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), 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

2009

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2009 or fiscal plan year beginning 11/01/2007 and ending 12/31/2007

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
UNIVERSAL SILENCER, LLC RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 11/01/2007

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
UNIVERSAL SILENCER, LLC

1925 HIGHWAY 51 W
STOUGHTON, WI 53589

2b Employer Identification Number (EIN) 20-5737683

2c Sponsor's telephone number 608-873-4272

2d Business code (see instructions) 333610

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.	08/09/2010	PETER COLLINS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/09/2010	PETER COLLINS
	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

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
UNIVERSAL SILENCER, LLC

1925 HIGHWAY 51 W
STOUGHTON, WI 53589

3b Administrator's EIN
20-5737683

3c Administrator's telephone number
608-873-4272

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

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	139
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**	138
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	1
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	139
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	139
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	120
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 Characteristic Codes in the instructions:
2E 2F 2G 2J 2K 3E

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

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

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

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

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 11/01/2007 and ending 12/31/2007

A Name of plan
UNIVERSAL SILENCER, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
UNIVERSAL SILENCER, LLC

D Employer Identification Number (EIN)
20-5737683

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
MINNESOTA LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
41-0417830	66168	066809	138	11/01/2007	12/31/2007

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	759798
5	Current value of plan's interest under this contract in separate accounts at year end	5	8175577

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

(3) ☐ guaranteed investment (4) ☒ other ▶ GUARANTEED RETURN ACCOUNT

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)	758177		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	1843		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6) Total additions			7c(6)	760020
d	Total of balance and additions (add **b** and **c(6)**)			7d	760020
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)	222		
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	222
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	759798

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2009

This Form is Open to Public Inspection.

For calendar plan year 2009 or fiscal plan year beginning 11/01/2007 and ending 12/31/2007

A Name of plan
UNIVERSAL SILENCER, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
UNIVERSAL SILENCER, LLC

D Employer Identification Number (EIN)
20-5737683

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE EQUITY INDEX I

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-011	P	19069

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE GROWTH EQ IX

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-015	P	1082170

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-016	P	529518

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-102	P	852560

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL/MID GRO EQ III

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-126	P	441016

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-103	P	404169

a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP VALUE EQ IV

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
41-0417830-122	P	232314

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE GROWTH EQ X			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-121	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	62003
a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE VALUE EQ XIII			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-106	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1266807
a Name of MTIA, CCT, PSA, or 103-12 IE: INT'L GROWTH II			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-119	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	511759
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL VALUE EQ XII			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-125	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	366072
a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI SECTOR BOND I			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-123	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	673299
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTRATEGY I			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-026	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	575425
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTRATEGY II			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-027	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	133948
a Name of MTIA, CCT, PSA, or 103-12 IE: LIFESTRATEGY III			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-028	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	89589
a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE VALUE EQ III			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-030	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	444624
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP VALUE EQ I			
b Name of sponsor of entity listed in (a): MINNESOTA LIFE INSURANCE COMPANY			
c EIN-PN 41-0417830-043	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	104173

a Name of MTIA, CCT, PSA, or 103-12 IE: INTMD TRM BOND IND I

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

c EIN-PN 41-0417830-046	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 255452

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

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

c EIN-PN 41-0417830-077	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 131609

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2009

This Form is Open to Public Inspection

For calendar plan year 2009 or fiscal plan year beginning 11/01/2007 and ending 12/31/2007

A Name of plan
UNIVERSAL SILENCER, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
UNIVERSAL SILENCER, LLC

D Employer Identification Number (EIN)
20-5737683

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		28700
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		8175577
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		759798
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	0	8964075
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	0	8964075

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)	8662	
(B) Participants	2a(1)(B)	45357	
(C) Others (including rollovers)	2a(1)(C)	8902327	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		8956346
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	1843	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1843
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-22815
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		8935374
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		0
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		8935374
l Transfers of assets:			
(1) To this plan	2l(1)		28700
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: MCGLADREY & PULLEN, LLP (2) EIN: 42-0714325

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 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 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		45764
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	
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	
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)

McGladrey & Pullen
Certified Public Accountants

Universal Silencer, LLC Retirement Plan

Financial Report
12.31.2008

McGladrey & Pullen, LLP is a member firm of RSM International,
an affiliation of separate and independent legal entities.

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McGladrey & Pullen
Certified Public Accountants

Independent Auditor's Report

To the Plan Administrator
Universal Silencer, LLC Retirement Plan
Stoughton, Wisconsin

We were engaged to audit the financial statements and supplemental schedules of Universal Silencer, LLC Retirement Plan as of December 31, 2008 and 2007, and for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the United States 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 investment information summarized in Note 4, which was certified or provided by Minnesota Life Insurance Company, the custodian of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the custodian holds the Plan's investment assets and executes investment transactions. As disclosed in Note 4, the plan administrator has obtained certifications from the custodian regarding the completeness and accuracy of the investment information provided to the plan administrator by the custodian as of December 31, 2008 and 2007, and for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2008.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedules taken as a whole. The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified or provided by the custodian, has 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 United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

McGladrey & Pullen, LLP

Janesville, Wisconsin
October 13, 2009

Universal Silencer, LLC Retirement Plan

Statements of Net Assets Available for Benefits
December 31, 2008 and 2007

	2008	2007
Assets		
Investments at fair value:		
Group annuity contract:		
Pooled separate accounts	$ 5,907,286	$ 8,175,576
General account	1,681,336	759,798
Participant loans	39,564	28,701
Total investments	7,628,186	8,964,075
Receivables		
Participant contributions	17,867	8,776
Employer contributions	525,143	40,801
Total receivables	543,010	49,577
Total assets	8,171,196	9,013,652
Liabilities	-	-
Net assets available for benefits	$ 8,171,196	$ 9,013,652

See Notes to Financial Statements.

Universal Silencer, LLC Retirement Plan

Statements of Changes in Net Assets Available for Benefits
Year Ended December 31, 2008 and Period from November 15, 2007 through December 31, 2007

	Year Ended December 31, 2008	Period from November 15, 2008 through December 31, 2007
Additions		
Investment income(loss)		
Net depreciation in fair value of pooled separate accounts	$ (3,558,821)	$ (22,815)
Interest	72,660	1,843
Total investment loss	(3,486,161)	(20,972)
Contributions		
Participant	519,028	54,133
Employer	776,405	49,464
Rollover	1,556,101	8,931,027
Total contributions	2,851,534	9,034,624
Total additions	(634,627)	9,013,652
Deductions		
Benefits paid to participants	202,645	-
Fees	5,184	-
Total deductions	207,829	-
Net increase (decrease)	(842,456)	9,013,652
Net assets available for benefits:		
Beginning of period	9,013,652	-
End of period	$ 8,171,196	$ 9,013,652

See Notes to Financial Statements.

Note 1. Description of Plan

The following description of the Universal Silencer, LLC (the Company) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General: The Plan was established November 15, 2007, to provide future security for eligible employees by accumulating funds and sharing in the Company's profits. All employees of the Company become eligible to participate in the Plan immediately upon being hired. In order for employees to receive an allocation of the company profit sharing contribution, they must complete 1,000 hours of service during the plan year and be employed on the last day of the plan year. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions: Participants may contribute a percentage of pretax annual compensation and/or post-tax annual compensation up to the maximum amount allowable by the Internal Revenue Service (IRS). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Each year the Company may make a discretionary integrate profit sharing contribution. The amount is determined annually by the Company. Profit sharing contributions were approximately $485,300 for 2008 and none for 2007. In addition, the Company utilizes the safe harbor matching contribution formula which calculates the matching contribution at 100% of the employees' deferrals up to 3% of the participant's eligible compensation, plus 50% of the employees' deferrals on the next 2% of the participant's eligible compensation. Contributions are subject to certain limitations.

Participant accounts: Each participant's account is credited with the participant's contributions, and allocations of (a) Company contributions and (b) plan earnings and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their voluntary and company matching contributions plus actual earnings thereon. Vesting in the remainder of their accounts is based on years of continuous service. A participant is 100 percent vested after five years of credited service or on termination of service due to death, disability or reaching age 65.

Investment options: Upon enrollment in the Plan, participants direct all employer and participant contributions in selected investments as made available and determined by the Plan Administrator. Participants may change their investment options at any time throughout the year.

Payment of benefits: On termination of service for any reason, a participant may elect to receive an amount equal to the participant's vested account balance in a lump-sum distribution or partial withdrawal.

Participant loans: The Plan allows participants to borrow, one loan at a time, up to the lesser of $50,000 or 50 percent of their vested account balance with a minimum loan amount of $1,000. Loan terms are not to exceed five years unless the loan is for the purchase of a primary residence, in which case the Plan Administrator may permit a longer repayment term. The loans are secured by the balance of the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined by the plan administrator. Interest rates range from 5.00 to 9.25 percent. Principle and interest is paid ratably by participants.

Forfeited accounts: At December 31, 2008 and 2007, there were no forfeited nonvested amounts. In the event there were any forfeited nonvested amounts, these amounts would be used to pay plan expenses and then reduce employer contributions.

Note 2. Significant Accounting Policies

Basis of accounting: The financial statements of the Plan are prepared under the accrual method of accounting.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Plan invests in investment contracts through an insurance company contract. The statements of net assets available for benefits presents the fair value and contract value of the investment in the insurance company contract as fair value approximates contract value. The statements of changes in net assets available for benefits are prepared on a contract value basis.

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

Payment of benefits: Benefits are recorded when paid.

Fair value measurements: The Plan adopted Financial Accounting Standards Board Statement No. 157, *Fair Value Measurements* (FAS 157) effective January 1, 2008. FAS 157 establishes a framework for measuring fair value and expands disclosure of fair value. The adoption of FAS 157 did not have a material impact on the financial statements or results of operations on the Plan. FAS 157 applies to all assets and liabilities that are measured on a fair value basis. See Note 5 for additional information.

Investment transactions and related investment income: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

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

Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near-term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

The credit and liquidity crisis in the United States and throughout the global financial system has resulted in substantial volatility in financial markets and the banking system. These and other economic events may have caused significant volatility on the Plan's investment portfolio subsequent to year-end.

Note 3. Investments

The following presents the fair value of investments which represent 5 percent of more of the Plan's net assets as of December 31.

	2008	2007
Investments as reported by the insurance company:		
Pooled separate accounts:		
International Growth II	$ *	$ 511,759
International Value II	645,299	852,560
Large Growth Equity IX	801,733	1,082,170
Large Equity II	*	529,518
Large Value Equity XIII	932,749	1,266,807
Lifestrategy I	*	575,425
Multisector Bond I	612,267	673,299
General Account	1,681,336	759,798

* Represents less than 5 percent of net assets.

Note 4. Information Certified or Provided by Minnesota Life Insurance Company, the Plan Custodian

The following is a summary of the investment information as of December 31, 2008 and 2007, and for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007, included throughout the Plan's financial statements and supplemental schedules, that was prepared by or derived from information provided by the custodian and furnished to the plan administrator. The plan administrator has obtained certifications from the custodian that information provided to the plan administrator by the custodian related to the following investments is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the United States Department of Labor's (DOL's) Rules and Regulations for Reporting and Disclosure under ERISA, the plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information in Notes 3, 4, 5 and 6 and the supplemental schedules related to the following investments:

	December 31,	
	2008	2007
Investments:		
Pooled separate accounts, at fair value	$ 5,907,286	$ 8,175,576
Participant loans, at approximate fair value	39,564	28,701
General account, at contract and approximate fair value	1,681,336	759,798

Minnesota Life Insurance Company also certified to the completeness and accuracy of $3,558,821 and $22,815 of net depreciation in fair value of investments for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007, respectively, and $72,660 and $1,843 of interest for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007, respectively, related to the aforementioned investments.

Note 5. Fair Value Measurements

FAS 157 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurement) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FAS 157 are described below:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
Level 2	Inputs to the valuation methodology include: • Quoted prices for similar assets or liabilities in active markets; • Quoted prices for identical or similar assets or liabilities in inactive markets; • Inputs other than quoted prices that are observable for the asset or liability; • Inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specific (contractual) term the Level 2 input must be observable for substantially the full term of the asset or liability.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2008.

Pooled Separate Accounts: The fair value of the investments in the insurance company's pooled separate accounts are determined by the insurance company and represents the fair value of the underlying investments held in the pooled separate accounts.

General account: The Plan's investments in the insurance company general account of Minnesota Life Insurance Company are stated at fair value as calculated by discounting the related cash flows based on current yields of similar instruments with comparable durations. Fair value approximates contract value.

Participant Loans: Participant loans are valued at amortized cost, which approximates fair value.

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

Note 5. Fair Value Measurements (Continued)

The following table presents the Plan's fair value hierarchy for those assets measured at fair value on a recurring basis as of December 31, 2008:

		Assets Measured at Fair Value		
Description	Total	Level 1	Level 2	Level 3
Pooled separate accounts	$ 5,907,286	$ -	$ 5,907,286	$ -
General account	1,681,336	-	-	1,681,336
Participant loans	39,564	-	-	39,564
	$ 7,628,186	$ -	$ 5,907,286	$ 1,720,900

The table below sets forth a summary of changes in fair value of the Plan's Level 3 assets for the year ended December 31, 2008:

	Participant Loans	General Accounts
Balance, beginning of year	$ 28,701	$ 759,798
Purchases, sales, issuances and settlements, net	10,863	921,538
Balance, end of year	$ 39,564	$ 1,681,336

Note 6. Investment Contract with Insurance Company

The Plan entered into a benefit-responsive investment contract with Minnesota Life Insurance Company (Minnesota Life). Minnesota Life maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract issuer is contractually obligated to repay the principal and a specified interest rate that is determined annually and is guaranteed to the Plan. As described in Note 2, because the contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. Contract value, as reported to the Plan by Minnesota Life, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer but it may not be less than 1.5 percent. Such interest rates are reviewed on a quarterly basis for resetting.

	2008	2007
Average Yields:		
Based on actual earnings	4.28%	4.23%
Based on interest rate credited to participants	3.88%	5.77%

Note 6. Investment Contract with Insurance Company (Continued)

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the plan documents (including complete or partial termination or merger with another plan), (2) changes to plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under Employee Retirement Income Security Act of 1974. The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

Note 7. Related Party Transactions

The Plan's investments are managed by Minnesota Life Insurance Company, the custodian, and, therefore, these transactions qualify as party-in-interest transactions. Fees paid to the custodian were approximately $5,200 and none for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007.

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

Note 8. Income Tax Status

Effective November 15, 2007, the Plan adopted a non-standardized form of a prototype plan sponsored by Minnesota Life Insurance Company. The prototype plan has received an opinion letter from the Internal Revenue Service as to the prototype plan's qualified status. The prototype plan opinion letter has been relied upon by this Plan. The Plan has been amended since the prototype plan received the opinion letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 9. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of the Plan's termination, participants would become 100 percent vested in their account.

Note 10. Prohibited Transactions

During the 2008 and 2007 plan years, the Plan sponsor inadvertently failed to deposit approximately $24,400 and $47,700, respectively, of participant deferral contributions and loan repayments within the required timeframe as stated by the United States Department of Labor (DOL). The DOL considers late deposits to be prohibited transactions. The Plan sponsor will file Form 5330 and pay applicable excise tax. The excise tax payments will be made from the Plan sponsor's assets and not from assets of the Plan.

Note 11. Reconciliation of Financial Statements to Form 5500

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

	2008	2007
Net assets available for benefits per the financial statements	$ 8,171,196	$ 9,013,652
Participant contributions receivable	-	(8,776)
Employer contributions receivable	-	(40,801)
Net assets available for benefits per the Form 5500	$ 8,171,196	$ 8,964,075

The following is a reconciliation of the change in net assets per the financial statements for the year ended December 31, 2008 and for the period from November 15, 2007 through December 31, 2007 to Form 5500:

	2008	2007
Net increase (decrease) in assets available for benefits per the financial statements	$ (842,456)	$ 9,013,652
Participant contributions	-	(8,776)
Employer contributions	-	(40,801)
Rollovers	-	(28,700)
Net increase (decrease) in net assets available for benefits per the Form 5500	$ (842,456)	$ 8,935,375

Universal Silencer, LLC Retirement Plan

Form 5500, Schedule H, Line 4a - Schedule of Delinquent Participant Contributions
Year Ended December 31, 2008

Identity of Party Involved	Relationship to Plan, Employer, or Other Party-in-interest	Description of Transaction	Cost of Asset	Fair Value of Asset	Net Gain or Loss on Transaction
Universal Silencer, LLC	Plan sponsor	Delinquent 2008 contributions **	$ 24,439	$ 24,439	n/a
Universal Silencer, LLC	Plan sponsor	Delinquent 2007 contributions *	$ 47,745	$ 47,745	n/a

* Participant contributions were remitted untimely during 2007. Lost earnings will be remitted in 2009. Form 5330 will be filed with the applicable excise taxes in 2009.

** Participant contributions were remitted untimely during 2008. Lost earnings will be remitted in 2009. Form 5330 will be filed with the applicable excise taxes in 2009.

Universal Silencer, LLC Retirement Plan

Form 5500, Schedule H, Line 4a - Schedule of Delinquent Participant Contributions
Period from November 15, 2007 through December 31, 2007

Identity of Party Involved	Relationship to Plan, Employer, or Other Party-in-interest	Description of Transaction	Cost of Asset	Fair Value of Asset	Net Gain or Loss on Transaction
Universal Silencer, LLC	Plan sponsor	Delinquent 2007 contributions *	$ 47,745	$ 47,745	n/a

* Participant contributions were remitted untimely during 2007. Lost earnings will be remitted in 2009. Form 5330 will be filed with the applicable excise taxes in 2009.

Universal Silencer, LLC Retirement Plan

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2008

(a)	(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
		Pooled Separate Accounts:		
*	Minnesota Life Insurance Company	Large Equity Index I	**	$ 19,316
*	Minnesota Life Insurance Company	Large Growth Equity IX	**	801,733
*	Minnesota Life Insurance Company	Large Equity II	**	393,067
*	Minnesota Life Insurance Company	Mid-Cap Value Equity I	**	78,969
*	Minnesota Life Insurance Company	Intermediate Term Bond Index I	**	205,007
*	Minnesota Life Insurance Company	International Value II	**	645,299
*	Minnesota Life Insurance Company	Small/Mid Growth Equity III	**	318,128
*	Minnesota Life Insurance Company	Lifestrategy I	**	182,731
*	Minnesota Life Insurance Company	Lifestrategy II	**	103,066
*	Minnesota Life Insurance Company	Lifestrategy III	**	94,992
*	Minnesota Life Insurance Company	Large Value Equity III	**	313,189
*	Minnesota Life Insurance Company	Natural Resources I	**	264,242
*	Minnesota Life Insurance Company	Mid-Cap Value Equity IV	**	178,178
*	Minnesota Life Insurance Company	Small Equity III	**	97,471
*	Minnesota Life Insurance Company	Large Growth Equity X	**	29,451
*	Minnesota Life Insurance Company	Large Value Equity XIII	**	932,749
*	Minnesota Life Insurance Company	International Growth II	**	359,022
*	Minnesota Life Insurance Company	Small Value Equity XII	**	278,409
*	Minnesota Life Insurance Company	Multisector Bond I	**	612,267
				5,907,286
*	Minnesota Life Insurance Company	General Account	**	1,681,336
*	Participants	Participant loans with interest rates ranging from 5% to 9.25%, and maturity dates ranging from March 2009 through September 2013	**	39,564
				$ 7,628,186

* Indicates a party-in-interest as defined by ERISA.
** Not applicable for participant-directed investments.

The above information has been certified and provided by Minnesota Life Insurance Company, the custodian of the Plan, as being complete and accurate.

Universal Silencer, LLC Retirement Plan

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2007

(a)	(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
		Pooled Separate Accounts:		
*	Minnesota Life Insurance Company	Large Equity Index I	**	$ 19,069
*	Minnesota Life Insurance Company	Large Growth Equity IX	**	1,082,170
*	Minnesota Life Insurance Company	Large Equity II	**	529,518
*	Minnesota Life Insurance Company	Mid-Cap Value Equity I	**	104,173
*	Minnesota Life Insurance Company	Intermediate Term Bond Index I	**	255,452
*	Minnesota Life Insurance Company	International Value II	**	852,560
*	Minnesota Life Insurance Company	Small/Mid Growth Equity III	**	441,016
*	Minnesota Life Insurance Company	Lifestrategy I	**	575,425
*	Minnesota Life Insurance Company	Lifestrategy II	**	133,948
*	Minnesota Life Insurance Company	Lifestrategy III	**	89,589
*	Minnesota Life Insurance Company	Large Value Equity III	**	444,624
*	Minnesota Life Insurance Company	Natural Resources I	**	404,169
*	Minnesota Life Insurance Company	Mid-Cap Value Equity IV	**	232,314
*	Minnesota Life Insurance Company	Small Equity III	**	131,609
*	Minnesota Life Insurance Company	Large Growth Equity X	**	62,003
*	Minnesota Life Insurance Company	Large Value Equity XIII	**	1,266,807
*	Minnesota Life Insurance Company	International Growth II	**	511,759
*	Minnesota Life Insurance Company	Small Value Equity XII	**	366,072
*	Minnesota Life Insurance Company	Multisector Bond I	**	673,299
				8,175,576
*	Minnesota Life Insurance Company	General Account	**	759,798
*	Participants	Participant loans with interest rates ranging from 5.25% to 9.25%, and maturity dates ranging from March 2009 through October 2010	**	28,701
				$ 8,964,075

* Indicates a party-in-interest as defined by ERISA.
** Not applicable for participant-directed investments.

The above information has been certified and provided by Minnesota Life Insurance Company, the custodian of the Plan, as being complete and accurate.

Attachment to 2009 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Universal Silencer, LLC Retirement Plan **EIN:** 20-5737683
Plan Sponsor's Name Universal Silencer, LLC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	MN Life Insurance Co.	LARGE EQUITY INDEX I Pooled Separate Account		19,069
*	MN Life Insurance Co.	LARGE GROWTH EQ IX Pooled Separate Account		1,082,170
*	MN Life Insurance Co.	LARGE EQUITY II Pooled Separate Account		529,518
*	MN Life Insurance Co.	INT'L VALUE II Pooled Separate Account		852,560
*	MN Life Insurance Co.	SMALL/MID GRO EQ III Pooled Separate Account		441,016
*	MN Life Insurance Co.	NATURAL RESOURCES I Pooled Separate Account		404,169
*	MN Life Insurance Co.	MID CAP VALUE EQ IV Pooled Separate Account		232,314

Attachment to 2009 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Universal Silencer, LLC Retirement Plan **EIN:** 20-5737683
Plan Sponsor's Name Universal Silencer, LLC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	MN Life Insurance Co.	LARGE GROWTH EQ X Pooled Separate Account		62,003
*	MN Life Insurance Co.	LARGE VALUE EQ XIII Pooled Separate Account		1,266,807
*	MN Life Insurance Co.	INTL GROWTH II Pooled Separate Account		511,759
*	MN Life Insurance Co.	SMALL VALUE EQ XII Pooled Separate Account		366,072
*	MN Life Insurance Co.	MULTI SECTOR BOND I Pooled Separate Account		673,299
*	MN Life Insurance Co.	LIFESTRATEGY I Pooled Separate Account		575,425
*	MN Life Insurance Co.	LIFESTRATEGY II Pooled Separate Account		133,948

Attachment to 2009 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Universal Silencer, LLC Retirement Plan **EIN:** 20-5737683
Plan Sponsor's Name Universal Silencer, LLC **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
*	MN Life Insurance Co.	LIFESTRATEGY III Pooled Separate Account		89,589
*	MN Life Insurance Co.	LARGE VALUE EQ III Pooled Separate Account		444,624
*	MN Life Insurance Co.	MID CAP VALUE EQ I Pooled Separate Account		104,173
*	MN Life Insurance Co.	INTMD TRM BOND IND I Pooled Separate Account		255,452
*	MN Life Insurance Co.	SMALL EQUITY III Pooled Separate Account		131,609
*	MN Life Insurance Co.	PARTICIPANT LOANS 5.25%--9.25%		28,700

Attachment to 2009 Form 5500
Schedule H, line 4a - Schedule of Delinquent Participant Contributions

Plan Name Universal Silencer, LLC Retirement Plan **EIN:** 20-5737683
Plan Sponsor's Name Universal Silencer, LLC **PN:** 001

	Total that Constitute Nonexempt Prohibitied Transactions			
Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
Check here if Late Participant Loan Repayments are included: [X]	0	0	0	45,764