125,374	141,040
RATHEON CO COM NEW	52,888	57,560

Swiss Valley Farms Co. Employees' Pension Plan and Trust
Form 5500, Schedule H, Part 4i – Schedule of Assets
(Held at End of Year)
As of December 31, 2012 (continued)

Identify of issuer, Borrower, Lessor or Similar Party

ROGERS COMMUN INC CL B F CLASS B	20,439	28,632
ROYAL DUTCH SHELL PLC CL B	46,987	46,078
STARBUCKS CORP COM	68,666	77,495
STERICYCLES INC COM	59,831	66,695
THE CHARLES SCHWAB CORP	32,187	36,618
TRAVELERS GROUP INC COM	45,079	58,174
TULLOW OIL PLC ADR	18,778	20,903
VALERO ENERGY CORP NEW COM	23,345	26,955
VERIZON COMMUNICATIONS	78,143	89,785
WELLS FARGO & CO NEW	48,013	53,663
WHOLE FOODS MKT INC COM	35,315	52,235
YAHOO JAPAN CORP ADR	24,477	20,842
AIR LEASE CORP	52,473	51,385
ANHEUSER-BUSCH INBEV ADR F SPONSORED ADR	38,629	75,173
ASSA ABLOY AB ADR	23,233	46,664
ASSOCIATED BRIT FOODS ADR NEW	17,985	18,684
ASTRAZENECA PLC SPONSORED ADR	51,610	51,997
BAYER A G SPONSORED ADR F SPONSORED ADR	26,624	39,231
BAYERISCHE MOTOREN WERKE	25,218	29,862
BG GROUP PLC ADR F 1 ADR REP 5 ORD	26,024	24,564
BHP BILLITON LTD ADR F SPONSORED ADR	46,112	59,442
BNP PARIBAS ADR F SPONSORED ADR	29,875	38,645
BR AMER TOBACCO PLC ADR F SPONSORED ADR	28,037	58,016
BRITISH SKY BROADCASTING SPONSORED ADR	15,214	17,888
CANON INC SPONSORED ADR F 1 ADR REP 1 ORD	16,732	26,467
DAIHATSU MTR CO LTD ADR	24,149	26,005
DAITO TR CONSTR CO LTD ADR	20,092	31,083
DIAGELO PLC NEW ADR F 1 ADR REPS 4 ORD	44,959	69,948
ENI P A SPON ADR F SPONSORED ADR	25,951	26,732
EXPERIAN PLC SPONSORED ADR	19,268	19,577
FANUC LTD ADR F UNSPONSORED ADR	11,327	26,192
GETINGE AB ADR	28,702	31,076
HSBC HLDGS PLC ADR NEW F SPONSORED ADR	44,859	45,640
INFORMA PLC ADR	28,778	32,112
ING GROEP V SPONSORED ADR	36,513	36,223
KOMATSU LTD SPON ADR NEW	31,747	28,795
LIXIL GROUP CORP ADR	30,711	30,000
LLOYDS BANKING GP ADR F SPONSORED ADR	17,944	18,643
LVMH MOET NEW ADR F 1 ADR REPS 1/5 ORD	9,584	23,556
MERCK KGAA ADR F	29,952	39,247
NOVARTIS A G SPON ADR F SPONSORED ADR	43,798	65,769

Swiss Valley Farms Co. Employees' Pension Plan and Trust
Form 5500, Schedule H, Part 4i – Schedule of Assets
(Held at End of Year)
As of December 31, 2012 (continued)

Identity of issuer, Borrower, Lessor or Similar Party		
ORICA LTD ADR	18,693	17,299
PETROLEUM GEO SVCS NEW SPONSORED ADR	13,384	17,114
POTASH CORP SASK INC COM	21,405	22,746
PRUDENTIAL CORP PLC ADR F SPONSORED ADR	19,388	44,024
RED ELECTRICA CORPORAC ADR	12,909	13,771
REMAX PLC	30,840	37,741
ROYAL DUTCH SHELL A ADR F SPONSORED ADR	33,881	38,129
RYNAIR HLDGS PLC SPONSORED ADR	19,886	25,333
S A P AG ADR F SPONSORED ADR	38,176	63,420
SAMPO OYJ ADR	24,703	31,916
SANDS CHINA LTD UNSPONSORED ADR	17,256	20,250
SANDVIK AB ADR	19,860	22,691
SANOFI AVENTIS ADR F SPONSORED ADR	45,410	79,551
SEVEN & I HLDGS CO LTD ADR	25,195	21,188
SOFTBANK CORP ADR	18,593	17,769
SUMITOMO MITSUI FINANCIAL GROUP INC ADR	43,605	50,118
SWATCH GROUP AG ADR	16,816	19,660
SWEDBANK AB	17,643	20,255
TECHNIP NEW SPONSORED ADR	19,083	25,934
TELSTRA CP ADS	10,820	17,972
UNILEVER N V NY SHS NEW F N Y REGISTRY SHAR	45,802	55,535
UNILEVER PLC ADR NEW F SPONSORED ADR	36,868	63,230
VALEO SPONSORED ADR	21,394	22,333
VODAFONE GROUP NEW ADR F SPONSORED ADR	48,127	45,343
WOLSELEY PLC JERSEY SPONSORED ADR NEW	-	27,894
Total Common Stocks	5,472,954	6,635,572
Total Investments	15,142,266	16,360,250

* Party-in-interest to the Plan

Swiss Valley Farms, Co. employees Pension Plan and Trust
Form 5500, Schedule H, Part IV, Line 4j-Schedule of Reportable Transactions
for the Year ended December 31, 2012

Identity of Party Involved and Asset Description	Total Number of Trades	Purchase Price	Sales Price	Historical Cost	Current Value of Assets on Transaction Date	Gain or Loss
<i>Series of Transactions in the Same Security:</i>						
Purchase of units in Schwab Institutional Money Market funds*	349	4,720,950			4,720,950	
Purchase of units in New York Life Insurance Company Money Market funds*	3	1,000,000			1,000,000	
Sale of units in Schwab Institutional Money Market funds*	94		6,267,674	6,267,647	6,267,647	-
Sale of units in New York Life Insurance Company Money Market funds	21		1,309,388	1,309,388	1,309,388	-
<i>Single Transactions in the Same Security:</i>						
Purchase of U.S. Treasury Note	1	1,247,463			1,247,463	
Purchase of units in MFS Emerging Market Debt	1	1,500,000			1,500,000	
Sale of U.S. Treasury Note	1		1,400,000	1,392,236	1,400,000	7,764

* Party-in-interest to the Plan

Swiss Valley Farms, Co Employees Pension Plan & Trust

EIN: 74-3213641

Plan Number: 001

Statement in Support of Question 4(i)

**The listing of assets held for investment may be
found attached to the auditor's opinion.**

Swiss Valley Farms, Co Employees Pension Plan & Trust

EIN: 74-3213641

Plan Number: 001

Statement in Support of Question 4(j)

**The listing of transactions in excess of 5% of the Plan's assets
may be found attached to the auditor's opinion.**

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

► File as an attachment to Form 5500 or 5500-SF.

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

► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan SWISS VALLEY FARMS, CO. EMPLOYEES' PENSION PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF SWISS VALLEY FARMS, CO.		D Employer Identification Number (EIN) 74-3213641
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500		

Part I Basic Information

1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2012</u>			
2 Assets:			
a Market value		2a	15,554,130
b Actuarial value		2b	15,554,130
3 Funding target/participant count breakdown:			
		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment		3a	127
b For terminated vested participants		3b	90
c For active participants:			
(1) Non-vested benefits		3c(1)	37,016
(2) Vested benefits		3c(2)	4,008,743
(3) Total active		3c(3)	104
d Total		3d	321
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions		4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor		4b	
5 Effective interest rate		5	6.98 %
6 Target normal cost		6	93,374

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	<u>Dave Hilko</u> Signature of actuary	<u>9-27-13</u> Date
<u>Dave Hilko</u> Type or print name of actuary		<u>11-05365</u> Most recent enrollment number
<u>DELOITTE CONSULTING LLP</u> Firm name		<u>(312) 486-3057</u> Telephone number (including area code)
<u>111 S. Wacker Dr.</u> Address of the firm		
<u>CHICAGO</u> Address of the firm		
<u>IL 60606-4301</u> Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500 or 5500-SF.

Schedule SB (Form 5500) 2012
v. 120126

Part II Beginning of Year Carryover Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	2,869,737
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	354,180
9 Amount remaining (line 7 minus line 8)	0	2,515,557
10 Interest on line 9 using prior year's actual return of <u>0.00</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		24,711
b Interest on (a) using prior year's effective interest rate of <u>6.26</u> % except as otherwise provided (see instructions)		0
c Total available at beginning of current plan year to add to prefunding balance		24,711
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	2,337,641
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	177,916

Part III Funding Percentages

14 Funding target attainment percentage	14	100.00 %
15 Adjusted funding target attainment percentage	15	101.15 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	80.00 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/12/2012	300,000				
07/02/2012	400,000				
Totals ▶			18(b)	700,000	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	680,885

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:			
a Segment rates:	1st segment: 5.54 %	2nd segment: 6.85 %	3rd segment: 7.52 %
			☐ N/A, full yield curve used
b Applicable month (enter code):			21b 4
22 Weighted average retirement age			22 64
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.		27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6)	31a	93,374	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	93,374	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	93,374	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	680,885	
38 Present value of excess contributions for current year (see instructions):			
a Total (excess, if any, of line 37 over line 36)	38a	587,511	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:	
a Schedule elected	☐ 2 plus 7 years ☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011
42 Amount of acceleration adjustment	42
43 Excess installment acceleration amount to be carried over to future plan years	43

Schedule SB, line 26 – Schedule of Active Participant Data

Participant Information

The following table displays the distribution of active participants by age and service.

Age Group	Service Group										Total
	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	
0 – 24											
25 – 29											
30 – 34				1							1
35 – 39			1	4							5
40 – 44				6	1						7
45 – 49			4	7	2	2	2				17
50 – 54			2	7	2	2	1	9			23
55 – 59			2	11		2	2	7	16		40
60 – 64				3	1			4			8
65 – 69				1							1
70+				2							2
Total			9	42	6	6	5	20	16		104

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

Actuarial Methods for Funding and Present Value of Accrued Benefits

Liability Valuation Method

Funding Target and Target Normal Cost as Defined in PPA

The funding target is defined to be the present value of the benefits accrued or earned at valuation date. The earned benefits include retirement-type benefits and ancillary benefits (1.430(d)-1(c)(1)(i)). If the amount of a benefit that is expected to be paid is neither a function of the accrued benefit at the time the benefit is expected to be paid nor a function of the participant's service at that time, then the portion of the benefit taken into account for purposes of determining the funding target for a plan year is based on the proportion of a participant's service as of the first day of the plan year relative to the service the participant will have when the participant decrements. The portion of the benefit that is taken into account in the target normal cost is the increase in the proportional benefit for the plan year (1.430(d)-1(c)(1)(ii)(C)). The determination of the funding target and target normal cost of a plan for a plan year is not permitted to take into account any limitations or anticipated limitations under section 436 (1.430(d)-1(c)(1)(iii)).

The target normal cost is the present value of all the benefits expected to accrue or to be earned during the year (benefits attributable to services performed in a prior year that are increased by reason of a compensation increase in the current year are treated as having accrued during the current year). Plan administrative expenses paid (or expected to be paid) from plan assets for a plan year are not reflected in the determination of a plan's funding target for that plan year (1.430(d)-1(c)(2)), but are reflected in the determination of a plan's target normal cost.

Generally if insurance contracts are held by the Plan, they are included in plan assets and the related benefits are included in the liability. In the case of benefits that are funded through insurance contracts purchased from an insurance company licensed under the laws of a State, the Plan is permitted to exclude the benefits from the liability and the insurance policy from the assets, but only to the extent that the right to receive benefits is an irrevocable contractual right based on premiums paid prior to the valuation date (1.430(d)-1(c)(3)).

The determination of a plan's funding target and target normal cost for a plan year is based on plan provisions that are adopted no later than the valuation date for the plan year and that become effective during that plan year. Section 412(d)(2) applies for purposes of determining whether a plan amendment is treated as having been adopted on the first day of the plan year (including a plan amendment adopted within two and one half months after the close of the plan year) (1.430(d)-1(d)).

For maximum deductible purposes, the cushion amount is equal to the sum of 50 percent of the funding target for the plan year and the amount the funding target for the plan year would increase if the Plan were to take into account increases in compensation which are expected to occur in succeeding plan years. If the Plan does not base benefits for service to date on compensation, increases in benefits which are expected to occur in succeeding plan years (determined on the basis of the average annual increase in benefits over the six preceding plan years) are taken into account in lieu of expected increases in compensation. For plans that have less than 100 participants, increases in benefits for highly compensated employees as a result of plan amendments within the last two years are excluded from the calculation of the cushion amount.

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (Continued)

Asset Valuation Method

Funding Purposes: Plan assets are equal to the market value of assets plus receivable contributions discounted at the appropriate interest rate to the valuation date.

Procedures

Financial and census data: Financial data was submitted by the Trustee and census data was submitted by the plan sponsor. Information provided was reviewed for internal consistency and we have no reason to doubt its substantial accuracy.

No benefits of materiality were excluded from the valuation of the liabilities.

The limitations of the Internal Revenue Code 415(b) and 401(a)(17) have been incorporated into our calculations.

No liability is included for participants who terminated without vesting in their benefit prior to the valuation date.

The plan sponsor provided us with the data on its employees as of the valuation date, but only those employees who have completed the Plan's eligibility requirements are included in the valuation of liabilities.

Present Value of Accrued and Vested Benefits (ASC 960)

For active participants, the accrued pension benefits as of the valuation date and payable from the assumed retirement age were determined based on actual plan compensation history for each participant. For inactive participants, accrued benefits were either supplied by the Company or estimated. The present value of accrued benefits was determined by multiplying the accrued pension benefits by single premium cost factors based on the applicable actuarial assumptions for accrued benefits.

Method Changes Since Last Year

There were no method changes since the prior valuation.

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (Continued)

Actuarial Assumptions

Interest Rates		Pre-MAP-21 Segment Rates ¹	25 Year Average Segment Rates	MAP-21 Corridor (90%-110% for 2012)	MAP-21 Segment Rates ²																		
	Lookback Month	September 2011	N/A	N/A	N/A																		
	First Segment Rate	2.06%	6.15%	5.54% - 6.77%	5.54%																		
	Second Segment Rate	5.25%	7.61%	6.85% - 8.37%	6.85%																		
	Third Segment Rate	6.32%	8.35%	7.52% - 9.19%	7.52%																		
	Effective Rate	5.46%	N/A	N/A	6.98%																		
	¹ Used for maximum deductible, ERISA 4010 reporting and excess assets for §420 transfers ² Used for minimum funding and benefit restrictions ASC 960: 6.00% per annum																						
Mortality – Healthy Participants	Funding Target and ASC 960: As defined in proposed regulations 1.430(h)(3). This table is based on the RP2000 sex-distinct table that reflects projected mortality improvements 15 years into the future from the valuation date for non-annuitants and seven years into the future for annuitants.																						
Mortality – Disabled Participants	GATT disabled mortality																						
Withdrawal	Sarason's T-5 Table. Sample rates are as follows: <table><tr><td><u>Age</u></td><td><u>Rate</u></td></tr><tr><td>25</td><td>7.7%</td></tr><tr><td>30</td><td>7.2%</td></tr><tr><td>35</td><td>6.3%</td></tr><tr><td>40</td><td>5.2%</td></tr><tr><td>45</td><td>4.0%</td></tr><tr><td>50</td><td>2.6%</td></tr><tr><td>55</td><td>0.9%</td></tr></table>					<u>Age</u>	<u>Rate</u>	25	7.7%	30	7.2%	35	6.3%	40	5.2%	45	4.0%	50	2.6%	55	0.9%		
<u>Age</u>	<u>Rate</u>																						
25	7.7%																						
30	7.2%																						
35	6.3%																						
40	5.2%																						
45	4.0%																						
50	2.6%																						
55	0.9%																						
Disability	Hunter Ultimate Rates. Sample rates are as follows: <table><tr><td><u>Age</u></td><td><u>Rate</u></td></tr><tr><td>25</td><td>0.053%</td></tr><tr><td>30</td><td>0.056%</td></tr><tr><td>35</td><td>0.064%</td></tr><tr><td>40</td><td>0.083%</td></tr><tr><td>45</td><td>0.115%</td></tr><tr><td>50</td><td>0.170%</td></tr><tr><td>55</td><td>0.275%</td></tr><tr><td>60</td><td>0.540%</td></tr></table>					<u>Age</u>	<u>Rate</u>	25	0.053%	30	0.056%	35	0.064%	40	0.083%	45	0.115%	50	0.170%	55	0.275%	60	0.540%
<u>Age</u>	<u>Rate</u>																						
25	0.053%																						
30	0.056%																						
35	0.064%																						
40	0.083%																						
45	0.115%																						
50	0.170%																						
55	0.275%																						
60	0.540%																						

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (Continued)

Retirement Age	<p>Age related table shown below:</p> <table> <tr> <th><u>Age</u></th><th><u>Rate</u></th></tr> <tr> <td>Less than 55</td><td>0%</td></tr> <tr> <td>55</td><td>1%</td></tr> <tr> <td>56</td><td>1%</td></tr> <tr> <td>57</td><td>1%</td></tr> <tr> <td>58</td><td>1%</td></tr> <tr> <td>59</td><td>1%</td></tr> <tr> <td>60</td><td>2%</td></tr> <tr> <td>61</td><td>4%</td></tr> <tr> <td>62</td><td>10%</td></tr> <tr> <td>63</td><td>5%</td></tr> <tr> <td>64</td><td>10%</td></tr> <tr> <td>65</td><td>100%</td></tr> </table>	<u>Age</u>	<u>Rate</u>	Less than 55	0%	55	1%	56	1%	57	1%	58	1%	59	1%	60	2%	61	4%	62	10%	63	5%	64	10%	65	100%
<u>Age</u>	<u>Rate</u>																										
Less than 55	0%																										
55	1%																										
56	1%																										
57	1%																										
58	1%																										
59	1%																										
60	2%																										
61	4%																										
62	10%																										
63	5%																										
64	10%																										
65	100%																										
Form of Payment	Straight life annuity																										
Asset Basis	Market value																										
Salary Increases	N/A																										
Accumulation of Employee Contributions	5.0% per annum																										
Expense Loading	Normal cost is increased by the actual expenses from the prior year.																										
Assumption Changes Since Last Year	<p>Funding Target: The interest rates and mortality table were updated per IRS requirements. The results reflect the provisions of MAP21.</p> <p>ASC 960: The mortality table was updated to be the same as the mortality table used for the Funding Target.</p>																										

Schedule SB, Part V – Summary of Plan Provisions

Plan Provisions Summary

Plan Name	Swiss Valley Farms, Co. Employees' Pension Plan
1. Plan Year	January 1 to December 31. Effective December 31, 2003 the plan year was changed from a plan year beginning May 1.
2. Employees Covered	All employees in the service of Swiss Valley Farms, Co. on or before Dec. 31, 2003, other than collective bargaining employees covered by a collective bargaining agreement which does not provide for participation in the Plan.
3. Participation Requirements	All covered employees who have reached age 21, completed six months, and are scheduled to work at least 1,000 hours during a 12-month period are eligible to participate. Effective December 31, 2003, no new participants will enter the Plan.
4. Years of Vesting Service	One year for each plan year with more than 1,000 hours of service.
5. Years of Benefit Service	One year for each plan year with more than 1,000 hours of service as an active participant under the Plan. No benefit service will accrue after December 31, 2003 except for grandfathered employees.
6. Final Average Monthly Earnings	Participant's average monthly W-2 earnings, over the highest five of the last ten calendar years of plan participation. Earnings after Dec. 31, 2004 for frozen participants will not be considered.
7. Employee Contributions	None.
8. Grandfathered Employees	The only employees not affected by the January 1, 2004 freeze are those who are now eligible for retirement, i.e., those who are 65 or who are at least 55 and have 5 years of pension plan participation as of December 31, 2003.
9. Eligibility for Benefits	
a. Normal Retirement	Age 65.
b. Early Retirement	After age 55. Unreduced early retirement is available to participants age 62 with 25 years of participation service.
c. Disability Retirement	Any active participant.
d. Vested Termination	After five years of vesting service.
e. Death Benefit	After five years of vesting service.
10. Monthly Benefit Amounts	
a. Normal Retirement	Amount equal to sum of (a) and (b): (a) Past service benefit: 1% of final average monthly earnings on May 1, 1964 multiplied by the number of years of credited service as of April 30, 1964. (b) Future Service Benefit: 1 1/2% of final average monthly earnings for each year of service credit after April 30, 1964.
b. Early Retirement	Amount equal to: (a) Deferred pension: Payable beginning at age 65; same as normal retirement pension using service to termination date. (b) The immediate early retirement benefit is equal to the accrued benefit as of the early retirement date, reduced by 5% per year that the commencement date precedes age 65. Participants who have attained age 62 and completed 25 years of vesting service receive no reduction for early retirement.

Schedule SB, Part V – Summary of Plan Provisions (Continued)

c. Disability Retirement	Amount equal to one-half of the normal retirement benefit, based on salary at time of disablement and years of service to age 65, payable to the earlier of the end of disablement or age 65. At 65, benefit increases from 50% to 100% of Normal Retirement Benefit.
d. Vested Termination	Amount equal to the normal retirement benefit, using the benefit service and final average monthly earning amounts at date of termination, with payments commencing at age 65. Accumulated employee contributions are always 100% vested.
e. Death Benefit	Amount equal to the greater of (a) or (b): (a) Sum of the participant's employee contributions to the plan, with interest; or (b) The actuarially equivalent present value of the normal retirement benefit accrued to the date of the Participant's death.
11. Normal Form of Benefit	Straight life annuity.
12. Plan Provision Changes Since Previous Valuation	None