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 01/01/2009 and ending 12/31/2009

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2007

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
PERMA-SEAL BASEMENT SYSTEMS, INC.

513 ROGERS ST
DOWNERS GROVE, IL 60515-3874

2b Employer Identification Number (EIN)
36-3180566

2c Sponsor's telephone number
630-241-8812

2d Business code (see instructions)
238100

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.	08/10/2010	ROY E. SPENCER
	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

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
PERMA-SEAL BASEMENT SYSTEMS, INC.

513 ROGERS ST
DOWNERS GROVE, IL 60515-3874

3b Administrator's EIN
36-3180566

3c Administrator's telephone number
630-241-8812

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**	185
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**	179
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	10
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	189
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	189
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	79
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 2T 2J 2K 3D

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)	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)	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 01/01/2009 and ending 12/31/2009

A Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500.
PERMA-SEAL BASEMENT SYSTEMS, INC.

D Employer Identification Number (EIN)
36-3180566

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
MASSACHUSETTS MUTUAL 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
04-1590850	65935	RM 84392-1	0	01/01/2009	12/31/2009

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
3075	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
NFP SECURITIES INC.
1250 S CAPITAL OF TEXAS HWY
WEST LAKE HILLS, TX 78746

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
446	0	COMMISSION	1

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
DENNIS ANTHONY COLLINS
6701 MEADOWCREST DR
DOWNERS GROVE, IL 60516

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1138	0	COMMISSION	3

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

DAVID A PEARRE
300 S WACKER DR, STE 800
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
353	0	COMMISSION	3

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

TIMOTHY J SULLIVAN
300 S WACKER DR, STE 800
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1138	0	COMMISSION	3

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(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	
5	Current value of plan's interest under this contract in separate accounts at year end	5	0

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 ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			7b	147172
c	Additions: (1) Contributions deposited during the year	7c(1)	233308		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	3723		
	(4) Transferred from separate account	7c(4)	627976		
	(5) Other (specify below)	7c(5)	24581		
	▶ LN INT, LN PRIN, LN TRF TO TRUSTEE, MKT VALUE, ROLLOVER				
	(6) Total additions			7c(6)	889588
d	Total of balance and additions (add **b** and **c(6)**)			7d	1036760
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1264		
	(2) Administration charge made by carrier	7e(2)	1252		
	(3) Transferred to separate account	7e(3)	206087		
	(4) Other (specify below)	7e(4)	828157		
	▶ LN TRF TO TRUSTEE, PD TRUST LAPSE				
	(5) Total deductions			7e(5)	1036760
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	0

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)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in **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 01/01/2009 and ending 12/31/2009

A Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
PERMA-SEAL BASEMENT SYSTEMS, INC.

D Employer Identification Number (EIN)
36-3180566

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: PRM CR VAL EQ SIA-AA

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

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)
04-1590850-011	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: SEL AGGRESSIVE GR SIA-AD

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

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)
04-1590850-013	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: PREMIER MONEY MARKET SIA-AG

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

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)
04-1590850-016	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: SELECT LARGE CAP VALUE SIA-AJ

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

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)
04-1590850-018	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: SELECT FUNDAMENTAL VAL SIA-AK

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

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)
04-1590850-175	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: SELECT MID CAP GR II SIA-AT

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

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)
04-1590850-026	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: SELECT FOCUSED VALUE SIA-AV

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

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)
04-1590850-027	P	0

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

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

c EIN-PN 04-1590850-028	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SEL SM CO VAL SIA-AY

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

c EIN-PN 04-1590850-177	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: PRM MAIN ST SMALL CAP SIA-FX

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

c EIN-PN 04-1590850-461	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: PREMIER HIGH YIELD SIA-HH

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

c EIN-PN 04-1590850-314	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: DESTINATION RETIREMENT 2030 SIA-K9

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

c EIN-PN 04-1590850-264	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SEL SM CAP COR EQUITY SIA-KC

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

c EIN-PN 04-1590850-391	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: QUEST BALANCED SIA-OB

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

c EIN-PN 04-1590850-096	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: PREMIER CAPITAL APPRECIATION SIA-OC

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

c EIN-PN 04-1590850-097	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL OPPORTUNITIES SIA-OH

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

c EIN-PN 04-1590850-165	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SELECT STRATEGIC BOND SIA-PE

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

c EIN-PN 04-1590850-341	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: PREMIER GLOBAL SIA-QD

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

c EIN-PN 04-1590850-345	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: EQUITY GROWTH SIA-WJ

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

c EIN-PN 04-1590850-129	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SEL MID CAP VALUE SIA-XP

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

c EIN-PN 04-1590850-460	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: DESTINATION RETIREMENT 2020 SIA-K4

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

c EIN-PN 04-1590850-260	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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 01/01/2009 and ending 12/31/2009

A Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PERMA-SEAL BASEMENT SYSTEMS, INC.

D Employer Identification Number (EIN)
36-3180566

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)	99084	121107
(2) Participant contributions	1b(2)	6836	0
(3) Other	1b(3)	0	604
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	136422
(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)	8192	9157
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	331317	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)	0	795983
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	147172	0
(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	592601	1063273
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	592601	1063273

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)	121108	
(B) Participants	2a(1)(B)	204158	
(C) Others (including rollovers)	2a(1)(C)	22823	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		348089
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)	337	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		337
(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)		103031
(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)		65551
c Other income	2c		5039
d Total income. Add all **income** amounts in column (b) and enter total	2d		522047
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	41985	
(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)		41985
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	9390	
(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)		9390
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		51375
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		470672
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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: MICHELLE HECKERT, CPA (2) EIN: 26-1231461

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	
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		200000
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)

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

2009

This Form is Open to Public Inspection.

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

A Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PERMA-SEAL BASEMENT SYSTEMS, INC.

D Employer Identification Number (EIN)
36-3180566

Part I Distributions

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

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

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

EIN(s): 04-1590850 36-3880930

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 **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 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(es). 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 items 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 items 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 items 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 items 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 items 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 items 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 items 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 item 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 items (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 item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
Downers Grove, Illinois

Report on Examination

December 31, 2009 and 2008

MICHELLE L HECKERT CPA LLC

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST

CONTENTS

	Page
INDEPENDENT AUDITOR'S REPORT	3
FINANCIAL STATEMENTS:	
Statement of Net Assets Available for Benefits – December 31, 2009 and 2008	4
Statement of Changes in Net Assets Available For Benefits – For Year Ended December 31, 2009 and 2008	5
Notes to Financial Statements	6-15
SUPPLEMENTAL INFORMATION:	
Schedule H, Part IV, Question i – Schedule of Assets Held for Investment	16

Michelle L Heckert
Certified Public Accountant LLC

163 E St Louis Street
Nashville, Illinois 62263
Office (618) 327-4801
Cell (618) 741-3190

INDEPENDENT AUDITOR'S REPORT

July 26, 2010

To the Board of Trustees of Perma-Seal Basement Systems, Inc Employee Retirement Plan & Trust

I was engaged to audit the accompanying statement of net assets available for benefits of Perma-Seal Basement Systems, Inc Employee Retirement Plan as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and the supplemental schedules as of and for the year ended December 31, 2009 as listed in the accompanying index. These financial statements and schedules are the responsibility of the Plan's management.

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 me not to perform, and I did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by MassMutual Life Insurance Company and Trust Company of Illinois, the custodians of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. I have been informed by the plan administrator that Trust Company of Illinois held the Plan's investment assets and executed investment transactions from September 1, 2009 to December 31, 2009, and that MassMutual Life Insurance Company held the Plan's investment assets and executed investment transactions as of December 31, 2008 and for the period January 1, 2009 to August 31, 2009. The plan administrator has obtained certifications from the custodians as of and for the year ended December 31, 2009 and 2008, that the information provided to the plan administrator by the custodians of the plan is complete and accurate.

Because of the significance of the information that I did not audit, I was unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the custodians of the plan, have been audited by me in accordance with auditing standards generally accepted in the United States of America and, in my 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.

Michelle Heckert, CPA
Nashville, IL

PERMA-SEAL BASEMENT SYSTEMS, INC EMPLOYEE RETIREMENT PLAN AND TRUST
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009 AND 2008

ASSETS	2009	2008
Investments (See Note 3)	$ 932,405	$ 478,484
Receivables:		
Employer contribution	121,107	99,084
Participant contributions	0	6,836
Participant loans	9,157	8,192
Holding account	0	5
Income receivable	604	0
Total Receivables	130,868	114,117
TOTAL ASSETS	$1,063,273	$ 592,601
LIABILITIES	$ 0	$ 0
NET ASSETS AVAILABLE FOR BENEFITS	$1,063,273	$ 592,601

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

PERMA-SEAL BASEMENT SYSTEMS, INC EMPLOYEE RETIREMENT PLAN AND TRUST
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR YEARS ENDED DECEMBER 31, 2009 AND 2008

ADDITIONS:	2009	2008
Additions to net assets attributed to:		
Investment income:		
Net appreciation (depreciation) in fair market value (net of investment fees)	$ 148,781	$(152,355)
Interest and dividends	24,840	4,990
Participant loan interest	337	995
Total	$ 173,958	$(146,370)
Contributions:		
Participants	$ 204,158	$ 196,796
Employer	121,108	99,084
Rollover	22,823	708
Total	$ 348,089	$ 296,588
TOTAL ADDITIONS	$ 522,047	$ 150,218
DEDUCTIONS:		
Deductions from net assets attributed to:		
Product fees and plan expenses	$ 9,390	$ 5,628
Benefits paid to participants	41,985	78,202
TOTAL DEDUCTIONS	$ 51,375	83,830
NET INCREASE	$ 470,672	$ 66,388
NET ASSETS AVAILABLE FOR BENEFITS		
BEGINNING OF YEAR	$ 592,601	$ 526,213
END OF YEAR	$1,063,273	$ 592,601

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

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN

The following description of the Perma-Seal Basement Systems, Inc ("Company") Employee Retirement Plan and Trust ("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 is a defined contribution plan covering all full-time employees of the Company who have two months of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions: Each year, participants may contribute pretax annual compensation up to the maximum allowable under the Internal Revenue Code, as defined in the Plan. Eligibility to make elective deferrals of annual compensation require two months of service with at least 160 hours of service in each month and attainment of age 21. The Company may make discretionary match contributions each year. Eligibility to share in discretionary match contributions require one year of service, attainment of age twenty-one, 1,000 hours of service annually and be employed by Perma-Seal Basement Systems, Inc at the plan year end. The Company will also make ADP test safe harbor contributions to the plan. Eligibility to share in ADP test safe harbor contributions require one year of service and attainment of age twenty-one. The Company may make discretionary profit sharing contributions to the plan in an amount the Company in its sole discretion may determine. Eligibility to share in discretionary profit sharing contributions require one year of service, attainment of age twenty-one, 1,000 hours of service annually, and be employed by Perma-Seal Basement Systems, Inc at the plan year end. Participants may also contribute amounts representing distributions for other qualified defined benefit or defined contribution plans.

Participant Accounts: Each participant's account is credited with the participant's contributions, allocation of company contribution(s), and allocation of Plan earnings, and reduced by an allocation of administrative expenses. Company discretionary profit sharing contributions are allocated to each participant in the same ratio as his compensation bears to the total compensation of all participants. Company discretionary match contributions are allocated to each participant proportionate to the elective contributions made on behalf of each participant and will not apply as to elective contributions exceeding 6% of the participant's compensation. Company ADP test safe harbor contributions are made on a match basis, matching for each participant 100% of the elective deferral that does not exceed 3% of compensation plus 50% of the elective deferral that exceeds 3% of compensation but does not exceed 5% of compensation. Plan earnings are allocated based on the investment options chosen by each employee and their proportionate share of that investment option.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN (continued)

Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Company discretionary profit sharing and company discretionary match contributions, if any, vest at 20% per year after two years of service. Service is defined as 1,000 hours during the plan year. Company ADP test safe harbor contributions are 100% fully vested immediately.

Investment Options: Upon enrollment in the Plan, a participant may direct both employee and employer contributions in investment options maintained by Trust Company of Illinois. Participants may change their investment options. As such, a Schedule of Reportable Transactions is not required as exempted under 29 CFR 2520.103.

The following investment options are available for the investment of participant's elective and employer matching and discretionary contributions:
(Source: Perma-Seal Basement Systems Inc Employee Retirement Plan Enrollment Materials)

A. Templeton Institutional Foreign Fund – The investment seeks long-term capital growth. The fund normally invests at least 80% of net assets in foreign (non US) equity securities. It attempts to identify those companies that offer above-average opportunities for capital appreciation in various countries and industries where economic and political factors, including currency movements, are favorable to capital growth. The fund, from time to time, may have significant investments in one or more countries or in particular sectors, such as financial institutions or industrial companies.

B. Morgan Stanley Institutional Small Company Fund – The investment seeks long-term capital appreciation. The fund invests at least 80% of assets in growth-oriented equity securities of small US and foreign companies with market capitalizations of generally less than $4 billion. The advisor seeks to invest in high quality companies it believes have sustainable competitive advantages and the ability to redeploy capital at high rates of return. It may invest up to 25% of net assets in foreign securities, including emerging market securities, classified as ADHs, GDRs, ADSs or GDSs, foreign US dollar-denominated securities that are traded on the US exchange or local shares of foreign issuers.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN (continued)

Investment Options: (continued)

C. Fidelity Advisor Mid Cap II – The investment seeks long-term growth of capital. The fund normally invests at least 80% of assets in securities of companies with medium market capitalizations (which are those companies with market capitalizations similar to companies in the Russell Midcap index or the Standard & Poor's MidCap 400 index). It potentially invests in companies with smaller or larger market capitalizations.

D. Fidelity Advisor New Insight – The investment seeks capital appreciation. The fund primarily invests in common stocks. It may invest in securities of domestic and foreign issuers. The fund may invest in securities of companies whose value it believes is not fully recognized by the public. It may invest in either growth stocks or value stocks or both. The fund uses industry position and market and economic conditions to select investments.

E. Diamond Hill Small Cap I – The investment seeks long-term capital appreciation. The fund normally invests at least 80% of net assets in common stocks of US companies with small capitalization that the advisor believes are undervalued. Small cap companies are companies with market capitalizations at the time of purchase below $2.5 billion or in the Russell 2000 index. The management utilizes a two-step security selection process to find intrinsic value regardless of overall market conditions.

F. Goldman Sachs Institutional Mid-Cap Value Fund – The investment seeks long-term capital appreciation. The fund normally invests at least 80% of assets in equity securities, typically with market capitalizations within the range of the market capitalization of companies in the Russell Midcap Value index. It may invest up to 25% of assets in foreign securities, including securities of issuers in emerging countries. The fund may also invest up to 20% of assets in companies with market capitalizations outside the range of companies in the Russell Midcap Value index and in fixed-income securities, such as government, corporate and bank debt obligations.

G. Dodge & Cox Stock Fund – The investment seeks long-term growth of principal and income; current income is a secondary consideration. The fund invests primarily in a broadly diversified portfolio of common stocks. It may invest at least 80% of total assets in common stocks, including those securities of foreign issuers included in the S&P 500. The Fund may also purchase other types of securities and debt securities which are convertible into common stock. The fund may also invest up to 20% of total assets in US dollar-denominated securities of foreign issuers traded in the United States that are not included in the S&P 500.

H. Fidelity Spartan 500 Index Inv Fund – The investment seeks to provide investment results that correspond to the total return performance of common stocks publicly traded in the US. The fund normally invests at least 80% of assets in common stocks included in the Standard & Poor's 500 index, which broadly represents the performance of common stocks publicly traded in the US. In addition, the fund lends securities to earn income.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN (continued)

Investment Options: (continued)

I. Cohen & Steers Instl Global Realty Fund – The investment seeks both capital appreciation and current income. The fund invests at least 80%, and normally substantially all, of net assets in common stocks and other equity securities issued by US and non-US real estate companies. The fund invests significantly at least 40% of assets in real estate companies organized or located outside the US or doing a substantial amount of business outside the US. The fund allocates assets among various regions and countries, including the United States, but in no less than three different countries. It is nondiversified.

J. PIMCO Instl Total Return Bond Fund – The investment seeks maximum total return. The fund normally invests at least 65% of assets in a diversified portfolio of Fixed-Income Instruments of varying maturities, which may be represented by forwards or derivatives such as options, futures contracts, or swap agreements. It invests primarily in investment-grade debt securities, but may invest up to 10% of total assets in high-yield securities ("junk bonds"). The fund may invest all assets in derivative instruments, such as options, futures contracts or swap agreements, or in mortgage or asset-backed securities.

K. PIMCO Instl Low Duration Bond Fund – The investment seeks maximum total return. The fund invests at least 65% of total assets in a diversified portfolio of Fixed-Income Instruments of varying maturities. It invest primarily in investment-grade debt securities, but may invest up to 10% of total assets in high-yield securities rated B or higher by Moody's or S&P, or, if unrated, determined by PIMCO to be of comparable quality. The fund may invest up to 30% of total assets in securities denominated in foreign currencies, and may invest beyond this limit in US dollar-denominated securities of foreign issuers.

L. Goldman Sachs Prime Obligation Fund – The investment seeks to maximize current income to the extent consistent with the preservation of capital and the maintenance of liquidity. The fund invests in US Government Securities, obligations of US banks, commercial paper and other short-term obligations of US companies, states, municipalities and other entities and repurchase agreements. It invests up to 10% of total assets in other investment companies and only invests in US banks.

M. Conservative Portfolio – The investment seeks to achieve the highest yield, the lowest volatility, and the lowest probable long-term return. Invests primarily in a combination of equity, fixed income, and money market funds using an asset allocation strategy designed for highly conservative investors, including those nearing or in retirement or requiring use of the invested assets within a three-to-five year time frame.

NOTE 1 – DESCRIPTION OF PLAN (continued)

Investment Options: (continued)

N. Balanced Portfolio – The investment seeks to achieve an above average yield and below-average volatility, but trades off some of the capital protection of the Conservative portfolio in favor of slightly greater long-term potential return. Invests primarily in a combination of equity, fixed income, and money market funds using an asset allocation strategy designed for investors uncomfortable with an aggressive strategy who nevertheless require a greater return to reach their specific goals.

O. Growth Portfolio – The investment seeks long-term growth. Invests primarily in a combination of equity, fixed income, and money market funds using an asset allocation strategy designed for investors with longer time horizons who are willing to assume above-average shorter-term volatility in pursuit of long-term growth.

P. Aggressive Growth Portfolio – The investment is the most aggressive portfolio. Invests primarily in a combination of equity, fixed income, and money market funds using an asset allocation strategy designed for long-term investors willing to accept higher risk in pursuit of higher growth.

Participant Loans: Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50 percent of their vested account balance. Loan transactions are treated as a transfer to (from) the investment fund from (to) the Participant Loans fund. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid on the basis of level amortization.

Payment of Benefits: On termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. In-service distributions are permitted from all accounts upon the participant's attainment of age 59 ½ and from elective deferrals upon hardship. In-service distribution amounts are limited to the participant's vested amount in the distributing account.

Forfeited Accounts: Forfeitures from Company discretionary profit sharing contributions and Company discretionary match contributions are applied to Company ADP test safe harbor contributions and plan expenses. Forfeitures in the amount of $0 were used to reduce the employer contributions for the plan year ended December 31, 2009.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN (continued)

Plan Amendments: Effective September 1, 2009, the plan was amended. Significant changes made to the plan include removing MassMutual Life Insurance Company custodian of the plan, removal of PenFlex Services Inc as record keeper of the plan, removing Roy Spencer as trustee of the plan and trust, appointing Trust Company of Illinois as successor custodian, record keeper and trustee of the plan, changing eligibility provisions to those requirements outlined in the Contributions Section above and changing investment options to those outlined in the Investment Options Section above.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

Use of Estimates: The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition: All investments of the Plan are held by Trust Company of Illinois at December 31, 2009, and previously by MassMutual Life Insurance Company at December 31, 2008, in individual participant's accounts established by the administrator.

Investments are valued at fair market value as determined by Trust Company of Illinois as of December 31, 2009, and MassMutual Life Insurance Company as of December 31, 2008. Participant loan receivables are valued at cost which approximates fair value.

Payment of Benefit: Benefits are recorded when paid.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 3 – INVESTMENTS

Information Certified by the Custodian (Unaudited)

At December 31, 2009, the Plan's investments were held by the custodian, Trust Company of Illinois (TCI), and at December 31, 2008 the Plan's investments were held by the then custodian, MassMutual Life Insurance Company (MML). The following is a summary of the Plan's financial information that is included in the financial statements, based on information certified by the custodians as complete and accurate in accordance with Section 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 fair value of investments at December 31, 2009 and December 31, 2008, and net appreciation in fair values for the years ended December 31, 2009 and December 31, 2008, as reported by the custodians, is summarized on the following pages.

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 3 – INVESTMENTS (continued)

Investments at fair value as reported by the custodians:

	2009	2008
Guaranteed Account	$ 0	$ 147,172
MML - Select Strategic Bnd (Western)	$ 0	$ 40,921
MML - Prm High Yield (Babson)	$ 0	$ 30,856
MML - Destination Retirement 2020	$ 0	$ 2,997
MML - Destination Retirement 2030	$ 0	$ 33,446
MML - Quest Balanced (OFI)	$ 0	$ 509
MML - Pr Cr Val Eq (Bb/AllBr/OFI Ins)	$ 0	$ 13,189
MML - Sel Large Cap Value (Davis)	$ 0	$ 16,740
MML - Sel Fundmentl Val (Wellington)	$ 0	$ 19,531
MML - Sel Indexd Eqty (Northrn Trst)	$ 0	$ 22,876
MML - Eqty Grth (Am Century)	$ 0	$ 28,815
MML - Premier Cap Appreciation (OFI)	$ 0	$ 27,114
MML - Sel Aggrsv (Sands/Delaware)	$ 0	$ 23,592
MML - Sel Md Cap Val (Cooke & Bieler)	$ 0	$ 8,146
MML - Prm Main St Sm Cap (OFI Inst)	$ 0	$ 6,998
MML - Sel SmCo Vl (Clover/TRP/EARNEST)	$ 0	$ 10,956
MML - Sel Mid Cap Growth II (TRP)	$ 0	$ 12,238
MML - Premier Global (OFI)	$ 0	$ 14,939
MML - Global Opportunities (OFI)	$ 0	$ 16,972
MML - Sel Focus Value (Harris/C&B)	$ 0	$ 477
TCI - Goldman Sachs Prime Obligations Fund	$136,422	$ 0
TCI - PIMCO Low Duration Fund	$ 59,476	$ 0
TCI - PIMCO Total Return Fund	$144,274	$ 0
TCI - Dodge & Cox Stock Fund	$ 92,031	$ 0
TCI - Fidelity Adv New Insights I	$182,605	$ 0
TCI - Franklin Balance Sheet Fund Advs	$ 18,816	$ 0
TCI - Goldman Sachs Mid Cap Value Instl	$ 23,826	$ 0
TCI - Morgan Stanley Instl Small Co Growth Fund	$ 20,943	$ 0
TCI - Rainier Small/Mid Cap Equity Instl	$ 29,185	$ 0
TCI - Vanguard Dividend Growth	$ 22,690	$ 0
TCI - Vanguard Institutional Index Fund	$ 45,663	$ 0
TCI - Caldwell & Orkin Market Opportunities	$ 7,905	$ 0
TCI - Hussman Strategic Growth Fund	$ 8,127	$ 0
TCI - Columbia Acorn International Fund Z	$ 5,336	$ 0
TCI - GMO Emerging Countries III	$ 8,566	$ 0
TCI - Morgan Stanley Instl International Equity Fnd	$ 8,300	$ 0
TCI - Templeton Instl Foreign Equity Fund	$ 79,765	$ 0
TCI - PIMCO All Asset All Authority	$ 26,064	$ 0
TCI - Cohen & Steers Instl Global Realty	$ 3,838	$ 0
TCI - Rydex Managed Futures – H	$ 8,573	$ 0
Total Investments at Fair Value	$932,405	$478,484

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 3 – INVESTMENTS (continued)

Net Appreciation (Depreciation) in Fair Value as reported by the custodians:

	2009	2008
MML - Select Strategic Bnd (Western)	$ 7,539	$ (5,593)
MML - Prm High Yield (Babson)	$ 7,234	$ (6,596)
MML - Destination Retirement 2020	$ 1,415	$ (841)
MML - Destination Retirement 2030	$ 11,168	$ (14,784)
MML - Quest Balanced (OFI)	$ 48	$ (147)
MML - Pr Cr Val Eq (Bb/AllBr/OFI Ins)	$ 3,556	$ (8,038)
MML - Sel Large Cap Value (Davis)	$ 4,084	$ (9,901)
MML - Sel Fundmentl Val (Wellington)	$ 4,233	$ (8,029)
MML - Sel Indexd Eqty (Northrn Trst)	$ 5,457	$ (11,925)
MML - Eqty Grth (Am Century)	$ 5,276	$ (12,325)
MML - Premier Cap Appreciation (OFI)	$ 9,711	$ (18,508)
MML - Sel Aggrsv (Sands/Delaware)	$ 9,864	$ (16,798)
MML - Sel Md Cap Val (Cooke & Bieler)	$ 2,474	$ (3,193)
MML - Prm Main St Sm Cap (OFI Inst)	$ 2,733	$ (3,769)
MML - Sel SmCo Vl (Clover/TRP/EARNEST)	$ 2,622	$ (3,020)
MML – Sel Sm Cap Cor Eq (Gldmn Sachs)	$ 0	$ (814)
MML - Sel Mid Cap Growth II (TRP)	$ 4,971	$ (7,383)
MML - Premier Global (OFI)	$ 5,820	$ (9,772)
MML - Global Opportunities (OFI)	$ 10,709	$ (10,694)
MML - Sel Focus Value (Harris/C&B)	$ 392	$ (225)
TCI - PIMCO Low Duration Fund	$ 222	$ 0
TCI - PIMCO Total Return Fund	$ (120)	$ 0
TCI - Dodge & Cox Stock Fund	$ 9,107	$ 0
TCI - Fidelity Adv New Insights I	$ 21,375	$ 0
TCI - Franklin Balance Sheet Fund Advs	$ 1,555	$ 0
TCI - Goldman Sachs Mid Cap Value Instl	$ 2,409	$ 0
TCI - Morgan Stanley Instl Small Co Growth Fund	$ 2,295	$ 0
TCI - Rainier Small/Mid Cap Equity Instl	$ 3,734	$ 0
TCI - Vanguard Dividend Growth	$ 525	$ 0
TCI - Vanguard Institutional Index Fund	$ 4,172	$ 0
TCI - Caldwell & Orkin Market Opportunities	$ (288)	$ 0
TCI - Hussman Strategic Growth Fund	$ (99)	$ 0
TCI - Columbia Acorn International Fund Z	$ 165	$ 0
TCI - GMO Emerging Countries III	$ 677	$ 0
TCI - Morgan Stanley Instl International Equity Fnd	$ 105	$ 0
TCI - Templeton Instl Foreign Equity Fund	$ 4,480	$ 0
TCI - PIMCO All Asset All Authority	$ (915)	$ 0
TCI - Cohen & Steers Instl Global Realty	$ 120	$ 0
TCI - Rydex Managed Futures – H	$ (45)	$ 0
Total Investments at Fair Value	$ 148,780	$(152,355)

PERMA-SEAL BASEMENT SYSTEMS, INC
EMPLOYEE RETIREMENT PLAN AND TRUST
NOTES TO FINANCIAL STATEMENTS

NOTE 4 – PLAN TERMINATION

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

NOTE 5 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per financial statements at December 31, 2009 to Form 5500:

Net Assets available for benefits per financial statements	$1,063,273
Net Assets available for benefits per Form 5500	$1,063,273

The following is a reconciliation of benefits paid to participants per financial statements at December 31, 2009 to Form 5500:

Benefits paid to participants per financial statements	$ 41,985
Benefits paid to participants per Form 5500	$ 41,985

NOTE 6 – DOL LIMITED SCOPE AUDIT

Trust Company of Illinois has certified to the accuracy of investment assets, transactions and income for the purpose of a DOL Limited Scope audit.

NOTE 7 – TAX STATUS

At December 31, 2009, the Plan is a Trust Company of Illinois Volume Submitter Defined Contribution Prototype Plan. The Internal Revenue Service has determined and informed the Company by a letter dated March 31, 2008 that the Plan and related trust are designed in accordance with the Internal Revenue Code (IRC). The plan has been amended according to all rules and regulations. However, the Plan administrator and Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

PERMA-SEAL BASEMENT SYSTEMS INC EMPLOYEE RETIREMENT PLAN
AND TRUST
EMPLOYER IDENTIFICATION NUMBER 36-3180566
PLAN NUMBER 001
SCHEDULE H, PART IV, QUESTION I
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2009

(a)	(b)	(c)	(d)	(e)
		Description of Investment,		
Party-in-		Including Maturity Date,		
Interest	Identity of Issue, Borrower,	Rate of Interest, Collateral,		
Identification	Lessor or Similar Party	Par of Maturity Value	Cost	Value
None	Goldman Sachs Prime Obl Fund	Cash Equivalent	$ 136,422	$ 136,422
None	PIMCO Low Duration Fund	Taxable Bond Fund	$ 59,254	$ 59,476
None	PIMCO Total Return Fund	Taxable Bond Fund	$ 144,394	$ 144,274
None	Dodge & Cox Stock Fund	Stock Fund	$ 82,925	$ 92,031
None	Fidelity Adv New Insights I	Stock Fund	$ 161,230	$ 182,605
None	Franklin Balanced Sheet Fund Advs	Stock Fund	$ 17,261	$ 18,816
None	Goldman Sachs Mid Cap Value Instl	Stock Fund	$ 21,417	$ 23,826
None	Morgan Stanley Instl Small Co Growth Fund	Stock Fund	$ 18,648	$ 20,943
None	Rainier Small/Mid Cap Equity Instl	Stock Fund	$ 25,452	$ 29,185
None	Vanguard Dividend Growth Fund	Stock Fund	$ 22,164	$ 22,690
None	Vanguard Institutional Index Fund	Stock Fund	$ 41,490	$ 45,663
None	Caldwell & Orkin Market Opportunity	Long/Short Stock Fund	$ 8,193	$ 7,905
None	Hussman Strategic Growth Fund	Long/Short Stock Fund	$ 8,226	$ 8,127
None	Columbia Acorn International Fund Z	International Stock Fund	$ 5,171	$ 5,336
None	GMO Emerging Countries III	International Stock Fund	$ 7,890	$ 8,566
None	Morgan Stanley Instl International Eqty Fund	International Stock Fund	$ 8,196	$ 8,300
None	Templeton Instl Foreign Equity Fund	International Stock Fund	$ 75,284	$ 79,765
None	PIMCO All Asset All Authority	Alternative Investment Fnd	$ 26,979	$ 26,064
None	Cohen & Steers Instl Global Realty	Real Estate Fund	$ 3,719	$ 3,838
None	Rydex Managed Futures - H	Commodities Fund	$ 8,617	$ 8,573
None	Participant Loans	Participant Loans	$ 9,157	$ 9,157
TOTALS			$ 892,089	$ 941,562

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 01/01/2009 and ending 12/31/2009

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
PERMA-SEAL BASEMENT SYSTEMS, INC. EMPLOYEE RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2007

2a Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
PERMA-SEAL BASEMENT SYSTEMS, INC.

513 ROGERS ST

DOWNERS GROVE IL 60515-3874

2b Employer Identification Number (EIN)
36-3180566

2c Sponsor's telephone number
630-241-8812

2d Business code (see instructions)
238100

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	Roy E Spencer	8-10-10	ROY E. SPENCER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Roy E Spencer	8-10-10	ROY E. SPENCER
	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")
PERMA-SEAL BASEMENT SYSTEMS, INC.

513 ROGERS ST

DOWNERS GROVE IL 60515-3874

3b Administrator's EIN: 36-3180566

3c Administrator's telephone number: 630-241-8812

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**	185
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**	179
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	10
d	Subtotal. Add lines **6a, 6b,** and **6c**	**6d**	189
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	189
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	79
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 2T 2J 2K 3D

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) [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) [X] 1 **A** (Insurance Information)
- (4) [ ] **C** (Service Provider Information)
- (5) [X] **D** (DFE/Participating Plan Information)
- (6) [ ] **G** (Financial Transaction Schedules)

PERMA-SEAL BASEMENT SYSTEMS INC EMPLOYEE RETIREMENT PLAN
AND TRUST
EMPLOYER IDENTIFICATION NUMBER 36-3180566
PLAN NUMBER 001
SCHEDULE H, PART IV, QUESTION I
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
DECEMBER 31, 2009

(a)	(b)	(c)	(d)	(e)
		Description of Investment,		
Party-in-		Including Maturity Date,		
Interest	Identity of Issue, Borrower,	Rate of Interest, Collateral,		
Identification	Lessor or Similar Party	Par of Maturity Value	Cost	Value
None	Goldman Sachs Prime Obl Fund	Cash Equivalent	$ 136,422	$ 136,422
None	PIMCO Low Duration Fund	Taxable Bond Fund	$ 59,254	$ 59,476
None	PIMCO Total Return Fund	Taxable Bond Fund	$ 144,394	$ 144,274
None	Dodge & Cox Stock Fund	Stock Fund	$ 82,925	$ 92,031
None	Fidelity Adv New Insights I	Stock Fund	$ 161,230	$ 182,605
None	Franklin Balanced Sheet Fund Advs	Stock Fund	$ 17,261	$ 18,816
None	Goldman Sachs Mid Cap Value Instl	Stock Fund	$ 21,417	$ 23,826
None	Morgan Stanley Instl Small Co Growth Fund	Stock Fund	$ 18,648	$ 20,943
None	Rainier Small/Mid Cap Equity Instl	Stock Fund	$ 25,452	$ 29,185
None	Vanguard Dividend Growth Fund	Stock Fund	$ 22,164	$ 22,690
None	Vanguard Institutional Index Fund	Stock Fund	$ 41,490	$ 45,663
None	Caldwell & Orkin Market Opportunity	Long/Short Stock Fund	$ 8,193	$ 7,905
None	Hussman Strategic Growth Fund	Long/Short Stock Fund	$ 8,226	$ 8,127
None	Columbia Acorn International Fund Z	International Stock Fund	$ 5,171	$ 5,336
None	GMO Emerging Countries III	International Stock Fund	$ 7,890	$ 8,566
None	Morgan Stanley Instl International Eqty Fund	International Stock Fund	$ 8,196	$ 8,300
None	Templeton Instl Foreign Equity Fund	International Stock Fund	$ 75,284	$ 79,765
None	PIMCO All Asset All Authority	Alternative Investment Fnd	$ 26,979	$ 26,064
None	Cohen & Steers Instl Global Realty	Real Estate Fund	$ 3,719	$ 3,838
None	Rydex Managed Futures - H	Commodities Fund	$ 8,617	$ 8,573
None	Participant Loans	Participant Loans	$ 9,157	$ 9,157
TOTALS			$ 892,089	$ 941,562