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
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1976

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

4900 INDUSTRIAL WAY
BENICIA, CA 94510

4900 INDUSTRIAL WAY
BENICIA, CA 94510

2b Employer Identification Number (EIN)
94-1635911

2c Sponsor's telephone number
707-747-5900

2d Business code (see instructions)
333900

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	09/15/2010	DE HULETT
	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") RIX INDUSTRIES 4900 INDUSTRIAL WAY BENICIA, CA 94510	**3b** Administrator's EIN 94-1635911 **3c** Administrator's telephone number 707-747-5900

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**	154
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**	99
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	26
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	125
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	126
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	108
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	18
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 2T 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)		**9b** Plan benefit arrangement (check all that apply)	
(1)	Insurance	**(1)**	Insurance
(2)	Code section 412(e)(3) insurance contracts	**(2)**	Code section 412(e)(3) insurance contracts
(3) X	Trust	**(3)** X	Trust
(4)	General assets of the sponsor	**(4)**	General assets of the sponsor

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

a Pension Schedules		**b General Schedules**		
(1) X	**R** (Retirement Plan Information)	**(1)** X	**H** (Financial Information)	
(2)	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	**(2)**	**I** (Financial Information – Small Plan)	
		(3)	**A** (Insurance Information)	___
		(4) X	**C** (Service Provider Information)	
(3)	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	**(5)**	**D** (DFE/Participating Plan Information)	
		(6)	**G** (Financial Transaction Schedules)	

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**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
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RIX INDUSTRIES

D Employer Identification Number (EIN)
94-1635911

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FID.INV.INST.OPS.CO.

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
64 65 37 60	RECORDKEEPER	938	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ARTISAN MID CAP VAL - BOSTON FINANC 04-2526037	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON SMALL CAP - DST SYSTEMS, INC. 43-1581814	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MUTUAL GBL DISCVRY A - FRANKLIN TEM 94-3167260	0.35%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
RAINIER SM/MID CAP - US BANCORP FUN 39-0281260	0.35%	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
RS PARTNERS A - BOSTON FINANCIAL DA 04-2526037	0.55%	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RIX INDUSTRIES

D Employer Identification Number (EIN)
94-1635911

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)	290166	337681
(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)	13874	27633
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1820528	3057775
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	2124568	3423089
	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	2124568	3423089

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)	227000	
	(B) Participants	2a(1)(B)	241313	
	(C) Others (including rollovers)	2a(1)(C)	288275	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		756588
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1913	
	(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)	1630	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3543
	(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)	67357	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		67357
	(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)		

		(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)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(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)		535852
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1363340
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	63680	
(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)		63680
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)	154	
(4) Other	2i(4)	985	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1139
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		64819
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		1298521
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: S. J. GALLINA (2) EIN: 94-2147510

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		180000
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
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RIX INDUSTRIES

D Employer Identification Number (EIN)
94-1635911

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): 04-6568107

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

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

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year **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):

RIX INDUSTRIES 401(k) PROFIT SHARING PLAN

Financial Statements
and Supplemental Information
December 31, 2009 and 2008

GALLINA LLP
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
Benicia, California

We were engaged to audit the accompanying statements of net assets available for benefits of **RIX INDUSTRIES 401(K) PROFIT SHARING PLAN** (the "Plan") as of December 31, 2009 and 2008, and the related statement of changes in net assets available for benefits for the year ended December 31, 2009 and the supplemental Schedule H, line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2009. These financial statements and the supplemental schedule 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 us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that Fidelity Management Trust Company holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from Fidelity Management Trust Company as of December 31, 2009 and 2008 and for the year ended December 31, 2009, that the information provided to the plan administrator by Fidelity Management Trust Company is complete and accurate.

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

Gallina LLP

Walnut Creek, California
September 9, 2010

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2009	2008
Assets		
Investments, at fair value (Notes 3 and 4):		
Mutual funds	$ 3,395,456	$ 2,110,694
Participant loans	27,633	13,874
Total investments	3,423,089	2,124,568
Receivables:		
Employer contributions	227,000	227,000
Net assets available for benefits	$ 3,650,089	$ 2,351,568

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
for the year ended December 31, 2009

Additions		
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	535,852
Interest and dividends		69,270
Interest on participant loans		1,630
Total investment income		606,752
Contributions:		
Employer		227,000
Participants' salary deferrals		241,313
Participants' rollovers		288,275
Total contributions		756,588
Total additions		1,363,340
Deductions		
Deductions from net assets attributed to:		
Benefits paid to participants		63,680
Administrative expenses		1,139
Total deductions		64,819
Net increase		1,298,521
Net assets available for benefits:		
Beginning of year		2,351,568
End of year	$	3,650,089

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2009 and 2008

Note 1: DESCRIPTION OF PLAN:

The following description of the RIX INDUSTRIES 401(k) PROFIT SHARING PLAN (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. General: The Plan is a 401(k) salary deferral and profit sharing plan. The Plan covers all full-time employees of RIX Industries (the "Company") who have completed 1,000 hours of service and are age twenty-one (21) or older. Participants enter the Plan on either January 1 or July 1 immediately following the satisfaction of these eligibility requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

2. Contributions: Each year, participants may elect to have a portion of their compensation, as defined in the Plan Adoption Agreement, contributed to the Plan subject to annual limitations imposed by the Internal Revenue Code. For 2009 the maximum elective deferral was $16,500 ($15,500 in 2008) with an additional $5,000 contribution allowed for employees who are at least 50 years in age.

   In addition, the Company may make discretionary contributions to the profit sharing plan. Employer contributions are allocated to each participant based on a two-tiered integrated allocation formula. The first tier is a flat percentage on all eligible participant's compensation. The second tier is an additional percentage of compensation above the "integration level" which is the social security taxable wage base for the Plan year and is limited by the Plan to a maximum of 5.7%.

3. Participant Accounts: The plan administrator maintains a separate account for each participant and each type of contribution. Each participant's account is credited with the participant's contribution and allocations of (a) the Company's profit-sharing contribution and (b) Plan earnings. 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 balance.

4. Vesting: Plan participants are immediately 100% vested in salary reduction contributions, rollover contributions and actual earnings or losses thereon. Vesting in the Company's profit sharing contribution portion of their accounts is based on years of continuous service as follows:

Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 or more years	100%

Note 1: DESCRIPTION OF PLAN, Continued:

5. Participant Loans: Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of $50,000 or 50 percent of their vested account balance, whichever is less. The loans are secured by the balance in the participant's account, are repaid by payroll deductions in equal installments, and bear interest at rates determined when the loan is disbursed. The interest rate on all loans issued during 2009 was 3.5% (9.0% in 2008).

6. Payment of Benefits: On termination of service, or upon death, disability or retirement, a participant can elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. The Plan allows for automatic distribution for participant accounts that have a vested balance of $1,000 or less on date of separation.

7. Forfeitures: Forfeitures are created when participants terminate employment before they become 100% vested in their account balance. Forfeitures are held in a money market fund until they are used to offset employer profit sharing contributions. For the year ended December 31, 2009, $ 33,896 of forfeitures were allocated to offset the employer profit sharing contribution. There are no unallocated forfeitures as of December 31, 2009 and 2008.

8. Administrative Expenses: The Company absorbs most of the plan costs. Administrative fees are charged by Fidelity and withdrawn directly from the participant's account balance for loan processing, overnight mailing and other miscellaneous services. For the year ended December 31, 2009 and 2008, the Company paid approximately $21,000 and $12,000, respectively, in costs on behalf of the plan.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting:

The financial statements of the Plan are prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles.

Estimates:

The preparation of financial statements in conformity with U.S. generally accepted accounting principals requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued:

Investment Valuation and Income Recognition:

The Plan's 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 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Realized gains and losses from security transactions are reported on the average cost method. Net realized and unrealized appreciation (depreciation) in fair value of investments consists of the change in unrealized appreciation or depreciation during the year and the realized gain or loss on the sales of investments during the year.

Payment of Benefits:

Benefits are recorded when paid.

Recent Accounting Pronouncements:

In April 2009, a Financial Accounting Standards Board (FASB) Staff Position was issued that provides additional guidance for fair value measurements and reporting. The guidance requires certain disclosures about major security types based on the nature and risk of the securities. The guidance is effective for reporting periods ending after June 15, 2009.

In May 2009, a new accounting standard was issued establishing general standards of accounting for and disclosure of events that occur after the balance sheet date, but before the financial statements are issued or available to be issued. The standard requires disclosure of the date through which a plan has evaluated subsequent events and the basis for that date. The standard does not apply to subsequent events or transactions that are within the scope of other GAAP and will not result in significant changes in the subsequent events reported by the Plan. The standard is effective for interim or annual periods ending after June 15, 2009. The Plan implemented the standard during the year ended December 31, 2009. The Plan performed a review for subsequent events through the date of this report, September 9, 2010. No recognized or non-recognized subsequent events were noted.

In July 2009, the FASB Accounting Standards Codification (ASC) was issued and became the single official source of authoritative, nongovernmental U.S. Generally Accepted Accounting Principles (GAAP). The historical GAAP hierarchy was eliminated and the ASC became the only level of authoritative GAAP. All other literature not included in the codification will be considered non-authoritative. ASC is effective for financial statements issued for interim and annual periods ending after September 15, 2009. The implementation of the ASC did not have a material impact on the Plan's financial statements or disclosures.

Note 3: FAIR VALUE MEASUREMENTS:

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

Level 1

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

Level 2

Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3

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

The asset'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, 2009 and 2008.

Mutual Funds: Valued at the net asset value (NAV) of shares held by the Plan at the close of business of the New York Stock Exchange.

Participant loans: Valued at amortized cost, which approximates fair value.

Note 3: FAIR VALUE MEASUREMENTS, Continued:

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008:

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
World Stock	$ 105,654	$ -	$ -	$ 105,654
Large Cap-Growth	156,288	-	-	156,288
Large Cap-Value	236,007	-	-	236,007
High Yield Bond	285,828	-	-	285,828
Energy	100,554	-	-	100,554
Technology	253,808	-	-	253,808
Foreign Large Cap-Blend	130,149	-	-	130,149
Target Funds	1,135,021	-	-	1,135,021
Money Market	337,681	-	-	337,681
Large Cap-Blend	209,232	-	-	209,232
Intermediate-Term Bond	171,262	-	-	171,262
Other	273,972	-	-	273,972
Total Mutual Funds	3,395,456	-	-	3,395,456
Participant loans	-	-	27,633	27,633
Total	$ 3,395,456	$ -	$ 27,633	$ 3,423,089

Note 3: FAIR VALUE MEASUREMENTS, Continued:

	Assets at Fair Value as of December 31, 2008			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
World Stock	$ 187,024	$ -	$ -	$ 187,024
Large Cap-Growth	137,140	-	-	137,140
Target Funds	621,459	-	-	621,459
Money Market	290,166	-	-	290,166
Large Cap-Blend	141,017	-	-	141,017
Large Cap-Value	192,864	-	-	192,864
Intermediate-Term Bond	139,313	-	-	139,313
Other	401,711	-	-	401,711
Total mutual funds	2,110,694	-	-	2,110,694
Participant loans	-	-	13,874	13,874
Total	$ 2,110,694	$ -	$ 13,874	$ 2,124,568

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2009.

	Participant Loans
Beginning balance	$ 13,874
Purchases, sales, issuances, and settlement (net)	13,759
Ending balance	$ 27,633

Note 4: INVESTMENTS AND INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE:

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified to the completeness and accuracy of the investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, the related investment income reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2009, and the supplemental Schedule H, line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2009.

Note 4: INVESTMENTS AND INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE, Continued:

The following table presents investments at December 31, 2009 and 2008. Investments that represent 5% or more of the Plan's net assets in either year are separately identified.

	December 31, 2009	December 31, 2008
Mutual funds:		
Fidelity Capital and Income Fund	$ 285,828	$ 94,099
Fidelity Contrafund	122,704	123,959
Fidelity Freedom 2010 Fund	222,413	195,063
Fidelity Freedom 2015 Fund	390,803	42,643
Fidelity Freedom 2020 Fund	269,978	188,493
Fidelity Large Cap Value Fund	236,007	192,864
Fidelity Retirement Money Market Portfolio	337,681	290,166
Fidelity Select Technology Portfolio	253,808	285
Fidelity U.S. Bond Index Fund	171,262	139,313
Mutual Global Discovery Fund A	105,654	187,024
Spartan U.S. Equity Index Fund	209,232	141,017
Other	790,086	515,768
Participant loans	27,633	13,874
	$ 3,423,089	$ 2,124,568

Note 5: RELATED PARTY TRANSACTIONS:

Certain Plan investments are shares of mutual funds managed by Fidelity Investments, which is a subsidiary of Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee of the Plan, and, therefore, these transactions qualify as party-in-interest transactions.

Note 6: PLAN TERMINATION:

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

Note 7: INCOME TAX STATUS:

The Plan is a prototype plan sponsored by Fidelity Management and Research Corporation. The prototype plan obtained its latest opinion letter on March 31, 2008, in which the Internal Revenue Service stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the opinion letter; however, the Plan administrator and the Plan's management believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 8: RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500:

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2009 and 2008, to Schedule H of Form 5500:

	2009	2008
Net assets available for benefits per the financial statements	$ 3,650,089	$ 2,351,568
Less receivables at year end:		
Employer contribution	(227,000)	(227,000)
Net assets available for benefits per Schedule H of Form 5500	$ 3,423,089	$ 2,124,568

The following is a reconciliation of contributions received per the financial statements for the year ended December 31, 2009 to Schedule H of Form 5500:

	Employer	Participants' Salary Deferrals	Rollover	Total
Contributions per the financial statements	$ 227,000	$ 241,313	$ 288,275	$ 756,588
Less receivables at December 31, 2009	(227,000)	-	-	(227,000)
Add receivables at December 31, 2008	227,000	-	-	227,000
Contributions per Schedule H of Form 5500	$ 227,000	$ 241,313	$ 288,275	$ 756,588

Note 9: RISKS AND UNCERTAINTIES:

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
EMPLOYER IDENTIFICATION NUMBER 94-1635911
PLAN NUMBER 001
SCHEDULE H, Line 4i - SUPPLEMENTAL SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

SCHEDULE OF ASSETS (HELD AT END OF YEAR):

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
*Fidelity :				
	Balanced Fund	Mutual Fund	N/A	$ 18,859
	Capital and Income Fund	Mutual Fund	N/A	285,828
	Contrafund	Mutual Fund	N/A	122,704
	Export and Multinational Fund	Mutual Fund	N/A	33,585
	Floating Rate High Income Fund	Mutual Fund	N/A	2,826
	Freedom 2000 Fund	Mutual Fund	N/A	19,985
	Freedom 2010 Fund	Mutual Fund	N/A	222,413
	Freedom 2015 Fund	Mutual Fund	N/A	390,803
	Freedom 2020 Fund	Mutual Fund	N/A	269,978
	Freedom 2025 Fund	Mutual Fund	N/A	103,473
	Freedom 2030 Fund	Mutual Fund	N/A	92,795
	Freedom 2035 Fund	Mutual Fund	N/A	34,600
	Freedom 2040 Fund	Mutual Fund	N/A	39,493
	Freedom 2045 Fund	Mutual Fund	N/A	513
	Freedom 2050 Fund	Mutual Fund	N/A	461
	Freedom Income Fund	Mutual Fund	N/A	11,765
	International Discovery Fund	Mutual Fund	N/A	130,149
	Large Cap Value Fund	Mutual Fund	N/A	236,007
	Real Estate Investment Portfolio	Mutual Fund	N/A	39,447
	Retirement Money Market Portfolio	Mutual Fund	N/A	337,681
	Select Energy Portfolio	Mutual Fund	N/A	100,554
	Select Financial Portfolio	Mutual Fund	N/A	12,680
	Select Natural Resources Portfolio	Mutual Fund	N/A	78,515
	Select Technology Portfolio	Mutual Fund	N/A	253,808
	U.S. Bond Index Fund	Mutual Fund	N/A	171,262

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
EMPLOYER IDENTIFICATION NUMBER 94-1635911
PLAN NUMBER 001
SCHEDULE H, Line 4i - SUPPLEMENTAL SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

SCHEDULE OF ASSETS (HELD AT END OF YEAR):

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Artisan Mid Cap Value Fund	Mutual Fund	N/A	$ 12,911
	Baron Small Cap Fund	Mutual Fund	N/A	11,054
	Mutual Global Discovery Fund A	Mutual Fund	N/A	105,654
	RS Partners Fund	Mutual Fund	N/A	30,619
	Rainier Small/Mid Cap Equity Fund	Mutual Fund	N/A	8,358
	Spartan Extended Market Index Fund	Mutual Fund	N/A	7,444
	Spartan U.S. Equity Index Fund	Mutual Fund	N/A	209,232
				$ 3,395,456
	*Participant Loans	Collateralized by vested balance, interest rate at 3.5 – 9.0%, monthly payments due through June 2014	$ -	$ 27,633

* Denotes party-in-interest

RIX INDUSTRIES 401(k) PROFIT SHARING PLAN

Financial Statements
and Supplemental Information
December 31, 2009 and 2008

GALLINA LLP
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

To the Plan Sponsor
RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
Benicia, California

We were engaged to audit the accompanying statements of net assets available for benefits of **RIX INDUSTRIES 401(K) PROFIT SHARING PLAN** (the "Plan") as of December 31, 2009 and 2008, and the related statement of changes in net assets available for benefits for the year ended December 31, 2009 and the supplemental Schedule H, line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2009. These financial statements and the supplemental schedule 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 us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that Fidelity Management Trust Company holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from Fidelity Management Trust Company as of December 31, 2009 and 2008 and for the year ended December 31, 2009, that the information provided to the plan administrator by Fidelity Management Trust Company is complete and accurate.

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

Gallina LLP

Walnut Creek, California
September 9, 2010

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2009	2008
Assets		
Investments, at fair value (Notes 3 and 4):		
Mutual funds	$ 3,395,456	$ 2,110,694
Participant loans	27,633	13,874
Total investments	3,423,089	2,124,568
Receivables:		
Employer contributions	227,000	227,000
Net assets available for benefits	$ 3,650,089	$ 2,351,568

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
for the year ended December 31, 2009

Additions		
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	535,852
Interest and dividends		69,270
Interest on participant loans		1,630
Total investment income		606,752
Contributions:		
Employer		227,000
Participants' salary deferrals		241,313
Participants' rollovers		288,275
Total contributions		756,588
Total additions		1,363,340
Deductions		
Deductions from net assets attributed to:		
Benefits paid to participants		63,680
Administrative expenses		1,139
Total deductions		64,819
Net increase		1,298,521
Net assets available for benefits:		
Beginning of year		2,351,568
End of year	$	3,650,089

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2009 and 2008

Note 1: DESCRIPTION OF PLAN:

The following description of the RIX INDUSTRIES 401(k) PROFIT SHARING PLAN (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

1. General: The Plan is a 401(k) salary deferral and profit sharing plan. The Plan covers all full-time employees of RIX Industries (the "Company") who have completed 1,000 hours of service and are age twenty-one (21) or older. Participants enter the Plan on either January 1 or July 1 immediately following the satisfaction of these eligibility requirements. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

2. Contributions: Each year, participants may elect to have a portion of their compensation, as defined in the Plan Adoption Agreement, contributed to the Plan subject to annual limitations imposed by the Internal Revenue Code. For 2009 the maximum elective deferral was $16,500 ($15,500 in 2008) with an additional $5,000 contribution allowed for employees who are at least 50 years in age.

   In addition, the Company may make discretionary contributions to the profit sharing plan. Employer contributions are allocated to each participant based on a two-tiered integrated allocation formula. The first tier is a flat percentage on all eligible participant's compensation. The second tier is an additional percentage of compensation above the "integration level" which is the social security taxable wage base for the Plan year and is limited by the Plan to a maximum of 5.7%.

3. Participant Accounts: The plan administrator maintains a separate account for each participant and each type of contribution. Each participant's account is credited with the participant's contribution and allocations of (a) the Company's profit-sharing contribution and (b) Plan earnings. 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 balance.

4. Vesting: Plan participants are immediately 100% vested in salary reduction contributions, rollover contributions and actual earnings or losses thereon. Vesting in the Company's profit sharing contribution portion of their accounts is based on years of continuous service as follows:

Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 or more years	100%

Note 1: DESCRIPTION OF PLAN, Continued:

5. Participant Loans: Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum of $50,000 or 50 percent of their vested account balance, whichever is less. The loans are secured by the balance in the participant's account, are repaid by payroll deductions in equal installments, and bear interest at rates determined when the loan is disbursed. The interest rate on all loans issued during 2009 was 3.5% (9.0% in 2008).

6. Payment of Benefits: On termination of service, or upon death, disability or retirement, a participant can elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. The Plan allows for automatic distribution for participant accounts that have a vested balance of $1,000 or less on date of separation.

7. Forfeitures: Forfeitures are created when participants terminate employment before they become 100% vested in their account balance. Forfeitures are held in a money market fund until they are used to offset employer profit sharing contributions. For the year ended December 31, 2009, $ 33,896 of forfeitures were allocated to offset the employer profit sharing contribution. There are no unallocated forfeitures as of December 31, 2009 and 2008.

8. Administrative Expenses: The Company absorbs most of the plan costs. Administrative fees are charged by Fidelity and withdrawn directly from the participant's account balance for loan processing, overnight mailing and other miscellaneous services. For the year ended December 31, 2009 and 2008, the Company paid approximately $21,000 and $12,000, respectively, in costs on behalf of the plan.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Basis of Accounting:

The financial statements of the Plan are prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles.

Estimates:

The preparation of financial statements in conformity with U.S. generally accepted accounting principals requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued:

Investment Valuation and Income Recognition:

The Plan's 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 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Realized gains and losses from security transactions are reported on the average cost method. Net realized and unrealized appreciation (depreciation) in fair value of investments consists of the change in unrealized appreciation or depreciation during the year and the realized gain or loss on the sales of investments during the year.

Payment of Benefits:

Benefits are recorded when paid.

Recent Accounting Pronouncements:

In April 2009, a Financial Accounting Standards Board (FASB) Staff Position was issued that provides additional guidance for fair value measurements and reporting. The guidance requires certain disclosures about major security types based on the nature and risk of the securities. The guidance is effective for reporting periods ending after June 15, 2009.

In May 2009, a new accounting standard was issued establishing general standards of accounting for and disclosure of events that occur after the balance sheet date, but before the financial statements are issued or available to be issued. The standard requires disclosure of the date through which a plan has evaluated subsequent events and the basis for that date. The standard does not apply to subsequent events or transactions that are within the scope of other GAAP and will not result in significant changes in the subsequent events reported by the Plan. The standard is effective for interim or annual periods ending after June 15, 2009. The Plan implemented the standard during the year ended December 31, 2009. The Plan performed a review for subsequent events through the date of this report, September 9, 2010. No recognized or non-recognized subsequent events were noted.

In July 2009, the FASB Accounting Standards Codification (ASC) was issued and became the single official source of authoritative, nongovernmental U.S. Generally Accepted Accounting Principles (GAAP). The historical GAAP hierarchy was eliminated and the ASC became the only level of authoritative GAAP. All other literature not included in the codification will be considered non-authoritative. ASC is effective for financial statements issued for interim and annual periods ending after September 15, 2009. The implementation of the ASC did not have a material impact on the Plan's financial statements or disclosures.

Note 3: FAIR VALUE MEASUREMENTS:

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

Level 1

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

Level 2

Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3

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

The asset'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, 2009 and 2008.

Mutual Funds: Valued at the net asset value (NAV) of shares held by the Plan at the close of business of the New York Stock Exchange.

Participant loans: Valued at amortized cost, which approximates fair value.

Note 3: FAIR VALUE MEASUREMENTS, Continued:

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

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008:

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
World Stock	$ 105,654	$ -	$ -	$ 105,654
Large Cap-Growth	156,288	-	-	156,288
Large Cap-Value	236,007	-	-	236,007
High Yield Bond	285,828	-	-	285,828
Energy	100,554	-	-	100,554
Technology	253,808	-	-	253,808
Foreign Large Cap-Blend	130,149	-	-	130,149
Target Funds	1,135,021	-	-	1,135,021
Money Market	337,681	-	-	337,681
Large Cap-Blend	209,232	-	-	209,232
Intermediate-Term Bond	171,262	-	-	171,262
Other	273,972	-	-	273,972
Total Mutual Funds	3,395,456	-	-	3,395,456
Participant loans	-	-	27,633	27,633
Total	$ 3,395,456	$ -	$ 27,633	$ 3,423,089

Note 3: FAIR VALUE MEASUREMENTS, Continued:

	Assets at Fair Value as of December 31, 2008			
	Level 1	Level 2	Level 3	Total
Mutual Funds:				
World Stock	$ 187,024	$ -	$ -	$ 187,024
Large Cap-Growth	137,140	-	-	137,140
Target Funds	621,459	-	-	621,459
Money Market	290,166	-	-	290,166
Large Cap-Blend	141,017	-	-	141,017
Large Cap-Value	192,864	-	-	192,864
Intermediate-Term Bond	139,313	-	-	139,313
Other	401,711	-	-	401,711
Total mutual funds	2,110,694	-	-	2,110,694
Participant loans	-	-	13,874	13,874
Total	$ 2,110,694	$ -	$ 13,874	$ 2,124,568

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2009.

	Participant Loans
Beginning balance	$ 13,874
Purchases, sales, issuances, and settlement (net)	13,759
Ending balance	$ 27,633

Note 4: INVESTMENTS AND INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE:

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company, the trustee of the Plan, has certified to the completeness and accuracy of the investments reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, the related investment income reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2009, and the supplemental Schedule H, line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2009.

Note 4: INVESTMENTS AND INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE, Continued:

The following table presents investments at December 31, 2009 and 2008. Investments that represent 5% or more of the Plan's net assets in either year are separately identified.

	December 31, 2009	December 31, 2008
Mutual funds:		
Fidelity Capital and Income Fund	$ 285,828	$ 94,099
Fidelity Contrafund	122,704	123,959
Fidelity Freedom 2010 Fund	222,413	195,063
Fidelity Freedom 2015 Fund	390,803	42,643
Fidelity Freedom 2020 Fund	269,978	188,493
Fidelity Large Cap Value Fund	236,007	192,864
Fidelity Retirement Money Market Portfolio	337,681	290,166
Fidelity Select Technology Portfolio	253,808	285
Fidelity U.S. Bond Index Fund	171,262	139,313
Mutual Global Discovery Fund A	105,654	187,024
Spartan U.S. Equity Index Fund	209,232	141,017
Other	790,086	515,768
Participant loans	27,633	13,874
	$ 3,423,089	$ 2,124,568

Note 5: RELATED PARTY TRANSACTIONS:

Certain Plan investments are shares of mutual funds managed by Fidelity Investments, which is a subsidiary of Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee of the Plan, and, therefore, these transactions qualify as party-in-interest transactions.

Note 6: PLAN TERMINATION:

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

Note 7: INCOME TAX STATUS:

The Plan is a prototype plan sponsored by Fidelity Management and Research Corporation. The prototype plan obtained its latest opinion letter on March 31, 2008, in which the Internal Revenue Service stated that the prototype plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the opinion letter; however, the Plan administrator and the Plan's management believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Note 8: RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500:

The following is a reconciliation of net assets available for benefits per the financial statements as of December 31, 2009 and 2008, to Schedule H of Form 5500:

	2009	2008
Net assets available for benefits per the financial statements	$ 3,650,089	$ 2,351,568
Less receivables at year end:		
Employer contribution	(227,000)	(227,000)
Net assets available for benefits per Schedule H of Form 5500	$ 3,423,089	$ 2,124,568

The following is a reconciliation of contributions received per the financial statements for the year ended December 31, 2009 to Schedule H of Form 5500:

	Employer	Participants' Salary Deferrals	Rollover	Total
Contributions per the financial statements	$ 227,000	$ 241,313	$ 288,275	$ 756,588
Less receivables at December 31, 2009	(227,000)	-	-	(227,000)
Add receivables at December 31, 2008	227,000	-	-	227,000
Contributions per Schedule H of Form 5500	$ 227,000	$ 241,313	$ 288,275	$ 756,588

Note 9: RISKS AND UNCERTAINTIES:

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

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
EMPLOYER IDENTIFICATION NUMBER 94-1635911
PLAN NUMBER 001
SCHEDULE H, Line 4i - SUPPLEMENTAL SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

SCHEDULE OF ASSETS (HELD AT END OF YEAR):

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
*Fidelity :				
	Balanced Fund	Mutual Fund	N/A	$ 18,859
	Capital and Income Fund	Mutual Fund	N/A	285,828
	Contrafund	Mutual Fund	N/A	122,704
	Export and Multinational Fund	Mutual Fund	N/A	33,585
	Floating Rate High Income Fund	Mutual Fund	N/A	2,826
	Freedom 2000 Fund	Mutual Fund	N/A	19,985
	Freedom 2010 Fund	Mutual Fund	N/A	222,413
	Freedom 2015 Fund	Mutual Fund	N/A	390,803
	Freedom 2020 Fund	Mutual Fund	N/A	269,978
	Freedom 2025 Fund	Mutual Fund	N/A	103,473
	Freedom 2030 Fund	Mutual Fund	N/A	92,795
	Freedom 2035 Fund	Mutual Fund	N/A	34,600
	Freedom 2040 Fund	Mutual Fund	N/A	39,493
	Freedom 2045 Fund	Mutual Fund	N/A	513
	Freedom 2050 Fund	Mutual Fund	N/A	461
	Freedom Income Fund	Mutual Fund	N/A	11,765
	International Discovery Fund	Mutual Fund	N/A	130,149
	Large Cap Value Fund	Mutual Fund	N/A	236,007
	Real Estate Investment Portfolio	Mutual Fund	N/A	39,447
	Retirement Money Market Portfolio	Mutual Fund	N/A	337,681
	Select Energy Portfolio	Mutual Fund	N/A	100,554
	Select Financial Portfolio	Mutual Fund	N/A	12,680
	Select Natural Resources Portfolio	Mutual Fund	N/A	78,515
	Select Technology Portfolio	Mutual Fund	N/A	253,808
	U.S. Bond Index Fund	Mutual Fund	N/A	171,262

RIX INDUSTRIES 401(K) PROFIT SHARING PLAN
EMPLOYER IDENTIFICATION NUMBER 94-1635911
PLAN NUMBER 001
SCHEDULE H, Line 4i - SUPPLEMENTAL SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
December 31, 2009

SCHEDULE OF ASSETS (HELD AT END OF YEAR):

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
	Artisan Mid Cap Value Fund	Mutual Fund	N/A	$ 12,911
	Baron Small Cap Fund	Mutual Fund	N/A	11,054
	Mutual Global Discovery Fund A	Mutual Fund	N/A	105,654
	RS Partners Fund	Mutual Fund	N/A	30,619
	Rainier Small/Mid Cap Equity Fund	Mutual Fund	N/A	8,358
	Spartan Extended Market Index Fund	Mutual Fund	N/A	7,444
	Spartan U.S. Equity Index Fund	Mutual Fund	N/A	209,232
				$ 3,395,456
	*Participant Loans	Collateralized by vested balance, interest rate at 3.5 – 9.0%, monthly payments due through June 2014	$ -	$ 27,633

* Denotes party-in-interest