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;
- [X] 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
RUBENSTEIN 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/1984

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

RUBENSTEIN ASSOCIATES, INC.

1345 AVENUE OF THE AMERICAS
FL 30
NEW YORK, NY 10105

2b Employer Identification Number (EIN)
13-2540840

2c Sponsor's telephone number
212-843-8488

2d Business code (see instructions)
541990

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.	09/19/2014	HOWARD RUBENSTEIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	
5 Total number of participants at the beginning of the plan year	**5**	137
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**	177
b Retired or separated participants receiving benefits	**6b**	1
c Other retired or separated participants entitled to future benefits	**6c**	78
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	256
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	256
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	209
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(4)**	[ ] General assets of the sponsor

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

a Pension Schedules

(1) [X] **R** (Retirement Plan Information)

(2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1) [X] **H** (Financial Information)

(2) [ ] **I** (Financial Information – Small Plan)

(3) [ ] ___ **A** (Insurance Information)

(4) [X] **C** (Service Provider Information)

(5) [ ] **D** (DFE/Participating Plan Information)

(6) [ ] **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Service Provider Information

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

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

OMB No. 1210-0110

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
RUBENSTEIN 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-2540840

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	1025	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

VANDERBILT SECURITIES LLC

11-3639254

(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?
61	ADVISOR	0	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AC SD INFL PR BD A - AMERICAN CENT 44-0619208	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK EQUITY DIV A - BNY MELLON IN P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK GLOBAL ALLOC A - BNY MELLON P.O. BOX 9793 PROVIDENCE, RI 02940	0.25%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL/ACORN INTL A - COLUMBIA MGT IN P.O. BOX 8081 BOSTON, MA 02266	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVS MDCP CORE EQ A - INVESCO CANA 5140 YONGE STREET, SUITE 900 TORONTO, ON M2N 6 CA	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS OVERSEAS S - JANUS SERVICES 43-1804048	0.25%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPM EQUITY IDX A - BOSTON FINANCIA 330 W. 9TH STREET KANSAS CITY, MO 66160	0.05%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR DISC MDCPGR A - OFI GLOBAL TWO WORLD FINANCIAL CENTER 225 LIBERTY STREET, 14TH FLOOR NEW YORK, NY 10281	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PERKINS MID CP VAL S - JANUS SERVI 43-1804048	0.25%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIM TOTAL RETURN A - BOSTON FINANC P.O. BOX 8480 BOSTON, MA 02266	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VICTORY DIVERS STK A - CITI FUND S 31-1249295	0.25%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
VANDERBILT SECURITIES LLC	61	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COL/ACORN INTL A - COLUMBIA MANAGE 225 FRANKLIN STREET BOSTON, MA 02110	$0-<$3M=1.00%, $3M-<$50M=0.50%, $50M+=0.25%

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
VANDERBILT SECURITIES LLC	61	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OPPHMR DISC MDCPGR A - OPPENHEIMER 13-2953455	$5M+=0.25%

(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 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
RUBENSTEIN 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-2540840

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	229473
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1849988	1966819
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	158532	246600
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	8679532	17213475
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	10688052	19656367
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
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	10688052	19656367

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)	229473	
(B) Participants	2a(1)(B)	676683	
(C) Others (including rollovers)	2a(1)(C)	2575	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		908731
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	189	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	6227	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		6416
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	823461	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		823461
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(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)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		773026
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		2511634
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	418689	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		418689
f Corrective distributions (see instructions)	2f		722
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	1028	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1028
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		420439
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2091195
l Transfers of assets:			
(1) To this plan	2l(1)		6921557
(2) From this plan	2l(2)		44437

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: MBAF CPA'S, LLC **(2)** EIN: 13-3842744

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		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? 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)
RCI, INC. 401(K) & PROFIT SHARING PLAN	13-3873486	001

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
RUBENSTEIN 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-2540840

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

FINANCIAL STATEMENTS

DECEMBER 31, 2013 AND 2012

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

TABLE OF CONTENTS

INDEPENDENT AUDITOR'S REPORT	1 - 2
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Notes to Financial Statements	5 - 11
SUPPLEMENTARY SCHEDULE	
Form 5500 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)	12

MBAF
CERTIFIED PUBLIC ACCOUNTANTS AND ADVISORS

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Rubenstein 401(K) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Rubenstein 401(K) Plan (formerly Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan) (the "Plan"), which comprise 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

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee 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 trustee is complete and accurate.

Disclaimer of Opinion

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

Emphasis of Matter

As discussed in Note 1, effective November 1, 2013, the RCI, Inc. 401(k) & Profit Sharing Plan was merged into the Plan.

Other Matter

The supplemental schedule of Form 5500 Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for 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 this supplemental schedule.

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

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



New York, NY
September 11, 2014

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2013 AND 2012

	2013	2012
ASSETS:		
Investments, at fair value	$ 19,180,294	$ 10,529,520
Receivables:		
Contribution receivable - employer	229,473	-
Notes receivable from participants	246,600	158,532
NET ASSETS AVAILABLE FOR BENEFITS	**$ 19,656,367**	**$ 10,688,052**

The accompanying notes are an integral part of the financial statements.

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2013

ADDITIONS TO NET ASSETS ATTRIBUTABLE TO:		
INVESTMENT INCOME:		
Net appreciation in fair value of investments	$	773,026
Interest and dividend income		823,650
		1,596,676
INTEREST INCOME ON NOTES RECEIVABLE FROM PARTICIPANTS		6,227
CONTRIBUTIONS:		
Participant		676,683
Employer		229,473
Rollovers		2,575
		908,731
		2,511,634
DEDUCTIONS FROM NET ASSETS ATTRIBUTABLE TO:		
Benefits paid to participants		418,689
Corrective distributions		722
Administrative expenses		1,028
		420,439
NET INCREASE		2,091,195
TRANSFERS OUT TO ANOTHER PLAN (NOTE 2)		(44,437)
TRANSFERS IN FROM ANOTHER PLAN (NOTE 1)		6,921,557
NET ASSETS AVAILABLE FOR BENEFITS - BEGINNING OF YEAR		10,688,052
NET ASSETS AVAILABLE FOR BENEFITS - END OF YEAR	**$**	**19,656,367**

The accompanying notes are an integral part of the financial statements.

1. DESCRIPTION OF PLAN

General

The following plan description of the Rubenstein 401(K) Plan (formerly Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan) (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions. Effective July 1, 1984, Rubenstein Associates, Inc. (the "Company" or the "Employer") established the Plan. The Plan is a defined contribution plan consisting of two component parts, a 401(k) component and a profit sharing component, and covers all eligible employees of the Company. The Plan is subject to the provisions of the Employment Retirement Income Security Act of 1974 ("ERISA"), as amended.

Plan Merger

Effective November 1, 2013, the RCI, Inc. 401(k) & Profit Sharing Plan (the "RCI Plan") was merged into the Plan. On that date, all assets of the RCI Plan, totaling $6,921,557, were transferred into the Plan. The sponsor of the RCI Plan is related to the Company through common ownership. The terms and investment options of the RCI Plan were substantially similar to those of the Plan. In addition, the assets of the RCI Plan were held by the same trustee of the Plan. In connection with this merger, the Plan name was changed from Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan to Rubenstein 401(K) Plan.

Eligibility

Employees must be twenty-one years of age or more to be eligible to participate in elective deferrals. No minimum time of employment is required by the Plan for participants to make elective deferrals. Employees must complete one year of service, including 1,000 hours of service, and be employed on the last day of the year to receive a matching contribution and two years of service, including 1,000 hours of service per year, to receive an allocation of the profit sharing contribution.

Elective Deferrals

The Plan allows each participant to contribute up to 100%, in increments of 1%, of annual compensation, as defined, to the Plan. The maximum annual contribution is determined by law. After-tax contributions, rollovers from other qualified plans, and catch-up contributions are allowed.

Employer Contributions

The Company, at its discretion, may contribute annually a matching contribution to eligible participants based on each participant's eligible compensation. In addition, the Company, at the discretion of the board of directors, may make qualified matching contributions or qualified non-elective contributions to the Plan. For the year ended December 31, 2013, the Employer matching contribution was calculated at the lower of either 50% of the first 4% of eligible compensation or the maximum amount determined by law. Employer contributions made for the year ended December 31, 2013 totaled $229,473.

At the end of the Plan year, the Company, at the discretion of its board of directors, may make a profit sharing contribution, as defined in the Plan document. The profit sharing contribution shall be allocated to the individual accounts of qualifying participants in the ratio that each qualifying participant's compensation for the Plan year bears to the total compensation of all qualifying Plan participants. No profit sharing contributions were made for the year ended December 31, 2013.

1. DESCRIPTION OF PLAN (CONTINUED)

Participant Accounts

The Plan is a participant-directed account plan. Participants direct the investment of their contributions into various investment options offered by the Plan. Participants' accounts are credited with participant contributions, Employer contributions and rollovers. Plan earnings and administrative expenses are allocated based upon a participant's account balance in proportion to the balances of all participants' accounts. The benefit to which a participant is entitled is the benefit that can be provided from the participants' account.

Vesting

Participants are always 100% vested in their elective deferrals, rollovers and all Employer contributions, plus actual earnings thereon. There are no forfeitures in this Plan.

Investment Options

Contributions are invested by Fidelity Management Trust Company ("Fidelity") according to the options elected by the participants. All participant and Employer contributions are directed by the participant among the available investment options. Investment earnings are automatically reinvested into the fund or portfolio from which they were derived. At December 31, 2013, the Plan offers investment options consisting of approximately 31 publicly traded open end mutual funds, which include 11 target retirement funds.

Notes Receivable from Participants

Participants may borrow from their participant accounts at a minimum of $1,000 not to exceed a maximum of $50,000, or 50% of the participant's vested account balance, whichever is less, reduced by the highest outstanding note balance during the prior twelve month period. The notes are secured by the participant's vested account balances and, except for funds used to acquire a principal residence, must have a repayment period of no greater than five years. The interest rate for notes outstanding as of December 31, 2013 was 3.75%. Interest rates are commensurate with local prevailing rates at the time of borrowing as determined by the Plan administrator. Principal and interest are paid ratably through payroll deductions made on a weekly basis. No more than two notes are allowed at any time and repayment of the entire balance is permitted at any time.

Payment of Benefits

Participants' benefits under the Plan are payable to participants or their beneficiaries upon termination of employment, normal retirement (age 65), disability, financial hardship or death. Benefits are payable in one lump sum payment. Hardship withdrawals are available, for reasons defined in the Plan document, as are distributions to participants who have attained the age of 59½.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Estimates

The preparation of financial statements in conformity with U.S. GAAP 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. Actual results may differ from those estimates.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2013 and 2012. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits

Benefits are recorded when paid.

Investment Valuation and Income Recognition

Investments are held in separate investment accounts that invest in publicly traded mutual funds and are stated at fair value based upon quoted market prices. Fund transactions are accounted for on the trade date (date the securities are purchased and sold). Interest income is accounted for on the accrual basis. Dividend income is accounted for on the ex-dividend date. The Plan presents in the statement of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments, which consists of realized gains and losses on investments bought and sold during the year and the unrealized appreciation/depreciation on investments held at the end of the year.

The Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The codification establishes a fair value hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring the most observable units to be used when available. Observable inputs are those that market participants would use in pricing the asset or liability based on market data obtained from sources independent of the Plan. Unobservable inputs reflect the Plan's assumptions about inputs market participants would use at the measurement date. The fair value hierarchy is categorized into three levels based on inputs as follows:

Level 1 – Valuation based on unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 – Valuation based on quoted prices for similar assets or liabilities in active markets; for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; or inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

Level 3 – Valuation based on inputs that are unobservable and significant to the overall fair value measurement.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Transfers

The Employer is affiliated, by common ownership, with Rubenstein Communications, Inc. ("RCI, Inc.") which sponsored another plan, the RCI Plan. Periodically, prior to the merger previously discussed (Note 1), employees of the Employer may have transferred to/from RCI, Inc. and at such time, the applicable participant's account balance would have been transferred to/from the Plan from/to the RCI Plan. This activity is recorded as a transfer in the accompanying statement of changes in net assets available for benefits. There were transfers out to the RCI Plan, prior to the merger, totaling $44,437 for the year ended December 31, 2013.

Investment Management Fees and Operating Expenses

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned on a daily basis and are reflected as a component of net appreciation in fair value of investments.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. The Plan is responsible for administrative expenses relating to the management of Plan assets incurred by the Plan except for certain transaction fees such as loan and distribution requests, which are paid by the participants upon request. These fees are allocated either proportionally based on the value of the account balances or as an equal dollar amount based on the number of participants in the Plan. The method of allocating the expenses depends on the nature of the expense itself.

Fees related to the management of the Plan totaled $1,028 for the year ended December 31, 2013.

Subsequent Events

The Plan has evaluated subsequent events through September 11, 2014, which is the date the financial statements were available to be issued.

3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

Fidelity, the trustee of the Plan, certified as to the completeness and accuracy of the investment assets, investment transactions, income and schedules of the investment assets as of December 31, 2013 and 2012 and for the year ended December 31, 2013.

The following information, included in the accompanying financial statements and supplemental schedule at December 31, 2013 and 2012, was obtained from data that has been prepared and certified by Fidelity.

	December 31, 2013	December 31, 2012
Investments, at fair value:		
Money market fund	$ 1,966,819	$ 1,849,988
Mutual funds	17,213,475	8,679,532
	19,180,294	10,529,520
Notes receivable from participants	246,600	158,532
	$ 19,426,894	**$ 10,688,052**

3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE (CONTINUED)

Investments which represent 5% or more of net assets are as follows:

	2013	2012
Fidelity Cash Management Prime Fund	$ 1,966,819	$ 1,849,988
Fidelity Advisor Freedom 2020 Class A	4,613,882	2,150,363
Fidelity Advisor Freedom 2025 Class A	2,672,066	2,189,778
Fidelity Advisor Freedom 2035 Class A	3,104,354	1,142,517
Fidelity Advisor Freedom 2015 Class A	1,009,631	735,792

During 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $773,026. This appreciation was entirely from investments in mutual funds.

	Year Ended December 31, 2013
Investment income:	
Net appreciation in fair value of investments	$ 773,026
Interest and dividend income	823,650
Total investment income	1,596,676
Interest income on notes receivable from participants	6,227
	$ 1,602,903

4. FAIR VALUE MEASUREMENTS

The following tables present by level, within the fair value hierarchy, the Plan investment assets at fair value, as of December 31, 2013 and 2012. In accordance with FASB ASC 820, investment assets are classified in their entirety based upon the lowest level of input that is significant to the fair value measurement. There have been no changes to the valuation methodologies used at December 31, 2013 and 2012.

Fair Value Measurements at December 31, 2013

	Total	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mid/Large Cap Stock Funds	$ 15,839,055	$ 15,839,055	$ -	$ -
Money Market Funds	1,966,819	1,966,819	-	-
Fixed Income Funds	558,838	558,838	-	-
International Funds	637,916	637,916	-	-
Small Cap Stock Funds	177,666	177,666	-	-
Mutual Funds:	**$ 19,180,294**	**$ 19,180,294**	**$ -**	**$ -**

Fair Value Measurements at December 31, 2012

	Total	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mid/Large Cap Stock Funds	$ 8,201,865	8,201,865	$ -	$ -
Money Market Funds	1,849,988	1,849,988	-	-
Fixed Income Funds	272,370	272,370	-	-
International Funds	136,394	136,394	-	-
Small Cap Stock Funds	68,903	68,903	-	-
Mutual Funds:	**$ 10,529,520**	**$ 10,529,520**	**$ -**	**$ -**

Level 1 inputs to the valuation methodology include quoted market prices in active markets. Mutual funds are valued at the quoted market price of shares held by the Plan at year end.

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

5. TAX STATUS

The volume submitter plan adopted by the Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the volume submitter plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The volume submitter plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore, believes that the Plan is qualified and the related trust is tax-exempt.

U.S. GAAP requires 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 tax 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 is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

6. RISKS AND UNCERTAINTIES

The Plan provides for various investment options in separate investment accounts that invest in publicly traded mutual funds. These investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with these investments, it is at least reasonably possible that changes in the values of these investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

7. PLAN TERMINATION

Although it has not expressed any intent to do so, the Employer has the right at any time to terminate the Plan in accordance with ERISA by delivering to the trustee written notice of such termination. Upon termination of the Plan, no further contributions will be made to the Plan.

8. RELATED PARTIES/PARTIES-IN-INTEREST

Certain Plan investments are shares in mutual funds managed by Fidelity, the trustee of the Plan, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of investments, as they are paid through revenue sharing, rather than a direct payment.

SUPPLEMENTAL SCHEDULE

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

SUPPLEMENTAL SCHEDULE

FOR THE YEAR ENDED DECEMBER 31, 2013

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

Plan Sponsor EIN: 13-2540840

Plan Number: 001

(a)	(b) Identity of issuer, 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
	Invesco Mid Cap Core Equity Fund Class A	Mutual Fund		$ 101,778
	American Century Inflation Protection Bond Fund Class A	Mutual Fund		93,876
	BlackRock Equity Dividend Fund Investor Class A	Mutual Fund		629,254
	BlackRock Global Allocation Fund Class A	Mutual Fund		373,270
	Janus Overseas Fund S	Mutual Fund		74,795
	JPMorgan Equity Index Fund Class A	Mutual Fund		261,735
	Perkins Mid Cap Value Fund Class S	Mutual Fund		134,197
	PIMCO Total Return Fund Class A	Mutual Fund		246,921
	Victory Diversified Stock Fund Class A	Mutual Fund		45,609
	Columbia Acorn International Fund Class A	Mutual Fund		148,955
	Oppenheimer Discovery Mid Cap Growth Fund A	Mutual Fund		156,858
*	Fidelity Advisor Freedom 2010 Class A	Mutual Fund		20,355
*	Fidelity Advisor Freedom 2005 Class A	Mutual Fund		780,812
*	Fidelity Advisor Freedom 2015 Class A	Mutual Fund		1,009,631
*	Fidelity Advisor Freedom 2020 Class A	Mutual Fund		4,613,882
*	Fidelity Advisor Freedom 2025 Class A	Mutual Fund		2,672,066
*	Fidelity Advisor Freedom 2030 Class A	Mutual Fund		552,110
*	Fidelity Advisor Freedom 2035 Class A	Mutual Fund		3,104,354
*	Fidelity Advisor Freedom 2040 Class A	Mutual Fund		544,991
*	Fidelity Advisor Freedom 2045 Class A	Mutual Fund		417,957
*	Fidelity Advisor Freedom 2050 Class A	Mutual Fund		313,244
*	Fidelity Advisor Freedom 2055 Class A	Mutual Fund		27,817
*	Fidelity Advisor Government Income Fund Class A	Mutual Fund		30,043
*	Fidelity Advisor High Income Fund Class A	Mutual Fund		27,916
*	Fidelity Advisor International Discovery Fund Class A	Mutual Fund		40,896
*	Fidelity Advisor Floating Rate High Income Fund Class A	Mutual Fund		94,189
*	Fidelity Advisor New Insights Fund Class A	Mutual Fund		452,405
*	Fidelity Advisor Small Cap Fund Class A	Mutual Fund		117,664
*	Fidelity Advisor Small Cap Value Fund Class A	Mutual Fund		60,002
*	Fidelity Advisor Strategic Income Fund Class A	Mutual Fund		65,893
*	Fidelity Cash Management Prime Fund	Money Market Fund		1,966,819
				19,180,294
*	Notes receivable from participants	Earning interest at 3.75%, 5 year maturities, collateralized by participant account balances	-	246,600
			$ -	**$ 19,426,894**

* Party-in-interest

** Cost is not required as Plan is participant directed.

See independent auditor's report.

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

FINANCIAL STATEMENTS

DECEMBER 31, 2013 AND 2012

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

TABLE OF CONTENTS

INDEPENDENT AUDITOR'S REPORT	1 - 2
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	3
Statement of Changes in Net Assets Available for Benefits	4
Notes to Financial Statements	5 - 11
SUPPLEMENTARY SCHEDULE	
Form 5500 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)	12

MBAF
CERTIFIED PUBLIC ACCOUNTANTS AND ADVISORS

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
Rubenstein 401(K) Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Rubenstein 401(K) Plan (formerly Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan) (the "Plan"), which comprise 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

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

Auditor's Responsibility

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

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee 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 trustee is complete and accurate.

Disclaimer of Opinion

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

Emphasis of Matter

As discussed in Note 1, effective November 1, 2013, the RCI, Inc. 401(k) & Profit Sharing Plan was merged into the Plan.

Other Matter

The supplemental schedule of Form 5500 Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2013 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for 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 this supplemental schedule.

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

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



New York, NY
September 11, 2014

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2013 AND 2012

	2013	2012
ASSETS:		
Investments, at fair value	$ 19,180,294	$ 10,529,520
Receivables:		
Contribution receivable - employer	229,473	-
Notes receivable from participants	246,600	158,532
NET ASSETS AVAILABLE FOR BENEFITS	**$ 19,656,367**	**$ 10,688,052**

The accompanying notes are an integral part of the financial statements.

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2013

ADDITIONS TO NET ASSETS ATTRIBUTABLE TO:		
INVESTMENT INCOME:		
Net appreciation in fair value of investments	$	773,026
Interest and dividend income		823,650
		1,596,676
INTEREST INCOME ON NOTES RECEIVABLE FROM PARTICIPANTS		6,227
CONTRIBUTIONS:		
Participant		676,683
Employer		229,473
Rollovers		2,575
		908,731
		2,511,634
DEDUCTIONS FROM NET ASSETS ATTRIBUTABLE TO:		
Benefits paid to participants		418,689
Corrective distributions		722
Administrative expenses		1,028
		420,439
NET INCREASE		2,091,195
TRANSFERS OUT TO ANOTHER PLAN (NOTE 2)		(44,437)
TRANSFERS IN FROM ANOTHER PLAN (NOTE 1)		6,921,557
NET ASSETS AVAILABLE FOR BENEFITS - BEGINNING OF YEAR		10,688,052
NET ASSETS AVAILABLE FOR BENEFITS - END OF YEAR	**$**	**19,656,367**

The accompanying notes are an integral part of the financial statements.

1. DESCRIPTION OF PLAN

General

The following plan description of the Rubenstein 401(K) Plan (formerly Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan) (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions. Effective July 1, 1984, Rubenstein Associates, Inc. (the "Company" or the "Employer") established the Plan. The Plan is a defined contribution plan consisting of two component parts, a 401(k) component and a profit sharing component, and covers all eligible employees of the Company. The Plan is subject to the provisions of the Employment Retirement Income Security Act of 1974 ("ERISA"), as amended.

Plan Merger

Effective November 1, 2013, the RCI, Inc. 401(k) & Profit Sharing Plan (the "RCI Plan") was merged into the Plan. On that date, all assets of the RCI Plan, totaling $6,921,557, were transferred into the Plan. The sponsor of the RCI Plan is related to the Company through common ownership. The terms and investment options of the RCI Plan were substantially similar to those of the Plan. In addition, the assets of the RCI Plan were held by the same trustee of the Plan. In connection with this merger, the Plan name was changed from Rubenstein Associates, Inc. 401(K) & Profit Sharing Plan to Rubenstein 401(K) Plan.

Eligibility

Employees must be twenty-one years of age or more to be eligible to participate in elective deferrals. No minimum time of employment is required by the Plan for participants to make elective deferrals. Employees must complete one year of service, including 1,000 hours of service, and be employed on the last day of the year to receive a matching contribution and two years of service, including 1,000 hours of service per year, to receive an allocation of the profit sharing contribution.

Elective Deferrals

The Plan allows each participant to contribute up to 100%, in increments of 1%, of annual compensation, as defined, to the Plan. The maximum annual contribution is determined by law. After-tax contributions, rollovers from other qualified plans, and catch-up contributions are allowed.

Employer Contributions

The Company, at its discretion, may contribute annually a matching contribution to eligible participants based on each participant's eligible compensation. In addition, the Company, at the discretion of the board of directors, may make qualified matching contributions or qualified non-elective contributions to the Plan. For the year ended December 31, 2013, the Employer matching contribution was calculated at the lower of either 50% of the first 4% of eligible compensation or the maximum amount determined by law. Employer contributions made for the year ended December 31, 2013 totaled $229,473.

At the end of the Plan year, the Company, at the discretion of its board of directors, may make a profit sharing contribution, as defined in the Plan document. The profit sharing contribution shall be allocated to the individual accounts of qualifying participants in the ratio that each qualifying participant's compensation for the Plan year bears to the total compensation of all qualifying Plan participants. No profit sharing contributions were made for the year ended December 31, 2013.

1. DESCRIPTION OF PLAN (CONTINUED)

Participant Accounts

The Plan is a participant-directed account plan. Participants direct the investment of their contributions into various investment options offered by the Plan. Participants' accounts are credited with participant contributions, Employer contributions and rollovers. Plan earnings and administrative expenses are allocated based upon a participant's account balance in proportion to the balances of all participants' accounts. The benefit to which a participant is entitled is the benefit that can be provided from the participants' account.

Vesting

Participants are always 100% vested in their elective deferrals, rollovers and all Employer contributions, plus actual earnings thereon. There are no forfeitures in this Plan.

Investment Options

Contributions are invested by Fidelity Management Trust Company ("Fidelity") according to the options elected by the participants. All participant and Employer contributions are directed by the participant among the available investment options. Investment earnings are automatically reinvested into the fund or portfolio from which they were derived. At December 31, 2013, the Plan offers investment options consisting of approximately 31 publicly traded open end mutual funds, which include 11 target retirement funds.

Notes Receivable from Participants

Participants may borrow from their participant accounts at a minimum of $1,000 not to exceed a maximum of $50,000, or 50% of the participant's vested account balance, whichever is less, reduced by the highest outstanding note balance during the prior twelve month period. The notes are secured by the participant's vested account balances and, except for funds used to acquire a principal residence, must have a repayment period of no greater than five years. The interest rate for notes outstanding as of December 31, 2013 was 3.75%. Interest rates are commensurate with local prevailing rates at the time of borrowing as determined by the Plan administrator. Principal and interest are paid ratably through payroll deductions made on a weekly basis. No more than two notes are allowed at any time and repayment of the entire balance is permitted at any time.

Payment of Benefits

Participants' benefits under the Plan are payable to participants or their beneficiaries upon termination of employment, normal retirement (age 65), disability, financial hardship or death. Benefits are payable in one lump sum payment. Hardship withdrawals are available, for reasons defined in the Plan document, as are distributions to participants who have attained the age of 59½.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Estimates

The preparation of financial statements in conformity with U.S. GAAP 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. Actual results may differ from those estimates.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2013 and 2012. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits

Benefits are recorded when paid.

Investment Valuation and Income Recognition

Investments are held in separate investment accounts that invest in publicly traded mutual funds and are stated at fair value based upon quoted market prices. Fund transactions are accounted for on the trade date (date the securities are purchased and sold). Interest income is accounted for on the accrual basis. Dividend income is accounted for on the ex-dividend date. The Plan presents in the statement of changes in net assets available for benefits the net appreciation (depreciation) in the fair value of its investments, which consists of realized gains and losses on investments bought and sold during the year and the unrealized appreciation/depreciation on investments held at the end of the year.

The Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, Fair Value Measurements and Disclosures defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The codification establishes a fair value hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring the most observable units to be used when available. Observable inputs are those that market participants would use in pricing the asset or liability based on market data obtained from sources independent of the Plan. Unobservable inputs reflect the Plan's assumptions about inputs market participants would use at the measurement date. The fair value hierarchy is categorized into three levels based on inputs as follows:

Level 1 – Valuation based on unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 – Valuation based on quoted prices for similar assets or liabilities in active markets; for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; or inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

Level 3 – Valuation based on inputs that are unobservable and significant to the overall fair value measurement.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Transfers

The Employer is affiliated, by common ownership, with Rubenstein Communications, Inc. ("RCI, Inc.") which sponsored another plan, the RCI Plan. Periodically, prior to the merger previously discussed (Note 1), employees of the Employer may have transferred to/from RCI, Inc. and at such time, the applicable participant's account balance would have been transferred to/from the Plan from/to the RCI Plan. This activity is recorded as a transfer in the accompanying statement of changes in net assets available for benefits. There were transfers out to the RCI Plan, prior to the merger, totaling $44,437 for the year ended December 31, 2013.

Investment Management Fees and Operating Expenses

Investment management fees and operating expenses charged to the Plan for investments in the various funds are deducted from income earned on a daily basis and are reflected as a component of net appreciation in fair value of investments.

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Fees related to the management of the Plan totaled $1,028 for the year ended December 31, 2013.

Subsequent Events

The Plan has evaluated subsequent events through September 11, 2014, which is the date the financial statements were available to be issued.

3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

Fidelity, the trustee of the Plan, certified as to the completeness and accuracy of the investment assets, investment transactions, income and schedules of the investment assets as of December 31, 2013 and 2012 and for the year ended December 31, 2013.

The following information, included in the accompanying financial statements and supplemental schedule at December 31, 2013 and 2012, was obtained from data that has been prepared and certified by Fidelity.

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	19,180,294	10,529,520
Notes receivable from participants	246,600	158,532
	$ 19,426,894	**$ 10,688,052**

3. INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE (CONTINUED)

Investments which represent 5% or more of net assets are as follows:

	2013	2012
Fidelity Cash Management Prime Fund	$ 1,966,819	$ 1,849,988
Fidelity Advisor Freedom 2020 Class A	4,613,882	2,150,363
Fidelity Advisor Freedom 2025 Class A	2,672,066	2,189,778
Fidelity Advisor Freedom 2035 Class A	3,104,354	1,142,517
Fidelity Advisor Freedom 2015 Class A	1,009,631	735,792

During 2013, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by $773,026. This appreciation was entirely from investments in mutual funds.

	Year Ended December 31, 2013
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Total investment income	1,596,676
Interest income on notes receivable from participants	6,227
	$ 1,602,903

4. FAIR VALUE MEASUREMENTS

The following tables present by level, within the fair value hierarchy, the Plan investment assets at fair value, as of December 31, 2013 and 2012. In accordance with FASB ASC 820, investment assets are classified in their entirety based upon the lowest level of input that is significant to the fair value measurement. There have been no changes to the valuation methodologies used at December 31, 2013 and 2012.

Fair Value Measurements at December 31, 2013

	Total	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mid/Large Cap Stock Funds	$ 15,839,055	$ 15,839,055	$ -	$ -
Money Market Funds	1,966,819	1,966,819	-	-
Fixed Income Funds	558,838	558,838	-	-
International Funds	637,916	637,916	-	-
Small Cap Stock Funds	177,666	177,666	-	-
Mutual Funds:	**$ 19,180,294**	**$ 19,180,294**	**$ -**	**$ -**

Fair Value Measurements at December 31, 2012

	Total	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mid/Large Cap Stock Funds	$ 8,201,865	8,201,865	$ -	$ -
Money Market Funds	1,849,988	1,849,988	-	-
Fixed Income Funds	272,370	272,370	-	-
International Funds	136,394	136,394	-	-
Small Cap Stock Funds	68,903	68,903	-	-
Mutual Funds:	**$ 10,529,520**	**$ 10,529,520**	**$ -**	**$ -**

Level 1 inputs to the valuation methodology include quoted market prices in active markets. Mutual funds are valued at the quoted market price of shares held by the Plan at year end.

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

5. TAX STATUS

The volume submitter plan adopted by the Plan obtained its latest determination letter on March 31, 2008, in which the Internal Revenue Service stated that the volume submitter plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The volume submitter plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore, believes that the Plan is qualified and the related trust is tax-exempt.

U.S. GAAP requires 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 tax 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 is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2010.

6. RISKS AND UNCERTAINTIES

The Plan provides for various investment options in separate investment accounts that invest in publicly traded mutual funds. These investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with these investments, it is at least reasonably possible that changes in the values of these investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

7. PLAN TERMINATION

Although it has not expressed any intent to do so, the Employer has the right at any time to terminate the Plan in accordance with ERISA by delivering to the trustee written notice of such termination. Upon termination of the Plan, no further contributions will be made to the Plan.

8. RELATED PARTIES/PARTIES-IN-INTEREST

Certain Plan investments are shares in mutual funds managed by Fidelity, the trustee of the Plan, therefore, these transactions qualify as party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of investments, as they are paid through revenue sharing, rather than a direct payment.

SUPPLEMENTAL SCHEDULE

RUBENSTEIN 401(K) PLAN

(FORMERLY RUBENSTEIN ASSOCIATES, INC. 401(K) & PROFIT SHARING PLAN)

SUPPLEMENTAL SCHEDULE

FOR THE YEAR ENDED DECEMBER 31, 2013

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

Plan Sponsor EIN: 13-2540840

Plan Number: 001

(a)	(b) Identity of issuer, 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
	Invesco Mid Cap Core Equity Fund Class A	Mutual Fund		$ 101,778
	American Century Inflation Protection Bond Fund Class A	Mutual Fund		93,876
	BlackRock Equity Dividend Fund Investor Class A	Mutual Fund		629,254
	BlackRock Global Allocation Fund Class A	Mutual Fund		373,270
	Janus Overseas Fund S	Mutual Fund		74,795
	JPMorgan Equity Index Fund Class A	Mutual Fund		261,735
	Perkins Mid Cap Value Fund Class S	Mutual Fund		134,197
	PIMCO Total Return Fund Class A	Mutual Fund		246,921
	Victory Diversified Stock Fund Class A	Mutual Fund		45,609
	Columbia Acorn International Fund Class A	Mutual Fund		148,955
	Oppenheimer Discovery Mid Cap Growth Fund A	Mutual Fund		156,858
*	Fidelity Advisor Freedom 2010 Class A	Mutual Fund		20,355
*	Fidelity Advisor Freedom 2005 Class A	Mutual Fund		780,812
*	Fidelity Advisor Freedom 2015 Class A	Mutual Fund		1,009,631
*	Fidelity Advisor Freedom 2020 Class A	Mutual Fund		4,613,882
*	Fidelity Advisor Freedom 2025 Class A	Mutual Fund		2,672,066
*	Fidelity Advisor Freedom 2030 Class A	Mutual Fund		552,110
*	Fidelity Advisor Freedom 2035 Class A	Mutual Fund		3,104,354
*	Fidelity Advisor Freedom 2040 Class A	Mutual Fund		544,991
*	Fidelity Advisor Freedom 2045 Class A	Mutual Fund		417,957
*	Fidelity Advisor Freedom 2050 Class A	Mutual Fund		313,244
*	Fidelity Advisor Freedom 2055 Class A	Mutual Fund		27,817
*	Fidelity Advisor Government Income Fund Class A	Mutual Fund		30,043
*	Fidelity Advisor High Income Fund Class A	Mutual Fund		27,916
*	Fidelity Advisor International Discovery Fund Class A	Mutual Fund		40,896
*	Fidelity Advisor Floating Rate High Income Fund Class A	Mutual Fund		94,189
*	Fidelity Advisor New Insights Fund Class A	Mutual Fund		452,405
*	Fidelity Advisor Small Cap Fund Class A	Mutual Fund		117,664
*	Fidelity Advisor Small Cap Value Fund Class A	Mutual Fund		60,002
*	Fidelity Advisor Strategic Income Fund Class A	Mutual Fund		65,893
*	Fidelity Cash Management Prime Fund	Money Market Fund		1,966,819
				19,180,294
*	Notes receivable from participants	Earning interest at 3.75%, 5 year maturities, collateralized by participant account balances	-	246,600
			$ -	**$ 19,426,894**

* Party-in-interest

** Cost is not required as Plan is participant directed.

See independent auditor's report.