Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/2007

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

CRANE 1 SERVICES, INC.

550 CONOVER DRIVE
FRANKLIN, OH 45005

2b Employer Identification Number (EIN)
20-8314375

2c Sponsor's telephone number
937-704-9900

2d Business code (see instructions)
811310

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.	01/22/2014	STEPHEN F. MARSEE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

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

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	147
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**	115
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	62
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	177
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f	Total. Add lines **6d** and **6e**	**6f**	178
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	168
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	30
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:
2A 2E 2F 2G 2J 2T 3D

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

A Name of plan
CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CRANE 1 SERVICES, INC.

D Employer Identification Number (EIN)
20-8314375

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

UBS FINANCIAL SERVICES INC

13-2638166

(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?
	NONE		Yes [X] No [ ]	Yes [X] No [ ]	8789	Yes [ ] No [X]

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

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(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 II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

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

A Name of plan
CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CRANE 1 SERVICES, INC.

D Employer Identification Number (EIN)
20-8314375

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN CENT EQUITY INCOME-R

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
43-1646043-000	P	221446

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS CAP WLD GR&INC-R2

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
95-1411037-000	P	104265

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS GROWTH FUND-R2

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-0792143-000	P	63209

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS INCOME FUND-R2

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
06-0867264-000	P	19799

a Name of MTIA, CCT, PSA, or 103-12 IE: COLUMBIA SMALL CAP VALUE FD II-R

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
36-3376651-000	P	123304

a Name of MTIA, CCT, PSA, or 103-12 IE: DAVIS NEW YORK VENTURE FUND-R

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
13-2601967-000	P	155024

a Name of MTIA, CCT, PSA, or 103-12 IE: DELAWARE VALUE FUND-R

b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
23-2448660-000	P	45674

a Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN INCOME FUND		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 13-2573775-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 277564
a Name of MTIA, CCT, PSA, or 103-12 IE: JANUS BALANCED R		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 84-0592523-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 61121
a Name of MTIA, CCT, PSA, or 103-12 IE: JANUS CONTRARIAN R		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 84-0592523-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 114683
a Name of MTIA, CCT, PSA, or 103-12 IE: JANUS OVERSEAS R		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 84-0592523-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51849
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS LIFETIME 2020 FUND-R2		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 04-3158862-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37443
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS LIFETIME 2030 FUND-R2		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 04-3158862-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 124721
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS LIFETIME 2040 FUND-R2		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 04-3158862-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50131
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS MID CAP VALUE FUND-R2		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 04-3158862-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 102055
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO TOTAL RETURN-R		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 33-0629048-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 717648
a Name of MTIA, CCT, PSA, or 103-12 IE: THORNBURG INTERNAT'L VALUE FD-R3		
b Name of sponsor of entity listed in (a): HARTFORD RETIREMENT SERVICES		
c EIN-PN 06-1158764-000	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 97478

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

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

A Name of plan
CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CRANE 1 SERVICES, INC.

D Employer Identification Number (EIN)
20-8314375

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)	195556	257225
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	412694	431421
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(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)	1585607	2367414
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	2193857	3056060
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	2193857	3056060

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	468655	
(B) Participants	2a(1)(B)	278041	
(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)		746696
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	76929	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		76929
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		153050
(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		976675
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	111229	
(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)		111229
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)	3243	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		3243
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		114472
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		862203
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: KENTNER SELLERS LLP **(2)** EIN: 31-0787612

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		250000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

If "Yes," enter the amount of any plan assets that reverted to the employer this year **Amount:**

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

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

Part V Trust Information (optional)

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

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

A Name of plan
CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CRANE 1 SERVICES, INC.

D Employer Identification Number (EIN)
20-8314375

Part I Distributions

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

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

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

EIN(s): 26-0679602

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS
and SUPPLEMENTARY INFORMATION

YEARS ENDED DECEMBER 31, 2012 and 2011

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
YEARS ENDED DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

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KENTNER SELLERS LLP
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditors' Report

Plan Administrator
Crane 1 Services, Inc. Retirement Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Crane 1 Services, Inc. Retirement Savings Plan, which comprise the statement of net assets available for benefits as of December 31, 2012, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Report on the 2011 Compiled Financial Statements

We have compiled the accompanying statement of net assets available for benefits of Crane 1 Services, Inc. Retirement Savings Plan as of December 31, 2011. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Plan management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist plan management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by Reliance Trust Company, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Kentner Sellers, LLP

KENTNER SELLERS, LLP
January 20, 2014

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

ASSETS

	2012	2011
ASSETS:		
Investments:		
Participant-directed:		
Mutual funds	$ 2,367,414	$ 1,585,607
Money market funds	431,421	412,694
Total Investments	2,798,835	1,998,301
Receivables:		
Employer contributions	257,225	195,556
Total Receivables	257,225	195,556
Total Assets	3,056,060	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,056,060	$ 2,193,857

See Notes to Financial Statements.

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2012 (AUDITED)

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Contributions:	
Employer	$ 468,655
Employee	278,041
	746,696
Investment income:	
Net realized and unrealized appreciation in fair value of investments	153,050
Interest and dividends	76,929
	229,979
Total Additions	976,675
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	111,229
Administrative expenses	3,243
Total Deductions	114,472
NET INCREASE	862,203
NET ASSETS AVAILABLE FOR BENEFITS - Beginning of Year	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS - End of Year	$ 3,056,060

See Notes to Financial Statements.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Crane 1 Services, Inc. Retirement Savings Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution profit sharing plan sponsored by Crane 1 Services, Inc., (the Company) and covers all eligible employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The investments of the Plan assets are all participant directed.

Eligibility

Under the terms of the Plan, there is no service requirement and covered employees are eligible to become participants on the next eligible date following their date of hire. Participants may enter the Plan on the first day of the Plan year or the first day of the seventh month of the Plan year.

Contributions

(a) *Participant's voluntary salary reductions*. Participants may elect to contribute up to 25% of compensation, subject to limitations, as determined by the Administrator which will not cause the Plan to violate certain non-discrimination tests required by the IRS. Elective deferrals can be made in whole percentages of compensation or specific dollar amounts. Each participant's contribution may not exceed the federal maximum amount pursuant to Section 402(g)(5) of the Internal Revenue Code. Additional catch-up contributions can be made beginning in the Plan year in which the participant will be at least age fifty-five (55) by the end of the Plan year.

(b) *Non-elective contribution*s

1) Safe Harbor non-elective contributions. The Safe Harbor contribution is a non-elective contribution equal to 3% of eligible compensation for all eligible participants. For purposes of the Safe Harbor non-elective contributions, "eligible participant" means all non-highly compensated employees who are eligible participants. This contribution will reduce the amount of any profit sharing contribution to which a participant might otherwise be entitled.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Contributions (Continued)

(b) *Non-elective contribution*s *(Continued)*

2) Non-elective profit sharing contributions. The Company, at its discretion, can make a non-elective contribution. The discretionary contribution will be allocated as a uniform percentage of eligible compensation based on certain allocation groups. The Company may make a different discretionary contribution for each allocation group. In determining the allocation for a particular allocation group, only eligible participants in such allocation group are taken into account. An employee must be credited with at least 1,000 hours of service during the Plan year to become eligible to receive a contribution and employment at the end of the Plan year is required to participate. Contributions are subject to the vesting schedule. The allocation groups, as used for determining the discretionary contribution, are as follows:

(i) *Group A* - Shareholders
(ii) *Group B* - Spouses of shareholders
(iii) *Group C* - All others not in Group A or B

Participant Accounts

Each participant's account is credited or charged with the following:

(a) The above contributions,
(b) Rollover contributions,
(c) Plan earnings,
(d) Forfeitures, and
(e) Plan expenses.

Vesting

Participant vesting is based on service years. Participants are 100% vested in the voluntary salary deferrals, rollover contributions, and Safe Harbor non-elective contributions. All other discretionary employer contributions are subject to the following vesting schedule:

Years of Service	Non-Forfeitable Percentage
1	30%
2	60%
3 or more	100%

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Forfeited Accounts

Forfeitures will be reallocated following the date on which the terminated participant incurs five consecutive one-year breaks in service, or following the date which a terminated participant receives payment of his or her vested account balance. The Plan allows for forfeitures to first be used to reduce administrative expenses and then the remaining to be applied to reduce employer non-elective contributions. For the years ended December 31, 2012 and 2011, total forfeitures were $0 and $909, respectively. The unallocated forfeitures at December 31, 2012 and 2011, were $1,032 and $891, respectively.

Payment of Benefits

Benefits are recorded when paid. Upon termination of service, a participant may elect to receive:

(a) A lump sum distribution equal to the value of their vested account balance.
(b) Equal installments for a period not to exceed the life expectancy of the participant.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan prepares its financial statements using the accrual basis of accounting.

Investment Valuation and Income Recognition

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

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

Use of Estimates

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

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Fees

Trustee fees and other administrative expenses are shared by the Plan and the Plan Sponsor.

NOTE C - CONCENTRATION OF CREDIT RISK

The Plan maintains its cash balances in various money market funds. At various times during the year, some or all of these funds may be uninsured or exceed insurance limits.

NOTE D - INVESTMENTS

The Company has entered into agreements with the Plan Administrator and Custodian with respect to the operation of the Plan and the establishment and management of the trust funds. As of December 31, the following investments that represent 5% or more of the Plan's net assets are separately identified.

	2012	2011
Investments at Fair Value as Determined by Quoted Market Price:		
Mutual Funds:		
American Century Equity Income Fund	$ 221,446	$ 154,166
Davis New York Venture Fund	155,024	126,576
Franklin Income Fund	277,564	194,809
PIMCO Total Return Fund	717,648	512,194
Other	995,732	597,862
Total Mutual Funds	2,367,414	1,585,607
Money market funds	431,421	412,694
Total Investments	$ 2,798,835	$ 1,998,301

NOTE D - INVESTMENTS (Continued)

During 2012, the Plan's investments (including investments bought, sold, and held during the year) appreciated (depreciated) in value as follows:

NET CHANGE IN FAIR VALUE

	2012
Mutual Funds	$ 153,050
Net Appreciation in Value	$ 153,050

NOTE E - BENEFITS PAYABLE

As of December 31, 2012 and 2011, the vested benefits payable to participants terminated prior to year end was $14,428 and $30,005, respectively.

NOTE F - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of investment funds managed by Massachusetts Financial Services and held by Reliance Trust Company. Massachusetts Financial Services and Reliance Trust Company are trustees as defined by the Plan and, therefore, these transactions qualify as party-in-interest. The investments are noted accordingly on the supplemental schedule of assets (held at end of year).

NOTE G - INCOME TAX STATUS

The Plan obtained a favorable tax determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. Subsequent amendments have been made to the Plan and these changes have not been submitted for a determination letter. However, the Plan Sponsor believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date. Therefore, no income taxes have been provided for in the financial statements. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2009.

NOTE H - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become one hundred percent (100%) vested in their accounts.

NOTE I - FAIR VALUE MEASUREMENTS

FASB ASC 820-10, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTE I - FAIR VALUE MEASUREMENTS (Continued)

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

Mutual Funds and Money Market Funds: Valued at the net asset value (NAV) of shares held by the plan at year end.

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

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

	Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Mutual funds - blended	$ 373,973	$ 0	$ 0	$ 373,973
Mutual funds - large cap	901,107	0	0	901,107
Mutual funds - mid cap	102,055	0	0	102,055
Mutual funds - small cap	123,304	0	0	123,304
Mutual funds - bonds	717,648	0	0	717,648
Mutual funds - international	149,327	0	0	149,327
Cash and money market funds	431,421	0	0	431,421
Total assets at fair value	$ 2,798,835	$ 0	$ 0	$ 2,798,835

	Assets at Fair Value as of December 31, 2011			
	Level 1	Level 2	Level 3	Total
Mutual funds - blended	$ 280,173	$ 0	$ 0	$ 280,173
Mutual funds - large cap	529,963	0	0	529,963
Mutual funds - mid cap	67,902	0	0	67,902
Mutual funds - small cap	97,673	0	0	97,673
Mutual funds - bonds	512,194	0	0	512,194
Mutual funds - international	97,702	0	0	97,702
Cash and money market funds	412,694	0	0	412,694
Total assets at fair value	$ 1,998,301	$ 0	$ 0	$ 1,998,301

NOTE J - RISKS AND UNCERTAINTIES

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

NOTE K - SUBSEQUENT EVENTS

Subsequent events were evaluated through January 20, 2014, which is the date the financial statements were available to be issued.

During 2013, the Plan Sponsor determined that corrections were required for the discretionary profit sharing contributions for the 2012 and 2011 plan years. The corrections totaled $37,196 and $8,195 for plan years ended December 31, 2012 and 2011, respectively. The Plan Sponsor is filing an amended 2011 form 5500 and the 2012 5500 under the Deliquent Filer Voluntary Compliance (DFVC) Program. The profit sharing contributions were funded in December 2013.

SUPPLEMENTARY

INFORMATION

CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN
PLAN 001; EMPLOYER IDENTIFICATION NUMBER 20-8314375
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

	(a) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, PAR, OR MATURITY VALUE / UNITS / SHARES	(e) CURRENT VALUE
	MUTUAL FUNDS:		
	Massachusetts Financial Services:		
*	MFS Lifetime 2020	3,157 shares	$ 37,443
*	MFS Lifetime 2030	10,752 shares	124,721
*	MFS Lifetime 2040	4,355 shares	50,130
*	MFS Mid Cap Value	6,714 shares	102,055
	Janus Funds:		
	Janus Balanced Fund	2,305 shares	61,121
	Janus Contrarian Fund	7,347 shares	114,683
	Janus Overseas Fund	1,476 shares	51,849
	American Funds:		
	American Century Equity Income Fund	27,750 shares	221,446
	American Funds Capital World Growth & Income Fund	2,781 shares	104,265
	American Funds Growth Fund of America	1,835 shares	63,210
	American Funds Income Fund of America	1,090 shares	19,799
	Columbia Small Cap Value II Fund	8,112 shares	123,304
	Davis New York Venture Fund	4,293 shares	155,024
	Delaware Value Fund	3,571 shares	45,674
	Franklin Income Fund	123,912 shares	277,564
	PIMCO Total Return Fund	64,076 shares	717,648
	Thornburg International Value Fund	3,475 shares	97,478
	Total Mutual Funds		2,367,414
*	**CASH AND MONEY MARKET FUNDS**	431,421 shares	431,421
	Total Investments		$ 2,798,835

* Party-in-interest as defined by ERISA

Column (d) has been omitted because it is not applicable.

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ 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 CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/2007

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
CRANE 1 SERVICES, INC.

550 CONOVER DRIVE

FRANKLIN OH 45005

2b Employer Identification Number (EIN) 20-8314375

2c Sponsor's telephone number (937) 704-9900

2d Business code (see instructions) 811310

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	Signature of plan administrator	Date 12/20/13	Enter name of individual signing as plan administrator STEPHEN F. MARSEE
SIGN HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	147
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**	115
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	62
d Subtotal. Add lines **6a, 6b,** and **6c**	**6d**	177
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	178
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	168
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	30
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:
2A 2E 2F 2G 2J 2T 3D

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	(1) [ ]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	(2) [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	(3) [X]	Trust
(4) [ ]	General assets of the sponsor	(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		**b General Schedules**	
(1) [X]	**R** (Retirement Plan Information)	(1) [X]	**H** (Financial Information)
(2) [ ]	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) [ ]	**I** (Financial Information – Small Plan)
		(3) [ ]	**A** (Insurance Information)
		(4) [X]	**C** (Service Provider Information)
(3) [ ]	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5) [X]	**D** (DFE/Participating Plan Information)
		(6) [ ]	**G** (Financial Transaction Schedules)

CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS
and SUPPLEMENTARY INFORMATION

YEARS ENDED DECEMBER 31, 2012 and 2011

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
YEARS ENDED DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

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KENTNER SELLERS LLP
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditors' Report

Plan Administrator
Crane 1 Services, Inc. Retirement Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Crane 1 Services, Inc. Retirement Savings Plan, which comprise the statement of net assets available for benefits as of December 31, 2012, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Report on the 2011 Compiled Financial Statements

We have compiled the accompanying statement of net assets available for benefits of Crane 1 Services, Inc. Retirement Savings Plan as of December 31, 2011. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Plan management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist plan management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by Reliance Trust Company, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Kentner Sellers, LLP

KENTNER SELLERS, LLP
January 20, 2014

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

ASSETS

	2012	2011
ASSETS:		
Investments:		
Participant-directed:		
Mutual funds	$ 2,367,414	$ 1,585,607
Money market funds	431,421	412,694
Total Investments	2,798,835	1,998,301
Receivables:		
Employer contributions	257,225	195,556
Total Receivables	257,225	195,556
Total Assets	3,056,060	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,056,060	$ 2,193,857

See Notes to Financial Statements.

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2012 (AUDITED)

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Contributions:	
Employer	$ 468,655
Employee	278,041
	746,696
Investment income:	
Net realized and unrealized appreciation in fair value of investments	153,050
Interest and dividends	76,929
	229,979
Total Additions	976,675
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	111,229
Administrative expenses	3,243
Total Deductions	114,472
NET INCREASE	862,203
NET ASSETS AVAILABLE FOR BENEFITS - Beginning of Year	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS - End of Year	$ 3,056,060

See Notes to Financial Statements.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Crane 1 Services, Inc. Retirement Savings Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution profit sharing plan sponsored by Crane 1 Services, Inc., (the Company) and covers all eligible employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The investments of the Plan assets are all participant directed.

Eligibility

Under the terms of the Plan, there is no service requirement and covered employees are eligible to become participants on the next eligible date following their date of hire. Participants may enter the Plan on the first day of the Plan year or the first day of the seventh month of the Plan year.

Contributions

(a) *Participant's voluntary salary reductions*. Participants may elect to contribute up to 25% of compensation, subject to limitations, as determined by the Administrator which will not cause the Plan to violate certain non-discrimination tests required by the IRS. Elective deferrals can be made in whole percentages of compensation or specific dollar amounts. Each participant's contribution may not exceed the federal maximum amount pursuant to Section 402(g)(5) of the Internal Revenue Code. Additional catch-up contributions can be made beginning in the Plan year in which the participant will be at least age fifty-five (55) by the end of the Plan year.

(b) *Non-elective contribution*s

1) Safe Harbor non-elective contributions. The Safe Harbor contribution is a non-elective contribution equal to 3% of eligible compensation for all eligible participants. For purposes of the Safe Harbor non-elective contributions, "eligible participant" means all non-highly compensated employees who are eligible participants. This contribution will reduce the amount of any profit sharing contribution to which a participant might otherwise be entitled.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Contributions (Continued)

(b) *Non-elective contribution*s *(Continued)*

2) Non-elective profit sharing contributions. The Company, at its discretion, can make a non-elective contribution. The discretionary contribution will be allocated as a uniform percentage of eligible compensation based on certain allocation groups. The Company may make a different discretionary contribution for each allocation group. In determining the allocation for a particular allocation group, only eligible participants in such allocation group are taken into account. An employee must be credited with at least 1,000 hours of service during the Plan year to become eligible to receive a contribution and employment at the end of the Plan year is required to participate. Contributions are subject to the vesting schedule. The allocation groups, as used for determining the discretionary contribution, are as follows:

(i) *Group A* - Shareholders
(ii) *Group B* - Spouses of shareholders
(iii) *Group C* - All others not in Group A or B

Participant Accounts

Each participant's account is credited or charged with the following:

(a) The above contributions,
(b) Rollover contributions,
(c) Plan earnings,
(d) Forfeitures, and
(e) Plan expenses.

Vesting

Participant vesting is based on service years. Participants are 100% vested in the voluntary salary deferrals, rollover contributions, and Safe Harbor non-elective contributions. All other discretionary employer contributions are subject to the following vesting schedule:

Years of Service	Non-Forfeitable Percentage
1	30%
2	60%
3 or more	100%

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Forfeited Accounts

Forfeitures will be reallocated following the date on which the terminated participant incurs five consecutive one-year breaks in service, or following the date which a terminated participant receives payment of his or her vested account balance. The Plan allows for forfeitures to first be used to reduce administrative expenses and then the remaining to be applied to reduce employer non-elective contributions. For the years ended December 31, 2012 and 2011, total forfeitures were $0 and $909, respectively. The unallocated forfeitures at December 31, 2012 and 2011, were $1,032 and $891, respectively.

Payment of Benefits

Benefits are recorded when paid. Upon termination of service, a participant may elect to receive:

(a) A lump sum distribution equal to the value of their vested account balance.
(b) Equal installments for a period not to exceed the life expectancy of the participant.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan prepares its financial statements using the accrual basis of accounting.

Investment Valuation and Income Recognition

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

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

Use of Estimates

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

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Fees

Trustee fees and other administrative expenses are shared by the Plan and the Plan Sponsor.

NOTE C - CONCENTRATION OF CREDIT RISK

The Plan maintains its cash balances in various money market funds. At various times during the year, some or all of these funds may be uninsured or exceed insurance limits.

NOTE D - INVESTMENTS

The Company has entered into agreements with the Plan Administrator and Custodian with respect to the operation of the Plan and the establishment and management of the trust funds. As of December 31, the following investments that represent 5% or more of the Plan's net assets are separately identified.

	2012	2011
Investments at Fair Value as Determined by Quoted Market Price:		
Mutual Funds:		
American Century Equity Income Fund	$ 221,446	$ 154,166
Davis New York Venture Fund	155,024	126,576
Franklin Income Fund	277,564	194,809
PIMCO Total Return Fund	717,648	512,194
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Money market funds	431,421	412,694
Total Investments	$ 2,798,835	$ 1,998,301

NOTE D - INVESTMENTS (Continued)

During 2012, the Plan's investments (including investments bought, sold, and held during the year) appreciated (depreciated) in value as follows:

NET CHANGE IN FAIR VALUE

	2012
Mutual Funds	$ 153,050
Net Appreciation in Value	$ 153,050

NOTE E - BENEFITS PAYABLE

As of December 31, 2012 and 2011, the vested benefits payable to participants terminated prior to year end was $14,428 and $30,005, respectively.

NOTE F - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of investment funds managed by Massachusetts Financial Services and held by Reliance Trust Company. Massachusetts Financial Services and Reliance Trust Company are trustees as defined by the Plan and, therefore, these transactions qualify as party-in-interest. The investments are noted accordingly on the supplemental schedule of assets (held at end of year).

NOTE G - INCOME TAX STATUS

The Plan obtained a favorable tax determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. Subsequent amendments have been made to the Plan and these changes have not been submitted for a determination letter. However, the Plan Sponsor believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date. Therefore, no income taxes have been provided for in the financial statements. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2009.

NOTE H - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become one hundred percent (100%) vested in their accounts.

NOTE I - FAIR VALUE MEASUREMENTS

FASB ASC 820-10, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTE I - FAIR VALUE MEASUREMENTS (Continued)

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

Mutual Funds and Money Market Funds: Valued at the net asset value (NAV) of shares held by the plan at year end.

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

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

	Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Mutual funds - blended	$ 373,973	$ 0	$ 0	$ 373,973
Mutual funds - large cap	901,107	0	0	901,107
Mutual funds - mid cap	102,055	0	0	102,055
Mutual funds - small cap	123,304	0	0	123,304
Mutual funds - bonds	717,648	0	0	717,648
Mutual funds - international	149,327	0	0	149,327
Cash and money market funds	431,421	0	0	431,421
Total assets at fair value	$ 2,798,835	$ 0	$ 0	$ 2,798,835

	Assets at Fair Value as of December 31, 2011			
	Level 1	Level 2	Level 3	Total
Mutual funds - blended	$ 280,173	$ 0	$ 0	$ 280,173
Mutual funds - large cap	529,963	0	0	529,963
Mutual funds - mid cap	67,902	0	0	67,902
Mutual funds - small cap	97,673	0	0	97,673
Mutual funds - bonds	512,194	0	0	512,194
Mutual funds - international	97,702	0	0	97,702
Cash and money market funds	412,694	0	0	412,694
Total assets at fair value	$ 1,998,301	$ 0	$ 0	$ 1,998,301

NOTE J - RISKS AND UNCERTAINTIES

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

NOTE K - SUBSEQUENT EVENTS

Subsequent events were evaluated through January 20, 2014, which is the date the financial statements were available to be issued.

During 2013, the Plan Sponsor determined that corrections were required for the discretionary profit sharing contributions for the 2012 and 2011 plan years. The corrections totaled $37,196 and $8,195 for plan years ended December 31, 2012 and 2011, respectively. The Plan Sponsor is filing an amended 2011 form 5500 and the 2012 5500 under the Deliquent Filer Voluntary Compliance (DFVC) Program. The profit sharing contributions were funded in December 2013.

SUPPLEMENTARY

INFORMATION

CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN
PLAN 001; EMPLOYER IDENTIFICATION NUMBER 20-8314375
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

	(a) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, PAR, OR MATURITY VALUE / UNITS / SHARES	(e) CURRENT VALUE
	MUTUAL FUNDS:		
	Massachusetts Financial Services:		
*	MFS Lifetime 2020	3,157 shares	$ 37,443
*	MFS Lifetime 2030	10,752 shares	124,721
*	MFS Lifetime 2040	4,355 shares	50,130
*	MFS Mid Cap Value	6,714 shares	102,055
	Janus Funds:		
	Janus Balanced Fund	2,305 shares	61,121
	Janus Contrarian Fund	7,347 shares	114,683
	Janus Overseas Fund	1,476 shares	51,849
	American Funds:		
	American Century Equity Income Fund	27,750 shares	221,446
	American Funds Capital World Growth & Income Fund	2,781 shares	104,265
	American Funds Growth Fund of America	1,835 shares	63,210
	American Funds Income Fund of America	1,090 shares	19,799
	Columbia Small Cap Value II Fund	8,112 shares	123,304
	Davis New York Venture Fund	4,293 shares	155,024
	Delaware Value Fund	3,571 shares	45,674
	Franklin Income Fund	123,912 shares	277,564
	PIMCO Total Return Fund	64,076 shares	717,648
	Thornburg International Value Fund	3,475 shares	97,478
	Total Mutual Funds		2,367,414
*	**CASH AND MONEY MARKET FUNDS**	431,421 shares	431,421
	Total Investments		$ 2,798,835

* Party-in-interest as defined by ERISA

Column (d) has been omitted because it is not applicable.

CRANE 1 SERVICES, INC.
RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS
and SUPPLEMENTARY INFORMATION

YEARS ENDED DECEMBER 31, 2012 and 2011

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
YEARS ENDED DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

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KENTNER SELLERS LLP
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditors' Report

Plan Administrator
Crane 1 Services, Inc. Retirement Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Crane 1 Services, Inc. Retirement Savings Plan, which comprise the statement of net assets available for benefits as of December 31, 2012, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

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

Disclaimer of Opinion

Because of the significance of the matter described in the Basis of Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Report on the 2011 Compiled Financial Statements

We have compiled the accompanying statement of net assets available for benefits of Crane 1 Services, Inc. Retirement Savings Plan as of December 31, 2011. We have not audited or reviewed the accompanying statement of net assets available for benefits and, accordingly, do not express an opinion or provide any assurance about whether the financial statements are in accordance with accounting principles generally accepted in the United States of America.

Plan management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America and for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial statements.

Our responsibility is to conduct the compilation in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants. The objective of a compilation is to assist plan management in presenting financial information in the form of financial statements without undertaking to obtain or provide any assurance that there are no material modifications that should be made to the financial statements.

Other Matter

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

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

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by Reliance Trust Company, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Kentner Sellers, LLP

KENTNER SELLERS, LLP
January 20, 2014

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2012 (AUDITED) and 2011 (COMPILED)

ASSETS

	2012	2011
ASSETS:		
Investments:		
Participant-directed:		
Mutual funds	$ 2,367,414	$ 1,585,607
Money market funds	431,421	412,694
Total Investments	2,798,835	1,998,301
Receivables:		
Employer contributions	257,225	195,556
Total Receivables	257,225	195,556
Total Assets	3,056,060	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS	$ 3,056,060	$ 2,193,857

See Notes to Financial Statements.

CRANE 1 SERVICES, INC. RETIREMENT SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2012 (AUDITED)

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	
Contributions:	
Employer	$ 468,655
Employee	278,041
	746,696
Investment income:	
Net realized and unrealized appreciation in fair value of investments	153,050
Interest and dividends	76,929
	229,979
Total Additions	976,675
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	111,229
Administrative expenses	3,243
Total Deductions	114,472
NET INCREASE	862,203
NET ASSETS AVAILABLE FOR BENEFITS - Beginning of Year	2,193,857
NET ASSETS AVAILABLE FOR BENEFITS - End of Year	$ 3,056,060

See Notes to Financial Statements.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Crane 1 Services, Inc. Retirement Savings Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution profit sharing plan sponsored by Crane 1 Services, Inc., (the Company) and covers all eligible employees of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The investments of the Plan assets are all participant directed.

Eligibility

Under the terms of the Plan, there is no service requirement and covered employees are eligible to become participants on the next eligible date following their date of hire. Participants may enter the Plan on the first day of the Plan year or the first day of the seventh month of the Plan year.

Contributions

(a) *Participant's voluntary salary reductions*. Participants may elect to contribute up to 25% of compensation, subject to limitations, as determined by the Administrator which will not cause the Plan to violate certain non-discrimination tests required by the IRS. Elective deferrals can be made in whole percentages of compensation or specific dollar amounts. Each participant's contribution may not exceed the federal maximum amount pursuant to Section 402(g)(5) of the Internal Revenue Code. Additional catch-up contributions can be made beginning in the Plan year in which the participant will be at least age fifty-five (55) by the end of the Plan year.

(b) *Non-elective contribution*s

1) Safe Harbor non-elective contributions. The Safe Harbor contribution is a non-elective contribution equal to 3% of eligible compensation for all eligible participants. For purposes of the Safe Harbor non-elective contributions, "eligible participant" means all non-highly compensated employees who are eligible participants. This contribution will reduce the amount of any profit sharing contribution to which a participant might otherwise be entitled.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Contributions (Continued)

(b) *Non-elective contribution*s *(Continued)*

2) Non-elective profit sharing contributions. The Company, at its discretion, can make a non-elective contribution. The discretionary contribution will be allocated as a uniform percentage of eligible compensation based on certain allocation groups. The Company may make a different discretionary contribution for each allocation group. In determining the allocation for a particular allocation group, only eligible participants in such allocation group are taken into account. An employee must be credited with at least 1,000 hours of service during the Plan year to become eligible to receive a contribution and employment at the end of the Plan year is required to participate. Contributions are subject to the vesting schedule. The allocation groups, as used for determining the discretionary contribution, are as follows:

(i) *Group A* - Shareholders
(ii) *Group B* - Spouses of shareholders
(iii) *Group C* - All others not in Group A or B

Participant Accounts

Each participant's account is credited or charged with the following:

(a) The above contributions,
(b) Rollover contributions,
(c) Plan earnings,
(d) Forfeitures, and
(e) Plan expenses.

Vesting

Participant vesting is based on service years. Participants are 100% vested in the voluntary salary deferrals, rollover contributions, and Safe Harbor non-elective contributions. All other discretionary employer contributions are subject to the following vesting schedule:

Years of Service	Non-Forfeitable Percentage
1	30%
2	60%
3 or more	100%

NOTE A - DESCRIPTION OF THE PLAN (Continued)

Forfeited Accounts

Forfeitures will be reallocated following the date on which the terminated participant incurs five consecutive one-year breaks in service, or following the date which a terminated participant receives payment of his or her vested account balance. The Plan allows for forfeitures to first be used to reduce administrative expenses and then the remaining to be applied to reduce employer non-elective contributions. For the years ended December 31, 2012 and 2011, total forfeitures were $0 and $909, respectively. The unallocated forfeitures at December 31, 2012 and 2011, were $1,032 and $891, respectively.

Payment of Benefits

Benefits are recorded when paid. Upon termination of service, a participant may elect to receive:

(a) A lump sum distribution equal to the value of their vested account balance.
(b) Equal installments for a period not to exceed the life expectancy of the participant.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan prepares its financial statements using the accrual basis of accounting.

Investment Valuation and Income Recognition

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

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

Use of Estimates

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

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Administrative Fees

Trustee fees and other administrative expenses are shared by the Plan and the Plan Sponsor.

NOTE C - CONCENTRATION OF CREDIT RISK

The Plan maintains its cash balances in various money market funds. At various times during the year, some or all of these funds may be uninsured or exceed insurance limits.

NOTE D - INVESTMENTS

The Company has entered into agreements with the Plan Administrator and Custodian with respect to the operation of the Plan and the establishment and management of the trust funds. As of December 31, the following investments that represent 5% or more of the Plan's net assets are separately identified.

	2012	2011
Investments at Fair Value as Determined by Quoted Market Price:		
Mutual Funds:		
American Century Equity Income Fund	$ 221,446	$ 154,166
Davis New York Venture Fund	155,024	126,576
Franklin Income Fund	277,564	194,809
PIMCO Total Return Fund	717,648	512,194
Other	995,732	597,862
Total Mutual Funds	2,367,414	1,585,607
Money market funds	431,421	412,694
Total Investments	$ 2,798,835	$ 1,998,301

NOTE D - INVESTMENTS (Continued)

During 2012, the Plan's investments (including investments bought, sold, and held during the year) appreciated (depreciated) in value as follows:

NET CHANGE IN FAIR VALUE

	2012
Mutual Funds	$ 153,050
Net Appreciation in Value	$ 153,050

NOTE E - BENEFITS PAYABLE

As of December 31, 2012 and 2011, the vested benefits payable to participants terminated prior to year end was $14,428 and $30,005, respectively.

NOTE F - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of investment funds managed by Massachusetts Financial Services and held by Reliance Trust Company. Massachusetts Financial Services and Reliance Trust Company are trustees as defined by the Plan and, therefore, these transactions qualify as party-in-interest. The investments are noted accordingly on the supplemental schedule of assets (held at end of year).

NOTE G - INCOME TAX STATUS

The Plan obtained a favorable tax determination letter on March 31, 2008, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. Subsequent amendments have been made to the Plan and these changes have not been submitted for a determination letter. However, the Plan Sponsor believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date. Therefore, no income taxes have been provided for in the financial statements. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2009.

NOTE H - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become one hundred percent (100%) vested in their accounts.

NOTE I - FAIR VALUE MEASUREMENTS

FASB ASC 820-10, Fair Value Measurements, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

NOTE I - FAIR VALUE MEASUREMENTS (Continued)

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

Mutual Funds and Money Market Funds: Valued at the net asset value (NAV) of shares held by the plan at year end.

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

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

	Assets at Fair Value as of December 31, 2012			
	Level 1	Level 2	Level 3	Total
Mutual funds - blended	$ 373,973	$ 0	$ 0	$ 373,973
Mutual funds - large cap	901,107	0	0	901,107
Mutual funds - mid cap	102,055	0	0	102,055
Mutual funds - small cap	123,304	0	0	123,304
Mutual funds - bonds	717,648	0	0	717,648
Mutual funds - international	149,327	0	0	149,327
Cash and money market funds	431,421	0	0	431,421
Total assets at fair value	$ 2,798,835	$ 0	$ 0	$ 2,798,835

	Assets at Fair Value as of December 31, 2011			
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Mutual funds - blended	$ 280,173	$ 0	$ 0	$ 280,173
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Mutual funds - international	97,702	0	0	97,702
Cash and money market funds	412,694	0	0	412,694
Total assets at fair value	$ 1,998,301	$ 0	$ 0	$ 1,998,301

NOTE J - RISKS AND UNCERTAINTIES

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SUPPLEMENTARY

INFORMATION

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RETIREMENT SAVINGS PLAN
PLAN 001; EMPLOYER IDENTIFICATION NUMBER 20-8314375
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2012

	(a) IDENTITY OF ISSUE, BORROWER, LESSOR, OR SIMILAR PARTY	(b) DESCRIPTION OF INVESTMENT INCLUDING MATURITY DATE, RATE OF INTEREST, PAR, OR MATURITY VALUE / UNITS / SHARES	(e) CURRENT VALUE
	MUTUAL FUNDS:		
	Massachusetts Financial Services:		
*	MFS Lifetime 2020	3,157 shares	$ 37,443
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	Thornburg International Value Fund	3,475 shares	97,478
	Total Mutual Funds		2,367,414
*	**CASH AND MONEY MARKET FUNDS**	431,421 shares	431,421
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