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

2013

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
COASTER COMPANY RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1995

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

COA, INC. DBA COASTER COMPANY OF AMERICA

12928 SANDOVAL ST
SANTA FE SPRINGS, CA 90670-4061

2b Employer Identification Number (EIN)
95-3625990

2c Sponsor's telephone number
310-944-7899

2d Business code (see instructions)
423200

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.	09/18/2014	MATTHEW CHEN
	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 ☐ Same as Plan Sponsor Name ☐ Same as Plan Sponsor Address

COA, INC. DBA COASTER COMPANY OF AMERICA

12928 SANDOVAL ST
SANTA FE SPRINGS, CA 90670-4061

3b Administrator's EIN: 95-3625990

3c Administrator's telephone number: 310-944-7899

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**	722
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**	654
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	61
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	715
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	715
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	448
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2013

This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
COASTER COMPANY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COA, INC. DBA COASTER COMPANY OF AMERICA

D Employer Identification Number (EIN)
95-3625990

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

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

1 Coverage Information:

(a) Name of insurance carrier

PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year (f) From	Policy or contract year (g) To
42-0127290	61271	415512	681	01/01/2013	12/31/2013

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	13794

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

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

ACTUARIAL BENEFITS CORP
2790 SKYPARK DRIVE STE 300
TORRANCE, CA 90505

(b) Amount of sales and base commissions paid	Fees and other commissions paid (c) Amount	Fees and other commissions paid (d) Purpose	(e) Organization code
	13794	REFERRAL/SERVICE FEE	3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	606780
5	Current value of plan's interest under this contract in separate accounts at year end	5	8283830

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

(3) ☐ guaranteed investment (4) ☒ other ▶ FLEXIBLE INVESTMENT ANNUITY

b	Balance at the end of the previous year			7b	828626
c	Additions: (1) Contributions deposited during the year	7c(1)	405		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	6530		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)	1191		
	▶ LOAN PAYMENT				
	(6) Total additions			7c(6)	8126
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	836752
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	27438		
	(2) Administration charge made by carrier	7e(2)	4649		
	(3) Transferred to separate account	7e(3)	159936		
	(4) Other (specify below)	7e(4)	28870		
	▶ LOAN WITHDRAWAL				
	(5) Total deductions			7e(5)	220893
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	615859

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision)	**b** ☐ Dental	**c** ☐ Vision	**d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness)	**f** ☐ Long-term disability	**g** ☐ Supplemental unemployment	**h** ☐ Prescription drug
i ☐ Stop loss (large deductible)	**j** ☐ HMO contract	**k** ☐ PPO contract	**l** ☐ Indemnity contract
m ☐ Other (specify) ▶			

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount			**10b**	

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2013** **This Form is Open to Public Inspection.**

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan COASTER COMPANY RETIREMENT SAVINGS PLAN	**B** Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 COA, INC. DBA COASTER COMPANY OF AMERICA	**D** Employer Identification Number (EIN) 95-3625990

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 37 50 64	CONTRACT ADMINISTRATOR	18875	Yes [X] No [ ]	Yes [X] No [ ]	0	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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2013

This Form is Open to Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
COASTER COMPANY 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
COA, INC. DBA COASTER COMPANY OF AMERICA

D Employer Identification Number (EIN)
95-3625990

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: PRINCIPAL STABLE VALUE FUND

b Name of sponsor of entity listed in (a): UNION BOND & TRUST

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)
93-6274328-001	C	837791

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP SEP ACCT R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-020	P	520677

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MONEY MARKET SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-024	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN INTL SMALLCAP SEP ACCT-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-014	P	918991

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN US PROPERTY SEP ACCT R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-027	P	471554

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LGCAP S&P 500 INDEX SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-016	P	1355936

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN MIDCAP VALUE I SA-R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
42-0127290-043	P	693636

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LARGECAP BLEND II SA-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-065	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 196417
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2010 SEP-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-075	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 93673
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2020 SEP ACCT-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-076	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1120602
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2030 SEP ACCT-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-077	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1332137
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2040 SEP ACCT-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-078	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 572077
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2050 SEP ACCT-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-079	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 506015
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME STRAT INC SA-R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-080	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 83818
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2015 SEP ACCT R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-110	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45654
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2025 SEP ACCT R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-111	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 77513
a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2035 SEP ACCT R6		
b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY		
c EIN-PN 42-0127290-112	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 70293

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2045 SEP ACCT R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-113	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 213376

a Name of MTIA, CCT, PSA, or 103-12 IE: PRIN LIFETIME 2055 SEP ACCT R6

b Name of sponsor of entity listed in (a): PRINCIPAL LIFE INSURANCE COMPANY

c EIN-PN 42-0127290-114	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11461

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

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

2013

This Form is Open to Public Inspection

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
COASTER COMPANY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COA, INC. DBA COASTER COMPANY OF AMERICA

D Employer Identification Number (EIN)
95-3625990

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)	1492	0
(2) Participant contributions	1b(2)	4068	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	524272	655889
(9) Value of interest in common/collective trusts	1c(9)	0	837791
(10) Value of interest in pooled separate accounts	1c(10)	6571873	8283830
(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)	3561358	3761879
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	826142	606780
(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	11489205	14146169
	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	11489205	14146169

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)	533130	
	(B) Participants	2a(1)(B)	920767	
	(C) Others (including rollovers)	2a(1)(C)	11699	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1465596
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)	18351	
	(F) Other	2b(1)(F)	6530	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		24881
	(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)	35027	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		35027
	(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)		12906
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		1526467
(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)		587385
c Other income	2c		-6595
d Total income. Add all **income** amounts in column (b) and enter total	2d		3645667
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	969767	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	60	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		969827
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)		
(2) Contract administrator fees	2i(2)	18876	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		18876
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		988703
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2656964
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: LESLEY, THOMAS, SCHWARZ & POSTMA **(2)** EIN: 95-3864890

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		800000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ..... ☐ Yes ☐ No ☐ Not determined

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

2013

This Form is Open to Public Inspection.

For calendar plan year 2013 or fiscal plan year beginning 01/01/2013 and ending 12/31/2013

A Name of plan
COASTER COMPANY RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COA, INC. DBA COASTER COMPANY OF AMERICA

D Employer Identification Number (EIN)
95-3625990

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): 42-0127290

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):

Coaster Company Retirement Savings Plan

Report, Financial Statements and Supplemental Schedule

December 31, 2013 and 2012 and Year Ended December 31, 2013

LTSP

LESLEY, THOMAS, SCHWARZ & POSTMA, INC.
CERTIFIED PUBLIC ACCOUNTANTS
A Professional Accountancy Corporation

Principals
George M. Lesley
John Postma II
Thomas R. Madigan
Mark D. Murphy
Doris D. Farinacci
Mark A. Simurda
Cyndi M. LeBerthon

Independent Auditor's Report

To the Plan Administrator of the
Coaster Company Retirement Savings Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Coaster Company Retirement Savings Plan, which comprise of the statements of net assets available for benefits as of December 31, 2013 and 2012, and the related statement of changes in net assets available for benefits for the year ended December 31, 2013, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA), the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified by Principal Life Insurance Company, an investment contract issuer, and Delaware Charter Guarantee and Trust Company, the investment custodian of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the investment contract issuer and investment custodian hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the investment contract issuer and the investment custodian as of December 31, 2013 and 2012 and for the year ended December 31, 2013, that the information provided to the plan administrator by the investment contract issuer and the investment custodian is complete and accurate.

Disclaimer of Opinion

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

Other Matter

The supplemental schedule of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013 is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedule.

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

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the investment contract issuer and the investment custodian, 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.



A Professional Accountancy Corporation
Newport Beach, California
September 17, 2014

Coaster Company Retirement Savings Plan
Statements of Net Assets Available for Benefits
As of December 31, 2013 and 2012

	December 31,	
	2013	**2012**
Assets		
Investments, at fair value		
Insurance contracts		
Guaranteed interest accounts	$ 606,780	$ 826,143
Pooled separate accounts	8,283,830	6,571,873
Mutual funds	3,761,879	3,561,358
Common/collective trust fund	837,791	-
	13,490,280	10,959,374
Receivables		
Notes receivable from participants	655,889	524,271
Participant contributions receivable	-	4,068
Employer contributions receivable	-	1,492
	655,889	529,831
Total assets	14,146,169	11,489,205
Liability	-	-
Net assets available for benefits, at fair value	14,146,169	11,489,205
Adjustment from fair value to contract value for fully benefit-responsive investment contract	(5,071)	-
Net assets available for benefits	$ 14,141,098	$ 11,489,205

See the accompanying notes to these financial statements

Coaster Company Retirement Savings Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2013

Additions to net assets attributed to:	
Investment income	
Net appreciation in fair value of investments	$ 2,115,090
Interest	6,531
Dividends	35,027
	2,156,648
Interest income from notes receivable from participants	18,351
Contributions	
Participants	920,767
Company	533,130
Rollovers	11,699
	1,465,596
Total additions to net assets	3,640,595
Deductions from net assets attributed to:	
Benefits paid to participants	969,826
Administration fees	18,876
Total deductions from net assets	988,702
Net increase in net assets available for benefits	2,651,893
Net assets available for benefits, beginning of year	11,489,205
Net assets available for benefits, end of year	$ 14,141,098

See the accompanying notes to these financial statements

Note 1. Description of the Plan

The following description of the Coaster Company Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan was adopted on January 1, 1995 to qualify as a defined contribution retirement plan for COA, Inc. dba Coaster Company of America's (the "Company") eligible employees. The Plan has a pre-tax salary reduction provision as defined under Section 401(k) and an employer matching contribution under 401(m) of the Internal Revenue Code (the "IRC"). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Participant Eligibility

Each of the Company's employees is eligible to participate in the Plan after the completion of 90 days of service without regard to hours of service. Participants may enter the Plan on a monthly basis.

Contributions

The Company's eligible employees may contribute from 1% up to 100% of their compensation, subject to the limitations as defined by the IRC, each year on a pre-tax basis by salary reduction. Participants also have the option to designate all or any portion of their contributions to be withheld on an after-tax basis as Roth elective deferral contributions.

The Company makes a 401(k) "Safe Harbor" qualified matching contribution of 100% of each participant's elective deferrals up to the first 4% of compensation. In addition, the Company may make a discretionary contribution without regard to the Company's current or accumulated profits as determined each year by resolution of the Company's Board of Directors. For the year ended December 31, 2013, the Company did not elect to make a discretionary contribution.

Participants direct the investment of all contributions to their account into various investment options offered by the Plan.

Note 1. Description of the Plan (continued)

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's qualified matching contributions, (b) the Company's discretionary contributions and (c) Plan earnings less an allocation of investment and operating expenses charged to the Plan. Allocations of Company discretionary contributions are allocated to participants who are active participants on the last day of the Plan year. Company discretionary contributions are based upon the ratio that each eligible participant's compensation bears to the total compensation of all eligible participants. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are 100% vested in their contributions and earnings on their contributions. Effective January 1, 2003, the Plan elected to be a Safe Harbor Plan according to IRC regulations. As a result, participants become 100% vested in their Company matching contribution account and Company discretionary contribution account for any contributions made after January 1, 2003. Prior to January 1, 2003, participants became vested in their Company matching contribution account and Company discretionary contribution account and any earnings on the Company contributions as follows:

Periods of Service For Vesting	Percent Vested
Less than one year	0%
One year but less than two	20%
Two years but less than three	40%
Three years but less than four	60%
Four years but less than five	80%
Five or more years	100%

Forfeitures

Amounts forfeited from terminating participants' non-vested portion of their account are used to reduce administrative expenses and future Company contributions. There were no forfeitures available as of December 31, 2013 and 2012.

Safe Harbor Election

Effective January 1, 2003, the Plan has elected to be a Safe Harbor Plan according to IRC regulations. Accordingly, the Plan must meet certain requirements relating to employer contributions and investing schedules and meet the applicable "Safe Harbor" requirements. If the Plan meets the "Safe Harbor" requirements it is not subject to the ADP or ACP discrimination tests required by the IRC.

Note 1. Description of the Plan (continued)

Notes Receivables from Participants

Participants may borrow from their accounts up to a maximum of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and must be repaid at a fixed interest rate which is commensurate with local prevailing rates as determined by the Plan. Generally, loans must be repaid within five years, unless the loan was for the purchase of a principal residence. In this case, the repayment period may be extended. Principal and interest is paid ratably through payroll deductions. Delinquent or defaulted notes receivables from participants are written off as "deemed" distributions at the end of the quarter following the quarter in which the default occurs.

The Plan classifies participant loans as notes receivable from participants in the statements of net assets available for benefits and measures them at their unpaid principal balance plus any accrued interest.

Payment of Benefits

Retired or terminated participants receive the vested portion of their Company matching contributions, Company discretionary contributions and earnings on their Company contributions and 100% of their contributions as soon as administratively possible following retirement, termination or upon becoming disabled. The Plan permits a terminated participant to defer commencement of the payment of benefits until the later of election to receive benefits or age 65.

Plan Administrative Expenses

The Company provides or pays for certain accounting, legal, administrative and management services without charge to the Plan. Fees related to the administration of notes receivable from participants and certain fees related to distributions are charged directly to participant's accounts are included in administration expenses. Investment related expenses are included in net appreciation of fair value of investments.

Contribution Funding

The Company funds its participant contributions and Company matching contributions on a biweekly basis. Discretionary contributions, if any, are funded annually.

Note 2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America and present the net assets available for benefits and the changes in those net assets.

Note 2. Summary of Significant Accounting Policies (continued)

Basis of Accounting (continued)

The statements of net assets available for benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contract from fair value to contract value. The statement of changes in net assets available for benefits is prepared on a contract value basis.

The account of the fully benefit-responsive investment contract (Principal Stable Value Fund - common/collective trust fund) is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at contract value as reported to the Plan by Union Bond and Trust Company.

The Plan entered into the investment contract in 2013. The fair value of the investment contract at December 31, 2013 was $837,791. The contract value of the investment contract at December 31, 2013 was $832,720.

Valuation of Investments

All investments are carried at fair value or an approximation of fair value except for the fully benefit-responsive investment contract (Principal Stable Value Fund). This fund is reported at fair value and adjusted to contract value. Fair value is the price that would be received to an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date and interest is accrued as earned.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Non-Distributed Benefits

The Plan does not accrue non-distributed benefits related to participants who have withdrawn from the Plan, but recognizes such benefits as a deduction from net assets in the period in which such benefits are paid.

Subsequent Events

The Company has evaluated subsequent events through September 17, 2014, the date which the financial statements were available to be issued.

Note 3. Insurance Contracts

Guaranteed Interest Account

The Plan participates in a contract with Principal Life Insurance Company ("Principal") whereby the assets of the Plan are part of the general assets of Principal. These contracts are identified and accounted for as guaranteed interest accounts. The guaranteed interest accounts provide guaranteed interest rates for specified periods of time as determined or allowed by the contracts. The rate credited is the rate in effect on the day when each deposit is directed to the funds.

The guarantees made with regard to the guaranteed interest accounts are supported by Principal Life Insurance Company's general account. There are no reserves against contract value for credit risk of contract issuer or otherwise.

The guaranteed interest account promises contract value for a benefit event (termination, death, disability and retirement), however, there are possible market value adjustments when funds are withdrawn prior to their maturity. There may be withdrawal restrictions associated with this contract based on certain Plan level initiated transactions.

Pooled Separate Accounts

The Plan participates in a contract with Principal whereby the assets of the Plan are pooled with those of other unrelated plans. The Plan owns units of participation in the fair value of the account's underlying assets. Principal holds these assets in trust for the participating plans.

Note 4. Investments

At December 31, 2013 and 2012, the following presents investments that represent 5% or more of the Plan's net assets:

	December 31, 2013	December 31, 2012
Common/collective trust fund		
Principal Stable Value Fund	$ 837,791	$ ---*
Guaranteed interest accounts	$ 606,780*	$ 826,143
Pooled separate accounts		
Money Market Separate Account	$ ---*	$ 768,675
Large Cap S&P 500 Index Separate Account	$ 1,355,936	$ 921,179
International Small Cap Separate Account	$ 918,991	$ 651,441
LifeTime 2020 Separate Account	$ 1,120,602	$ 933,698
LifeTime 2030 Separate Account	$ 1,332,137	$ 828,707
Mid Cap Value Separate Account	$ 693,636	$ 555,057
Mutual funds		
PIMCO Total Return A Fund	$ 1,149,824	$ 1,357,606
American Century Heritage A Fund	$ 589,017*	$ 797,472

**Investment does not represent 5% of the Plan's net assets at the respective year end.*

During the year ended December 31, 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated (depreciated) in value, by investment type, as follows:

	Year Ended December 31, 2013
Net appreciation (depreciation) in fair value of investments	
Pooled separate accounts	$ 1,526,462
Mutual funds	587,388
Guaranteed interest accounts	(6,595)
Common/collective trust fund	7,835
	$ 2,115,090

Note 5. Information Certified by the Investment Contract Issuer and the Investment Custodian

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by the investment contract issuer and the investment custodian of the Plan, as complete and accurate, except for comparing such information certified by the investment contract issuer and the investment custodian to information included in the Plan's financial statements and supplemental schedule:

a) Investments

	December 31,	
	2013	**2012**
Guaranteed interest accounts	$ 606,780	$ 826,143
Pooled separate accounts	$ 8,283,830	$ 6,571,873
Mutual funds	$ 3,761,879	$ 3,561,358
Common/collective trust fund	$ 837,791	$ ---

b) Investment income

	Year Ended December 31, 2013
Net appreciation in fair value of investments	$ 2,115,090
Interest	$ 6,631
Dividends	$ 35,027

c) Supplemental Schedule:
Schedule H, Line 4i – Schedule of Assets (Held At End of Year)*

**Except for the notes receivable from participants, which are not certified by the investment contract issuer or the investment custodian. The notes receivable from participants are participant loans allowed under the related regulations. They are included as investments on the supplemental schedule, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.*

Note 6. Fair Value Measurements

Fair value measurements are based on 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 are described as follows:

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2013 and 2012:

Pooled separate accounts: These investments are public investment securities valued using the Net Asset Value ("NAV") provided by the insurance institution which holds the contract to these investments. The NAV is quoted on a private market that is not active, however, the unit price is based on the underlying investments. A majority of the investments held by each fund are traded on an active market.

Mutual funds: These investments are valued at the closing quoted market price reported on the active market on which the public investment securities are traded.

Guaranteed interest accounts: These investments are part of the general assets of an insurance company. These investments are valued by discounting the related cash flows based on the composite yield in effect, current yields for similar contracts of the issuer, and the number of months until maturity.

Note 6. Fair Value Measurements (continued)

Common/collective trust fund: This investment is a public investment security valued using the NAV provided by the investment contract issuer. The NAV is quoted on a private market that is not active, however, the unit price is based on the underlying investments. A majority of the investments held by each fund are traded on an active market. The investments held by the fund are valued based on quoted market prices when available, discounted cash flows are valuations furnished by pricing agreements based on market transactions of comparable securities.

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 tables set forth by level within the fair value hierarchy the investments held by the Plan as of December 31, 2013 and 2012:

December 31, 2013	Fair Value Measurements Using Input Type			
	Level 1	Level 2	Level 3	Total
Guaranteed interest accounts				
Short-term fixed income	$ ---	$ ---	$ 606,780	$ 606,780
Common/collective trust fund				
Short-term fixed income	---	837,791	---	837,791
Pooled separate accounts				
Balanced/asset allocation	---	4,126,619	---	4,126,619
Foreign small/mid growth	---	918,991	---	918,991
Large blend	---	1,552,353	---	1,552,353
Mid cap growth	---	520,677	---	520,677
Mid cap value	---	693,636	---	693,636
Real estate	---	471,554	---	471,554
Mutual funds				
Foreign large blend	536,961	---	---	536,961
Intermediate-term bond	1,149,824	---	---	1,149,824
Large growth	377,464	---	---	377,464
Large value	301,423	---	---	301,423
Mid cap growth	589,017	---	---	589,017
Small blend	533,745	---	---	533,745
Small growth	25,935	---	---	25,935
Small value	247,510	---	---	247,510
Total investments measured at fair value	$ 3,761,879	$ 9,121,621	$ 606,780	$ 13,490,280

Note 6. Fair Value Measurements (continued)

December 31, 2012	Fair Value Measurements Using Input Type			
	Level 1	Level 2	Level 3	Total
Guaranteed interest accounts				
Short-term fixed income	$ ---	$ ---	$ 826,143	$ 826,143
Pooled separate accounts				
Balanced/asset allocation	---	2,731,401	---	2,731,401
Foreign small/mid growth	---	651,441	---	651,441
Large blend	---	1,047,502	---	1,047,502
Mid cap growth	---	369,846	---	369,846
Mid cap value	---	555,057	---	555,057
Money market	---	768,675	---	768,675
Real estate	---	447,951	---	447,951
Mutual funds				
Foreign large growth	362,873	---	---	362,873
Intermediate-term bond	1,357,606	---	---	1,357,606
Large growth	249,716	---	---	249,716
Large value	166,535	---	---	166,535
Mid cap growth	797,472	---	---	797,472
Small blend	476,683	---	---	476,683
Small growth	15,680	---	---	15,680
Small value	137,793	---	---	137,793
Total investments measured at fair value	$3,561,358	$6,571,873	$ 826,143	$ 10,959,374

The following table presents additional information relative to Plan investments reported on net asset value at December 31, 2012 and 2011:

December 31, 2013	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
International SmallCap SA R6 (a)	$ 918,991	$ ---	1 in a 30 day period	None	None
Large Cap Blend II Separate Account (b)	$ 196,417	$ ---	1 in a 30 day period	None	None
Large Cap S&P 500 Index Separate Account (c)	$ 1,355,936	$ ---	1 in a 30 day period	None	None
Mid Cap Value I Separate Account (d)	$ 693,636	$ ---	1 in a 30 day period	None	None
MidCap Blend SA (e)	$ 520,677	$ ---	1 in a 30 day period	None	None
Principal Stable Value Fund (f)	$ 837,791	$ ---	Daily	None	None
Principal Lifetime 2010 Separate Account (g)	$ 93,673	$ ---	Daily	None	None
Principal Lifetime 2020 Separate Account (h)	$ 1,120,602	$ ---	Daily	None	None

Note 6. Fair Value Measurements (continued)

December 31, 2013 (continued)	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
Principal Lifetime 2030 Separate Account (i)	$ 1,332,137	$ ---	Daily	None	None
Principal Lifetime 2040 Separate Account (j)	$ 572,077	$ ---	Daily	None	None
Principal Lifetime 2050 Separate Account (k)	$ 506,015	$ ---	Daily	None	None
Principal Lifetime Strategic Income Separate Account (l)	$ 83,818	$ ---	1 in a 30 day period	None	None
U.S. Property Separate Account (m)	$ 471,554	$ ---	1 in a 30 day period	None	None
Principal Lifetime 2015 Separate Account (n)	$ 45,654	$ ---	1 in a 30 day period	None	None
Principal Lifetime 2025 Separate Account (o)	$ 77,513	$ ---	1 in a 30 day period	None	None
Principal Lifetime 2035 Separate Account (p)	$ 70,293	$ ---	1 in a 30 day period	None	None
Principal Lifetime 2045 Separate Account (q)	$ 213,376	$ ---	1 in a 30 day period	None	None
Principal Lifetime 2055 Separate Account (r)	$ 11,461	$ ---	1 in a 30 day period	None	None

December 31, 2012	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
International SmallCap SA R6 (a)	$ 651,441	$ ---	1 in a 30 day period	None	None
Large Cap Blend II Separate Account (b)	$ 126,323	$ ---	1 in a 30 day period	None	None
Large Cap S&P 500 Index Separate Account (c)	$ 921,179	$ ---	1 in a 30 day period	None	None
Mid Cap Value I Separate Account (d)	$ 555,057	$ ---	1 in a 30 day period	None	None
MidCap Blend SA (e)	$ 369,846	$ ---	1 in a 30 day period	None	None
Money Market Separate Account R6 (s)	$ 768,675	$ ---	Daily	None	None
Principal Lifetime 2010 Separate Account (g)	$ 133,484	$ ---	Daily	None	None
Principal Lifetime 2020 Separate Account (h)	$ 933,698	$ ---	Daily	None	None
Principal Lifetime 2030 Separate Account (i)	$ 828,707	$ ---	Daily	None	None
Principal Lifetime 2040 Separate Account (j)	$ 495,827	$ ---	Daily	None	None
Principal Lifetime 2050 Separate Account (k)	$ 305,247	$ ---	Daily	None	None
Principal Lifetime Strategic Income Separate Account (l)	$ 34,438	$ ---	1 in a 30 day period	None	None
U.S. Property Separate Account (m)	$ 447,951	$ ---	1 in a 30 day period	None	None

Note 6. Fair Value Measurements (continued)

The following additional information presents the fund strategy relative to Plan investments reported on net asset value at December 31, 2012 and 2011:

(a) The investment seeks long-term growth of capital by investing primarily in stocks of non-US companies with relatively small capitalizations. It invests in securities of companies with their principal place of business of principal office outside the US; companies for which the principal securities market is outside the US; or companies, regardless of where their securities are traded, that derive 50% of their total revenue outside the US. Under normal market conditions, it invests at least 80% in companies similar in size to companies included in the CitiGroup Extended Market Index (EMI) World ex US.

(b) The investment seeks long-term growth of capital. The fund normally invests at least 80% of its net assets in equity securities of companies with large market capitalizations (those with market capitalizations within the range of companies in the S&P 500 Index) at the time of purchase. It will also invest in securities of foreign issuers. The fund invests its assets in equity securities with both growth and/or value characteristics. Investing in value equity securities is an investment strategy that emphasizes buying equity securities that appear to be undervalued.

(c) The investment option normally invests the majority of assets in common stocks of companies that compose the S&P 500 Index. Management attempts to mirror the investment performance of the index by allocating assets in approximately the same weightings as the S&P 500 Index. Over the long-term, management seeks a very close correlation between the performance of the Separate Account before expenses and that of the S&P 500 Index.

(d) The investment seeks long-term growth of capital. The fund invests at least 80% of its net assets in a diversified portfolio of equity securities of companies with a medium market capitalization (those with market capitalizations similar to companies in the Russell Midcap(R) Value Index) at the time of purchase. It invests in value equity securities, an investment strategy that emphasizes buying equity securities that appear to be undervalued. The fund will also invest in real estate investment trusts.

(e) The investment option invests primarily in common stocks and other equity securities of medium capitalization companies. It normally invests the majority of assets in companies with market capitalizations similar to those companies in the Russell MidCap Index. Management's securities selection is based on stocks with value and/or growth characteristics, and management constructs an investment portfolio that has a blend of stocks with these characteristics. It may invest up to 25% of assets in foreign securities.

(f) Stable value funds provide a low-risk, moderate-yield investment. The fund is managed to earn a consistent level of return, while providing preservation of capital, high credit quality, and liquidity to pay plan benefits.

(g) The investment seeks a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fund's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(h) The investment seeks a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fund's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(i) The investment seeks a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fund's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(j) The investment seeks a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fund's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(k) The investment seeks a total return consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fund's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(l) The investment seeks current income, and as a secondary objective, capital appreciation. The fund invests in underlying Principal Funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors primarily seeking current income and secondarily capital appreciation. Its asset allocation is designed for investors who are approximately 15 years beyond the normal retirement age of 65. The fund invests in PFI Institutional Class shares of underlying funds.

Note 6. Fair Value Measurements (continued)

(m) The investment invests the majority of assets in commercial real estate holdings. It focuses on properties that return both lease income and appreciation of the buildings' marketable value. The property holdings usually contain real estate from multi-family, office, warehouse/manufacturing, and retail sectors. This investment option is subject to investment and liquidity risks inherent in real estate such as those associated with general and local economic conditions. A contractual limitation in the group annuity contract that provides access to this Separate Account may be implemented, which will allow management of this Separate Account, and satisfy withdrawal requests over time and fairly amongst all those who request a withdrawal.

(n) The investment seeks a total returns consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fun's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(o) The investment seeks a total returns consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fun's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(p) The investment seeks a total returns consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fun's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(q) The investment seeks a total returns consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fun's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

Note 6. Fair Value Measurements (continued)

(r) The investment seeks a total returns consisting of long-term growth of capital and current income. The fund operates as a "target date fund." It invests in underlying Principal funds, Inc. ("PFI") domestic and foreign equity, real estate investments, and fixed-income funds according to an asset allocation strategy designed for investors having an investment time horizon comparable to that of the fund. The fund invests in PFI Institutional Class shares of underlying funds. Within 10 to 15 years after its target year, the fun's underlying fund allocation is expected to match that of the Principal LifeTime Strategic Income Fund.

(s) The investment seeks a high a level of current income consistent with preservation of principal and maintenance of liquidity. It invests in a portfolio of high quality, short-term money market instruments. The investments are U.S. dollar denominated securities which the sub-advisor believes present minimal credit risks. The sub-advisor maintains a dollar weighted average portfolio maturity of 60 days or less.

The following sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2013:

Year Ended December 31, 2012	**Guaranteed Interest Accounts**
Beginning balance	$ 826,143
Interest credited	6,530
Purchases	1,596
Net investment gains (losses)	(6,595)
Settlements	(220,894)
Ending balance	$ 606,780

Quantitative Information about Level 3 Fair Value Measurements

The fair value of the Guaranteed Interest Accounts is based on significant unobservable inputs, including the interest rates of the applicable investment contracts. Significant fluctuations in any of the inputs in isolation could result in a significantly different fair value measurement.

Note 6. Fair Value Measurements (continued)

The following table provides quantitative information about the significant unobservable inputs used for recurring fair value measurements categorized within Level 3 as of:

December 31, 2013	Valuation Techniques	Unobservable Inputs	Range Of Inputs
Guaranteed interest accounts	Discounted cash flow, See note (1)	Contractual interest rates	0.35% - 1.70%
		Applicable interest rate	0.35% - 1.70%
		Maturity dates	12/31/13 – 12/31/17

December 31, 2012	Valuation Techniques	Unobservable Inputs	Range Of Inputs
Guaranteed interest accounts	Discounted cash flow, See note (1)	Contractual interest rates	0.64% - 3.89%
		Applicable interest rate	0.64% - 3.89%
		Maturity dates	12/31/12 – 12/31/16

(1) The fair value of the guaranteed interest accounts is determined as follows:

If the applicable interest rate is equal to or less than the interest rate on the account, the fair market value is equal to the contract value.

If the applicable interest rate is greater than the interest rate on the account, the fair market value is the contract value reduced by a percentage. The percentage is equal to:

1. The difference between the applicable interest rate and the interest rate on the account, multiplied by

2. The number of years (including fractional parts of a year) until the maturity date.

Note 7. 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 possible that changes in the values of investment securities will occur in the near term and such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

Note 8. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, the account of each member shall be fully vested and nonforfeitable at the time of termination.

Note 9. Tax Status

The Plan has adopted a non-standardized prototype plan which received a favorable opinion letter on March 31, 2008 from the Internal Revenue Service stating that the non-standardized prototype plan document as then designed was in compliance with the applicable requirements of the Internal Revenue Code. The plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the positions taken by the Plan, and has concluded that as of December 31, 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan's tax returns generally remain open for Federal tax audits for three years from the filing date.

Note 10. Party-In-Interest Transactions

Certain Plan investments are units in pooled separate accounts which are managed by Principal. The Plan also has an investment in a guaranteed interest account which is part of the general assets of Principal. The Plan also has an investment in a common/collective trust fund which is managed by a subsidiary of Principal.

Fees incurred by the Plan for investment management services are included in net appreciation in fair value of investments. These fees are paid to the investment fund manager and may include certain revenue sharing fees that are paid to Principal, Delaware Charter Guarantee and Trust Company, other investment custodians and investment advisors.

Additionally as noted in Note 1, certain administrative expenses related to participant related activity are paid directly to Principal.

The Plan also allows for the issuance of notes receivable to participants in accordance with the related regulations.

These transactions qualify as party-in-interest transactions for which there is a statutory exemption.

Note 11. Form 5500 Reconciliation

The following is a reconciliation of the net assets available for benefits per the financial statements to the Form 5500:

	Year Ended December 31, 2013
Net assets available for benefits per financial statements	$ 14,141,098
Adjustment from fair value to contract value for fully benefit-responsive investment contract	5,071
Net assets available for benefits per Form 5500	$ 14,146,169

Supplemental Schedule

Coaster Company Retirement Savings Plan
Supplemental Schedule
December 31, 2013
FEIN: 95-3625990
Plan #001

Form 5500 Schedule H, Line 4i
Schedule of Assets (Held at End of Year)

(a)	(b) Identity of Issue Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Guranteed Interest Accounts			
*	Principal Life Insurance Co.	Guaranteed Interest Accounts	**	$ 606,780
	Common/collectiveTrust Fund			
*	Principal Life Insurance Co.	Stable Value Fund	**	$ 837,791
	Pooled Separate Accounts			
*	Principal Life Insurance Co.	US Property Separate Account	**	$ 471,554
*	Principal Life Insurance Co.	Principal Lifetime Strategic Income Separate Account	**	$ 83,818
*	Principal Life Insurance Co.	Large Cap S&P 500 Index Separate Account	**	$ 1,355,936
*	Principal Life Insurance Co.	Large Cap Blend II Separate Account	**	$ 196,417
*	Principal Life Insurance Co.	Mid Cap Value I Separate Account	**	$ 693,636
*	Principal Life Insurance Co.	Mid Cap Blend Separate Account	**	$ 520,677
*	Principal Life Insurance Co.	International Small Cap Separate Account	**	$ 918,991
*	Principal Life Insurance Co.	Principal Lifetime 2010 Separate Account	**	$ 93,673
*	Principal Life Insurance Co.	Principal Lifetime 2015 Separate Account	**	$ 45,654
*	Principal Life Insurance Co.	Principal Lifetime 2020 Separate Account	**	$ 1,120,602
*	Principal Life Insurance Co.	Principal Lifetime 2025 Separate Account	**	$ 77,513
*	Principal Life Insurance Co.	Principal Lifetime 2030 Separate Account	**	$ 1,332,137
*	Principal Life Insurance Co.	Principal Lifetime 2035 Separate Account	**	$ 70,293
*	Principal Life Insurance Co.	Principal Lifetime 2040 Separate Account	**	$ 572,077
*	Principal Life Insurance Co.	Principal Lifetime 2045 Separate Account	**	$ 213,376
*	Principal Life Insurance Co.	Principal Lifetime 2050 Separate Account	**	$ 506,015
*	Principal Life Insurance Co.	Principal Lifetime 2055 Separate Account	**	$ 11,461
	Mutual Funds			
	T Rowe Price	New America Growth Adv Fund	**	$ 377,464
	The American Funds	Am Fds Europacific Growth R4 Fund	**	$ 536,961
	American Century Investments	American Century Heritage A Fund	**	$ 589,017
	Fidelity Investments	Fidelity Adv Small Cap A Fund	**	$ 533,745
	Heartland Funds	Heartland Value Plus Fund	**	$ 247,510
	Jennison Dryden	Prudential Jenn Sm Co A Fund	**	$ 25,935
	MFS Investment Mgmt.	MFS Value A Fund	**	$ 301,423
	PIMCO	PIMCO Total Return A Fund	**	$ 1,149,824
*	**Participant loans**	Interest rates ranging from 3.25% to 8.5%	$0	$ 655,889

* *Party-in-interest*

** *Historical cost is not required for participant directed investments*

See Independent Auditor's Report and the accompanying notes to the financial statements

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan:

► COASTER COMPANY RETIREMENT SAVINGS PLAN

Employer Identification Number:► 95-3625990

For plan year (beginning/ending):► 01/01/2013 - 12/31/2013 Plan number:► 1

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	THE AMERICAN FUNDS	AM FDS EUROPACIFIC GRTH R4 FD		536961
	AMERICAN CENTURY INVEST	AMER CENT HERITAGE A FUND		589017
	FIDELITY INVESTMENTS	FIDELITY ADV SMALL CAP A FUND		533746
*	PRINCIPAL LIFE INSURANCE C(	GUARANTEED INTEREST		606780
	HEARTLAND FUNDS	HEARTLAND VALUE PLUS FUND		247509
	MFS INVESTMENT MGMT	MFS VALUE A FUND		301423
*	PRINCIPAL LIFE INSURANCE C(	PRIN INTL SMALLCAP SEP ACT R6		918991
*	PRINCIPAL LIFE INSURANCE C(	PRIN LARGECAP BLEND II SA R6		196417
*	PRINCIPAL LIFE INSURANCE C(	PRIN LGCAP S&P 500 INDX SA R6		1355936
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME STRAT INC SA R6		83818
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2010 SEP ACCT R6		93673
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2020 SEP ACCT R6		1120602
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2030 SEP ACCT R6		1332137
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2040 SEP ACCT R6		572077
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2050 SEP ACCT R6		506015
*	PRINCIPAL LIFE INSURANCE C(	PRIN MIDCAP SEP ACCT R6		520677
*	PRINCIPAL LIFE INSURANCE C(	PRIN MIDCAP VALUE I SA R6		693636
*	PRINCIPAL LIFE INSURANCE C(	PRIN US PROPERTY SEP ACCT R6		471554
	JENNISON DRYDEN	PRUDENTIAL JENN SM CO A FUND		25935
	PIMCO	PIMCO TOTAL RETURN A FUND		1149824
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2015 SEP ACCT R6		45654
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2025 SEP ACCT R6		77513
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2035 SEP ACCT R6		70293
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2045 SEP ACCT R6		213376
*	PRINCIPAL LIFE INSURANCE C(	PRIN LIFETIME 2055 SEP ACCT R6		11461
*	UNION BOND * TRUST CO	PRINCIPAL STABLE VALUE FUND		837791
	T ROWE PRICE FUNDS	T ROWE PRICE NEWAMER GR ADV FD		377464
	PARTICIPANT LOANS	3.25% - 8.50%		655889