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
TT ELECTRONICS 401(K) RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 10/01/1987

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

118 NEW EDITION COURT
CARY, NC 27511

2b Employer Identification Number (EIN) 56-1536704

2c Sponsor's telephone number 704-264-8861

2d Business code (see instructions) 334410

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.	10/08/2010	BARRY K ROLISON
	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")
CHAIRMAN OF THE RETIREMENT COMMITTEE, INTL RESISTIVE CO, INC.

736 GREENWAY ROAD, P.O. BOX 1860
BOONE, NC 28607-1860

3b Administrator's EIN
58-1798619

3c Administrator's telephone number
704-264-8861

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**	622
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**	516
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	96
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	612
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	612
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	612
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	1
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 2J 2F 2G 2K 3H 2R 2T

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)	X		**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
TT ELECTRONICS 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500.
TT GROUP INDUSTRIES, INC.

D Employer Identification Number (EIN)
56-1536704

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
PRUDENTIAL RETIREMENT INSURANCE & ANNUITY CO

(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
06-1050034	93629	37126-001	612	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
0	24650

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
WS INSURANCE SERVICES, LLC
10700 WHEAT FIRST DR
GLEN ALLEN, VA 23060

(b) Amount of sales and base commissions paid	Fees and other commissions paid (c) Amount	(d) Purpose	(e) Organization code
	24650	SERVICES TO INSURER OR PLAN	4

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	10777902
5	Current value of plan's interest under this contract in separate accounts at year end	5	5260921

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

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

b	Balance at the end of the previous year			7b	12249574
c	Additions: (1) Contributions deposited during the year	7c(1)	534707		
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)	351672		
	(4) Transferred from separate account	7c(4)	402638		
	(5) Other (specify below)	7c(5)	708983		
	▶ FORFEITURES, MISCELLANEOUS EXCHANGES, LOAN REPAYS				
	(6) Total additions			7c(6)	1998000
d	Total of balance and additions (add **b** and **c(6)**)			7d	14247574
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1870429		
	(2) Administration charge made by carrier	7e(2)	2243		
	(3) Transferred to separate account	7e(3)	448891		
	(4) Other (specify below)	7e(4)	1148109		
	▶ FORFEITURES, MISCELLANEOUS EXCHANGES, LOAN INITIATIONS				
	(5) Total deductions			7e(5)	3469672
f	Balance at the end of the current year (subtract **e(5)** from **d**)			7f	10777902

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

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

Specify nature of costs ▶

Part IV Provision of Information

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

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

SCHEDULE 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
TT ELECTRONICS 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
TT GROUP INDUSTRIES, INC.

D Employer Identification Number (EIN)
56-1536704

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

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(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)

PRUDENTIAL INVESTMENT MANAGEMENT SE

13-4122960

(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?
63 71	NONE	11261	Yes [X] No [ ]	Yes [X] No [ ]	417	Yes [X] No [ ]

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

WACHOVIA SECURITIES, LLC.

34-1542819

(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?
33 71	NONE	0	Yes [X] No [ ]	Yes [ ] No [X]	5070	Yes [ ] No [X]

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

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 15 37 50 64	NONE	4680	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

THE PRUDENTIAL INSURANCE COMPANY OF

22-1211670

(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?
60	NONE	0	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

(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
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
AMERICAN FUNDS DISTRIBUTORS INC 95-2769620	50.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AMER:EUROPACIFIC GROW R3

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
AMERICAN FUNDS DISTRIBUTORS INC 95-2769620	50.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 CAP WORLD GROW & INCO R3

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
AMERICAN FUNDS DISTRIBUTORS INC 95-2769620	50.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 GROWTH FUND OF AMERICA R3

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
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
DELAWARE DISTRIBUTORS INC 35-1140070	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 DELAWARE INFL PROT BOND A

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
EATON VANCE DISTRIBUTORS, INC. 04-3239487	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 EATON VANCE LG CAP VAL A

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
FIDELITY DISTRIBUTORS CORPORATION 04-2270522	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 FID ADVISOR NEW INSIGHTS

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
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
INVESCO AIM DISTRIBUTORS, INC. 74-1894784	16.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AIM DIVERSIFIED DIVIDEND

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
INVESCO AIM DISTRIBUTORS, INC. 74-1894784	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AIM ENERGY A

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS DISTRIBUTORS LLC 75-3019335	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 JANUS BALANCED FD CL S

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
PRUDENTIAL INVESTMENT MANAGEMENT SE	63	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.
T. ROWE PRICE INVESTMENT SERVICES, 52-1184650	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 T ROWE PRICE GROWTH STOCK

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND	15 60 64	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.
INVESCO AIM INVESTMENT SERVICES, IN 98-0557567	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AIM DIVERSIFIED DIVIDEND

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND	15 60 64	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS SERVICE CORP 43-1804048	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 4/30/2009 JANUS ACCOUNT

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
PRUDENTIAL RETIREMENT INSURANCE AND	15 60 64	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS SERVICES LLC 43-1804048	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 4/30/2009 JANUS ADVISOR BALANCED FD

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND	15 60 64	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.
T ROWE PRICE INVESTMENT SERVICES IN 52-1184650	10.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 4/30/2009 T ROWE PRICE GROWTH STOCK

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
AIM INVESTMENT SERVICES INC 76-0528004	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AIM ENERGY A

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
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
AMERICAN FUNDS SERVICE CO 95-2566717	15.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 AMER:EUROPACIFIC GROW R3

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
AMERICAN FUNDS SERVICE CO 95-2566717	15.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 CAP WORLD GROW & INCO R3

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
AMERICAN FUNDS SERVICE CO 95-2566717	15.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 GROWTH FUND OF AMERICA R3

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
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
BISYS FUND SERVICES OHIO INC 13-3532663	0.000 BPS AND $16.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 3/31/2009 VICTORY ESTABLISHED VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
BISYS FUND SERVICES OHIO INC 13-3532663	20.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 4/1/2009 TO 12/31/2009 VICTORY ESTABLISHED VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
BOSTON FINANCIAL DATA SERVICE, INC 04-2526037	55.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 WELLS FARGO ADV SM CAP

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
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
DELAWARE SERVICE COMPANY 35-1140070	15.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 DELAWARE INFL PROT BOND A

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
FIDELITY INV INSTITU OPERATIONS CO 04-2882358	15.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 FID ADVISOR NEW INSIGHTS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS SERVICES LLC 43-1804048	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 JANUS ADVISER BAL FUND

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
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS SERVICES LLC 43-1804048	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 JANUS BALANCED FD CL S

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE PRUDENTIAL INSURANCE COMPANY OF	15 60 64	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.
PNC GLOBAL INVESMNT SRVCNG U.S. INC 04-2871943	25.000 BPS AND $0.00 PER PARTICIPANT INVESTED IN THE FUND FROM 1/1/2009 TO 12/31/2009 EATON VANCE LG CAP VAL A

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
TT ELECTRONICS 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
TT GROUP INDUSTRIES, INC.

D Employer Identification Number (EIN)
56-1536704

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: DRYDEN S & P 500 INDEX FUND

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-123	P	686248

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

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-166	P	262754

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

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-167	P	250194

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

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-168	P	951230

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

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-169	P	319995

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFETIME INCOME & EQUITY

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-170	P	20782

a Name of MTIA, CCT, PSA, or 103-12 IE: CORE BOND ENHAN INDEX

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

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)
06-1050034-036	P	322288

a Name of MTIA, CCT, PSA, or 103-12 IE: LARGE CAP BLEND/VICTORY			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-177	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	38703
a Name of MTIA, CCT, PSA, or 103-12 IE: MID CAP GROWTH/ARTISAN			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-185	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	677245
a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GROWTH/TIMESSQ			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-132	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	489252
a Name of MTIA, CCT, PSA, or 103-12 IE: IFX LT INC & EQUITY FD I			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-515	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	192807
a Name of MTIA, CCT, PSA, or 103-12 IE: IFX LT AGG GROWTH FD I			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-511	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	234999
a Name of MTIA, CCT, PSA, or 103-12 IE: IFX LT GROWTH FUND I			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-512	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	170763
a Name of MTIA, CCT, PSA, or 103-12 IE: IFX LT BALANCED FUND I			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-513	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	76073
a Name of MTIA, CCT, PSA, or 103-12 IE: IFX LT CONSERVATIVE FD I			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-514	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	59411
a Name of MTIA, CCT, PSA, or 103-12 IE: AIM DIVERSIFIED DIVIDEND			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-082	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	508177
a Name of MTIA, CCT, PSA, or 103-12 IE: SA/JANUS FUND'S STRAT			
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.			
c EIN-PN 06-1050034-063	**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: SA/JANUS BALANCED STRAT

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN 06-1050034-180	**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)

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

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

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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
TT ELECTRONICS 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
TT GROUP INDUSTRIES, INC.

D Employer Identification Number (EIN)
56-1536704

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	953011	939855
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	5883273	5260921
(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)	1744232	4763622
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	12249574	10777902
(15) Other	1c(15)	619514	1154919

			(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	21449604	22897219
	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	21449604	22897219

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)	348093	
	(B) Participants	2a(1)(B)	791703	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1139796
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)	60404	
	(F) Other	2b(1)(F)	359691	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		420095
	(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)	44139	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		44139
	(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)		1110047
(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)		1036961
c Other income	2c		346439
d Total income. Add all **income** amounts in column (b) and enter total	2d		4097477
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2572202	
(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)		2572202
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		61719
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	15941	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		15941
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2649862
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		1447615
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: GRANT THORNTON, LLP (2) EIN: 36-6055558

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

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

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

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

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
TT ELECTRONICS 401(K) RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
TT GROUP INDUSTRIES, INC.

D Employer Identification Number (EIN)
56-1536704

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): 22-1211670

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):

Financial Statements, Supplemental Schedule and Report of Independent Certified Public Accountants

TT Electronics 401(k) Retirement Plan

As of December 31, 2009 and 2008 and for the Year Ended December 31, 2009

Table of contents

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Note: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

Audit • Tax • Advisory

Grant Thornton LLP
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Report of Independent Certified Public Accountants

To the Plan Administrator of
TT Electronics 401(k) Retirement Plan:

We were engaged to audit the financial statements of TT Electronics 401(k) Retirement Plan (the Plan) as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and the supplemental schedule as of December 31, 2009, as listed in the accompanying table of contents. These financial statements and 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 7, which was certified by Prudential Bank & Trust, F.S.B., the trustee of the Plan, and Prudential Retirement Insurance and Annuity Company, a custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee and custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the trustee and custodian as of December 31, 2009 and 2008, and for the year ended December 31, 2009, that the information provided to the plan administrator by the trustee and custodian 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 and custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America as established by the American Institute of Certified Public Accountants and, in our opinion, are presented in compliance with the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Grant Thornton LLP

Atlanta, Georgia
October 8, 2010

Statements of net assets available for benefits

December 31	2009	2008
Assets:		
Investments, at fair value	**$ 22,897,219**	$ 21,449,604
Receivables:		
Participant contributions	**12,090**	3,030
Employer contributions	**5,626**	1,343
Total receivables	**17,716**	4,373
Net assets available for benefits	**$ 22,914,935**	$ 21,453,977

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

Statement of changes in net assets available for benefits

For the year ended December 31	2009
Additions	
Additions to net assets attributed to:	
Investment earnings:	
Net appreciation in fair value of investments	$ 2,493,447
Interest income	420,095
Dividends	44,139
Contributions:	
Participants	800,763
Employer	352,376
Total additions	4,110,820
Deductions	
Deductions from net assets attributed to:	
Benefits paid to participants	2,572,202
Deemed distributions of participant loans	61,719
Administrative expenses	15,941
Total deductions	2,649,862
Net increase	1,460,958
Net assets available for benefits, beginning of year	21,453,977
Net assets available for benefits, end of year	$ 22,914,935

The accompanying notes are an integral part of this financial statement.

Notes to financial statements

1 Description of the Plan

The following description of the TT Electronics 401(k) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees of the following operating entities of TT Group Industries, Inc.: International Resistive Company, Inc., BAS Components, Inc., International Resistive Company of Texas LLC, Shallcross, Inc. and AB Interconnect, Inc. (collectively, the Company or Plan Sponsor). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Prudential Bank & Trust, F.S.B. is the Plan trustee and its affiliate, Prudential Retirement Insurance and Annuity Company, serves as the Plan custodian of certain investments and as the Plan recordkeeper (collectively, Prudential). The Company's administrative committee is the plan administrator.

Eligibility

Employees who are not covered by a collective bargaining agreement can participate in the Plan immediately upon hiring.

Employees who are covered by collective bargaining agreements can participate in the Plan in accordance with their respective collective bargaining agreements.

Contributions

Employee contributions to the Plan are limited to the lesser of 100% of the employee's gross wages or the maximum amount allowable by law.

For employees who are not covered by the terms of a collective bargaining agreement, the Company matches 100% of the employee's contributions up to a maximum of 3% of each employee's gross wages, excluding bonuses. For employees who are covered by the terms of a collective bargaining agreement, the Company contributes an amount using a formula which reflects the employee's length of service as determined in the respective agreement. During 2009, the Company contributed $.12 cents per hour for eligible employees with a length of service or 1-4 years, $.28 cents per hour for eligible employees with a length of service of 5-9 years, $.32 cents per hour for eligible employees with a length of service of 10-19 years, $.33 cents per hour for eligible employees with a length of service of 20-24 years, and $.35 cents per hour for eligible employees with a length of service of 25+ years, respectively.

At the discretion of the Board of Directors, the Company may also make additional contributions for a plan year. An employee's share of this contribution is determined using a formula which reflects the employee's length of service and compensation. No such additional contributions were made for the 2009 plan year.

Rollover Provision

The Plan allows participants to "roll over" assets from other qualified savings plans into the Plan.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants who are not covered by the terms of a collective bargaining agreement are immediately vested in company matching contributions plus actual earnings thereon. Participants who are covered by certain collective bargaining agreements become fully vested in company contributions after five years of service based on the following table:

Less than 2 years of service	0%
2 years of service	40%
3 years of service	60%
4 years of service	80%
5 years of service	100%

Participant Loans

Participants may borrow from their fund accounts a minimum of $1,000 up to the lesser of $50,000 or 50% of their vested account balance. Loan terms for all loans other than for principal residence range from 1-5 years. Principal residence loan terms range from 1-15 years. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% - 9.25%.

Payment of Benefits

Participants are entitled to withdraw all or a portion of their vested account balances upon termination of services due to death, permanent disability, retirement or for other reasons or any time thereafter. The Plan also provides that a participant may receive liquidation of all or part of his vested benefits in the event of extreme economic hardship, subject to approval by the administrative committee. In accordance with the Internal Revenue Code, benefits withdrawn prior to age 59½ may be subject to additional taxes.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue the contributions 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 their accounts.

Forfeitures

Account balances forfeited by prior plan participants may be used by the employer to reduce its contributions to the Plan. Forfeiture balances are as follows:

Forfeited nonvested accounts as of January 1, 2009	$	1,722
Participant forfeitures during 2009		11,364
Investment earnings during 2009		74
Forfeitures used to reduce employer contributions during 2009		(10,564)
Forfeited nonvested accounts as of December 31, 2009	$	2,596

Participant Accounts

Participant accounts may be invested in one or more of the investment funds available under the Plan at the direction of the participant. Each participant's account is credited with (a) participant's contributions, (b) an allocation of employer contributions and (c) an allocation of investment earnings, and is charged with (a) withdrawals, (b) an allocation of investment losses and (c) administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

2 Summary of Significant Accounting Policies

Adoption of the FASB Accounting Standards Codification

In June 2009, the Financial Accounting Standards Board (FASB) issued the FASB Accounting Standards Codification (ASC). The ASC became the single source for all authoritative Generally Accepted Accounting Principles (GAAP) recognized by the FASB and is required to be applied to financial statements issued for interim and annual periods ending after September 15, 2009. The ASC does not change GAAP and did not impact the Plan's financial statements.

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 accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation

The Plan's investments are stated 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 4 for description of fair value measurements.

Income and Expenses of the Plan

Income from investments is recognized when earned. 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.

The Plan Sponsor pays substantially all expenses for the administration of the Plan except for certain investment related and participant requested service expenses.

Benefit Payments

Benefits are recorded when paid.

Risks and Uncertainties

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

3 Investments

The following presents the fair value of investments. A more detailed presentation of the investments appears in the supplemental schedule of assets (held at end of year). Investments that represent 5% or more of the Plan's net assets are separately identified.

December 31	2009	2008
Guaranteed income fund	**$ 10,777,902**	$ 12,249,574
Pooled separate accounts		
Individually less than 5% of net assets	**5,260,921**	5,883,273
Mutual funds		
Individually less than 5% of net assets	**4,763,622**	1,744,232
Self-directed brokerage accounts		
Individually less than 5% of net assets	**1,154,919**	619,514
Participant loans		
Individually less than 5% of net assets	**939,855**	953,011
	$ 22,897,219	$ 21,449,604

During 2009, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value as follows:

For the year ended December 31	2009
Pooled separate accounts	$ 1,110,047
Mutual funds	1,036,961
Self-directed brokerage accounts	346,439
	$ 2,493,447

4 Fair Value Measurement

Effective January 1, 2008, the Plan adopted the provisions of Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) No. 820 – *Fair Value Measurements and Disclosures*. FASB ASC No. 820 establishes a single authoritative definition of fair value, sets out a framework for measuring fair value and requires disclosures about fair value measurement. FASB ASC No. 820 establishes 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 No. 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 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.

Pooled separate accounts: based on net asset value per unit, as determined by the custodian, using quoted market prices of the underlying assets.

Guaranteed income fund: comprised of a guaranteed income fund valued at contract value which represents contributions, earnings at guaranteed crediting rates, less withdrawals and fees. The fund is a stable value product specifically designed for defined contribution plans to provide money market like liquidity and safety of principal with an attractive rate of return. The concept of a value other than contract value does not apply to this insurance company issued, general account backed evergreen group annuity spread product even upon a discontinuance of the contract in which case the contract value would be paid no later than 90 days from the date the sponsor provides notice to discontinue. This contract's operation is different than many other evergreen group annuity products in the market by virtue of the fact that a market value (fair value) adjustment does not apply upon discontinuance.

Mutual funds: valued at net asset value (NAV) of shares held by the Plan at year-end.

Self-directed brokerage accounts: the brokerage accounts are comprised of common stocks, mutual funds and a partnership investment. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded. Mutual funds are valued at net asset value (NAV). Investments in partnerships are valued at appraised values at the end of the Plan year as reported by the partnerships' respective general partners and the trustee of the Plan.

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

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 table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008. As required by FASB ASC No. 820, assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

December 31, 2009	Level 1	Level 2	Level 3	Total
Investments, at fair value:				
Guaranteed income fund	$ -	$ -	$ 10,777,902	$ 10,777,902
Pooled separate accounts				
Small cap growth funds	-	489,252	-	489,252
Mid cap growth funds	-	677,245	-	677,245
Large cap blend funds	-	724,951	-	724,951
Large cap value funds	-	508,177	-	508,177
IncomeFlex funds	-	734,053	-	734,053
Balanced - lifetime funds	-	1,804,955	-	1,804,955
Fixed income - domestic funds	-	322,288	-	322,288
Total pooled separate accounts	-	5,260,921	-	5,260,921
Mutual funds				
International large blend funds	550,815	-	-	550,815
Small cap blend funds	632,649	-	-	632,649
Mid cap value funds	416,781	-	-	416,781
Large cap value funds	455,431	-	-	455,431
Large cap growth funds	1,376,895	-	-	1,376,895
Balanced funds	521,862	-	-	521,862
Equity funds - energy	271,287	-	-	271,287
World stock funds	519,981			519,981
U.S. government and corporate bonds	17,921	-	-	17,921
Total mutual funds	4,763,622	-	-	4,763,622
Self-directed brokerage accounts				
Interest bearing cash	121,487	-	-	121,487
Mutual funds	137,956	-	-	137,956
Common stock	758,471	-	-	758,471
Partnership / joint venture interest	-	-	137,005	137,005
Total self-directed brokerage accounts	1,017,914	-	137,005	1,154,919
Participant loans	-	-	939,855	939,855
Total investments	$ 5,781,536	$ 5,260,921	$ 11,854,762	$ 22,897,219

December 31, 2008	Level 1	Level 2	Level 3	Total
Investments, at fair value:				
Guaranteed income fund	$ -	$ -	$ 12,249,574	$ 12,249,574
Pooled separate accounts	-	5,883,273	-	5,883,273
Mutual funds	1,744,232	-	-	1,744,232
Self-directed brokerage accounts	574,364	-	45,150	619,514
Participant loans	-	-	953,011	953,011
Total investments	$ 2,318,596	$ 5,883,273	$ 13,247,735	$ 21,449,604

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 investments.

For the year ended December 31, 2009	Guaranteed Income Fund	Self-directed Brokerage Accounts	Participant Loans
Balance, beginning of year	$ 12,249,574	$ 45,150	$ 953,011
Interest income	388,925	-	-
Purchases, sales, issuances and settlements - net	(1,860,597)	91,855	(13,156)
Balance, end of year	$ 10,777,902	$ 137,005	$ 939,855

5 Tax Status of the Plan

The Internal Revenue Service has determined and informed the Company by a letter dated August 31, 2006, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code. There have been no amendments to the Plan since receiving the determination letter.

6 Related-party Transactions

Certain plan investments are units of pooled separate accounts and interest in a guaranteed income fund managed by Prudential. Prudential is the plan trustee and custodian, and, therefore, these transactions qualify as party-in-interest. Fees paid from plan assets for the services provided by Prudential amounted to $15,941 for the year ended December 31, 2009.

7 Certified Financial Information (Unaudited)

The following unaudited information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by Prudential Bank & Trust, F.S.B. and Prudential Retirement Insurance and Annuity Company, collectively, the trustee and custodian of the Plan.

December 31	2009	2008
Investments, at fair value:		
Guaranteed income fund	**$ 10,777,902**	$ 12,249,574
Pooled separate accounts and mutual funds	**10,024,543**	7,627,505
Brokerage accounts	**1,154,919**	619,514
Participant loans	**939,855**	953,011
Total investments, at fair value	**$ 22,897,219**	$ 21,449,604

For the year ended December 31	2009
Net appreciation in fair value of investments	$ 2,493,447
Interest income	420,095
Dividends	44,139
Net investment income	$ 2,957,681

8 Investment Contract with Insurance Company

The Plan holds a benefit-responsive investment contract with Prudential Retirement Insurance and Annuity Company (Prudential Insurance). Prudential Insurance maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at fair value, which approximates contract value, as reported to the Plan by Prudential Insurance. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk on the contract issuer or otherwise. The average yield and crediting interest rate was approximately 2.85% and 3.60% for 2009 and 2008, respectively. The crediting interest rate is based on a formula agreed upon with the issuer, but may not be less than 1.50%. Such interest rates are reviewed on a quarterly basis for resetting.

9 Reconciliation of Financial Statements to Form 5500

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

December 31	**2009**	**2008**
Net assets available for benefits per the financial statements	**$ 22,914,935**	$ 21,453,977
Less: participant contributions receivable	**(12,090)**	(3,030)
Less: employer contributions receivable	**(5,626)**	(1,343)
Total contributions receivable	**(17,716)**	(4,373)
Net assets available for benefits per the Form 5500	**$ 22,897,219**	$ 21,449,604

The following is a reconciliation of contributions per the financial statements to the Form 5500:

For the year ended December 31	**2009**
Employer contributions per the financial statements	$ 352,376
Add: employer contribution receivable at December 31, 2008	1,343
Less: employer contribution receivable at December 31, 2009	(5,626)
Employer contributions per the Form 5500	$ 348,093
Participant contributions per the financial statements	$ 800,763
Add: participant contribution receivable at December 31, 2008	3,030
Less: participant contribution receivable at December 31, 2009	(12,090)
Participant contributions per the Form 5500	$ 791,703

10 Subsequent Events

Plan management has evaluated all subsequent events through October 8, 2010 and determined that no subsequent events have occurred requiring adjustments to the financial statements or disclosures.

Schedule of assets (held at end of year)

As of December 31, 2009

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current value
*	Prudential Retirement Insurance & Annuity Company	GUARANTEED INCOME FUND	$ 10,777,902
*	Prudential Retirement Insurance & Annuity Company	MID CAP GROWTH/ARTISAN	677,245
*	Prudential Retirement Insurance & Annuity Company	SMALL CAP GROWTH/TIMESSQ	489,252
*	Prudential Retirement Insurance & Annuity Company	IFX LT INC & EQUITY FD (I)	192,807
*	Prudential Retirement Insurance & Annuity Company	IFX LT AGG GROWTH FD (I)	234,999
*	Prudential Retirement Insurance & Annuity Company	IFX LT GROWTH FD (I)	170,763
*	Prudential Retirement Insurance & Annuity Company	IFX LT BALANCED FUND (I)	76,073
*	Prudential Retirement Insurance & Annuity Company	IFX LT CONSERVATIVE FD (I)	59,411
*	Prudential Retirement Insurance & Annuity Company	AIM DIVERSIFIED DIVIDEND	508,177
*	Prudential Retirement Insurance & Annuity Company	LIFETIME AGGRESSIVE	262,754
*	Prudential Retirement Insurance & Annuity Company	LIFETIME GROWTH FD	250,194
*	Prudential Retirement Insurance & Annuity Company	LIFETIME BALANCED FD	951,230
*	Prudential Retirement Insurance & Annuity Company	LIFETIME CONSERVATIVE	319,995
*	Prudential Retirement Insurance & Annuity Company	LIFETIME INCOME & EQUITY	20,782
*	Prudential Retirement Insurance & Annuity Company	DRYDEN S&P 500 INDEX FUND	686,248
*	Prudential Retirement Insurance & Annuity Company	CORE BOND ENHAN INDEX	322,288
*	Prudential Retirement Insurance & Annuity Company	LARGE CAP BLEND/VICTORY	38,703
*	Prudential Mutual Funds	AMER: EUROPACIFIC GROW R3	550,815
*	Prudential Mutual Funds	GROWTH FUND OF AMERICA R3	1,058,676
*	Prudential Mutual Funds	CAP WORLD GROW & INCO R3	519,981
*	Prudential Mutual Funds	FID ADVISOR NEW INSIGHTS	318,219
*	Prudential Mutual Funds	AIM ENERGY A	271,287
*	Prudential Mutual Funds	JANUS BALANCED FD CL S	521,862
*	Prudential Mutual Funds	EATON VANCE LG CAP VAL A	455,431
*	Prudential Mutual Funds	VICTORY ESTABLISHED VALUE	416,781
*	Prudential Mutual Funds	DELAWARE INFL PROT BOND A	17,921
*	Prudential Mutual Funds	WELLS FARGO ADV SM CAP	632,649
	NATIONAL FINANCIAL	Interest Bearing Cash	121,487
	AMER INTL GROUP INC	Corporate Stock - Common	1,499
	ASSURED PHARMACY INC COM	Corporate Stock - Common	6
	BANK OF AMERICA CORP	Corporate Stock - Common	3,012
	CENTRAL FD CDA CL A ISIN #CA1535011011	Corporate Stock - Common	140,556

Schedule of assets (held at end of year) (cont'd)

As of December 31, 2009

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current value
	CHINA VOIP & DIGITAL TELECOM INC COM	Corporate Stock - Common	105
	CLEAN ENERGY FUELS CORP	Corporate Stock - Common	5,147
	COMPOSITE TECHNOLOGY CORP	Corporate Stock - Common	397
	COSINE COMMUNICATIONS INC	Corporate Stock - Common	38
	DC BRANDS INTL INC COM NEW	Corporate Stock - Common	130
	FAIRPOINT COMMUNICATIONS INC	Corporate Stock - Common	20
	FEDERAL NATL MTG ASSN	Corporate Stock - Common	590
	FORD MTR CO DEL COM	Corporate Stock - Common	11,750
	GLOBAL HIGH INCOME FUND INC	Corporate Stock - Common	170,100
	HECLA MINING CO	Corporate Stock - Common	43,260
	ISHARES TR FTSE XINHUA HK CHINA 25	Corporate Stock - Common	25,356
	LEHMAN BROS HLDGS CORP	Corporate Stock - Common	70
	LOWES COMPANIES	Corporate Stock - Common	22,642
	MACQUARIE INFRASTRUCTURE CO	Corporate Stock - Common	104,380
	MANITOWOC INC	Corporate Stock - Common	4,985
	MOTORS LIQ CO COM	Corporate Stock - Common	188
	NORTHERN OIL & GAS INC NEV	Corporate Stock - Common	5,920
	PEABODY ENERGY CORP	Corporate Stock - Common	49,731
	SILVER WHEATON CORP COM	Corporate Stock - Common	141,188
	SPDR SER TR S&P OIL & GAS EQUIP	Corporate Stock - Common	11,392
	WESTERN COPPER CORP COM	Corporate Stock - Common	10,716
	YADKIN VY FINL CORP COM	Corporate Stock - Common	1,830
	ZENN MOTOR COMPANY INC COM NPV	Corporate Stock - Common	3,463
	BERWYN INCOME FUND	Mutual Funds	27,074
	FIDELITY STRATEGIC INCOME	Mutual Funds	25,216
	FPA CRESCENT INSTL	Mutual Funds	25,609
	JANUS ORION FUND CLASS J SHARES	Mutual Funds	6,385
	MATTHEWS ASIAN GROWTH & INCOME FUND	Mutual Funds	24,933
	YACKTMAN FUND	Mutual Funds	28,739
	BUCKEYE PARTNERS L P UNIT LTD PARTNERSHIP	Part. / Joint Venture Interest	76,230
	TARGA RES PARTNERS LP COM UNIT LTD	Part. / Joint Venture Interest	60,775
*	PARTICIPANT LOANS	4.25% - 9.25%	939,855
			$ 22,897,219

* Indicates party-in-interest to the Plan

Note: Cost information (column d) has been excluded because all investments are participant-directed

RUN DATE: 01/19/10
CYCLE: 1003YEB
PLAN NBR: 763484

PLAN NAME: TT ELECTRONICS

PLAN SPONSOR EIN: 561536704

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES FOR PLAN YEAR 2009

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
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	GUARANTEED INCOME FUND	10,777,902	10,777,902
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	MID CAP GROWTH/ARTISAN	679,543	677,245
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	SMALL CAP GROWTH/TIMESSQ	433,516	489,252
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	IFX LT INC & EQUITY FD (I	184,375	192,807
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	IFX LT AGG GROWTH FD (I)	256,401	234,999
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	IFX LT GROWTH FUND (I)	181,420	170,763
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	IFX LT BALANCED FUND (I)	80,070	76,073
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	IFX LT CONSERVATIVE FD (I	59,545	59,411
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	AIM DIVERSIFIED DIVIDEND	478,720	508,177
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFETIME AGGRESSIVE	264,565	262,754
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFETIME GROWTH FD	239,063	250,194
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFETIME BALANCED FD	912,809	951,230
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFETIME CONSERVATIVE	303,276	319,995
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LIFETIME INCOME&EQUITY	18,749	20,781
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	DRYDEN S&P 500 INDEX FUND	710,344	686,247
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	CORE BOND ENHAN INDEX	299,794	322,288
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	LARGE CAP BLEND/VICTORY	44,939	38,703
PRUDENTIAL MUTUAL FUNDS	AMER:EUROPACIFIC GROW R3	572,913	550,815
PRUDENTIAL MUTUAL FUNDS	GROWTH FUND OF AMERICA R3	807,723	1,058,676
PRUDENTIAL MUTUAL FUNDS	CAP WORLD GROW & INCO R3	557,198	519,981
PRUDENTIAL MUTUAL FUNDS	FID ADVISOR NEW INSIGHTS	243,937	318,219
PRUDENTIAL MUTUAL FUNDS	AIM ENERGY A	252,514	271,287
PRUDENTIAL MUTUAL FUNDS	JANUS BALANCED FD CL S	457,163	521,862
PRUDENTIAL MUTUAL FUNDS	EATON VANCE LG CAP VAL A	395,120	455,431
PRUDENTIAL MUTUAL FUNDS	VICTORY ESTABLISHED VALUE	416,879	416,781
PRUDENTIAL MUTUAL FUNDS	DELAWARE INFL PROT BOND A	17,633	17,921
PRUDENTIAL MUTUAL FUNDS	WELLS FARGO ADV SM CAP	584,979	632,649
SELF DIRECTED BROKERAGE	SELF DIRECTED BROKERAGE	1,154,919	1,154,919
THE PRUDENTIAL INSURANCE COMPANY OF AMERICA	AP FUND	0	0

RUN DATE: 01/19/10
CYCLE: 1003YEB
PLAN NBR: 763484

PLAN NAME: TT ELECTRONICS

PLAN SPONSOR EIN: 561536704

SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES FOR PLAN YEAR 2009

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
PARTICIPANT LOANS	4.25% - 9.25%	0	939,855

Financial Statements, Supplemental Schedule and Report of Independent Certified Public Accountants

TT Electronics 401(k) Retirement Plan

As of December 31, 2009 and 2008 and for the Year Ended December 31, 2009

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Note: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

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Report of Independent Certified Public Accountants

To the Plan Administrator of
TT Electronics 401(k) Retirement Plan:

We were engaged to audit the financial statements of TT Electronics 401(k) Retirement Plan (the Plan) as of December 31, 2009 and 2008, and for the year ended December 31, 2009, and the supplemental schedule as of December 31, 2009, as listed in the accompanying table of contents. These financial statements and 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 7, which was certified by Prudential Bank & Trust, F.S.B., the trustee of the Plan, and Prudential Retirement Insurance and Annuity Company, a custodian of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee and custodian hold the Plan's investment assets and execute investment transactions. The plan administrator has obtained certifications from the trustee and custodian as of December 31, 2009 and 2008, and for the year ended December 31, 2009, that the information provided to the plan administrator by the trustee and custodian 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 and custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America as established by the American Institute of Certified Public Accountants and, in our opinion, are presented in compliance with the Department of Labor Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Grant Thornton LLP

Atlanta, Georgia
October 8, 2010

Statements of net assets available for benefits

December 31	2009	2008
Assets:		
Investments, at fair value	**$ 22,897,219**	$ 21,449,604
Receivables:		
Participant contributions	**12,090**	3,030
Employer contributions	**5,626**	1,343
Total receivables	**17,716**	4,373
Net assets available for benefits	**$ 22,914,935**	$ 21,453,977

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

Statement of changes in net assets available for benefits

For the year ended December 31	2009
Additions	
Additions to net assets attributed to:	
Investment earnings:	
Net appreciation in fair value of investments	$ 2,493,447
Interest income	420,095
Dividends	44,139
Contributions:	
Participants	800,763
Employer	352,376
Total additions	4,110,820
Deductions	
Deductions from net assets attributed to:	
Benefits paid to participants	2,572,202
Deemed distributions of participant loans	61,719
Administrative expenses	15,941
Total deductions	2,649,862
Net increase	1,460,958
Net assets available for benefits, beginning of year	21,453,977
Net assets available for benefits, end of year	$ 22,914,935

The accompanying notes are an integral part of this financial statement.

Notes to financial statements

1 Description of the Plan

The following description of the TT Electronics 401(k) Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees of the following operating entities of TT Group Industries, Inc.: International Resistive Company, Inc., BAS Components, Inc., International Resistive Company of Texas LLC, Shallcross, Inc. and AB Interconnect, Inc. (collectively, the Company or Plan Sponsor). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Prudential Bank & Trust, F.S.B. is the Plan trustee and its affiliate, Prudential Retirement Insurance and Annuity Company, serves as the Plan custodian of certain investments and as the Plan recordkeeper (collectively, Prudential). The Company's administrative committee is the plan administrator.

Eligibility

Employees who are not covered by a collective bargaining agreement can participate in the Plan immediately upon hiring.

Employees who are covered by collective bargaining agreements can participate in the Plan in accordance with their respective collective bargaining agreements.

Contributions

Employee contributions to the Plan are limited to the lesser of 100% of the employee's gross wages or the maximum amount allowable by law.

For employees who are not covered by the terms of a collective bargaining agreement, the Company matches 100% of the employee's contributions up to a maximum of 3% of each employee's gross wages, excluding bonuses. For employees who are covered by the terms of a collective bargaining agreement, the Company contributes an amount using a formula which reflects the employee's length of service as determined in the respective agreement. During 2009, the Company contributed $.12 cents per hour for eligible employees with a length of service or 1-4 years, $.28 cents per hour for eligible employees with a length of service of 5-9 years, $.32 cents per hour for eligible employees with a length of service of 10-19 years, $.33 cents per hour for eligible employees with a length of service of 20-24 years, and $.35 cents per hour for eligible employees with a length of service of 25+ years, respectively.

At the discretion of the Board of Directors, the Company may also make additional contributions for a plan year. An employee's share of this contribution is determined using a formula which reflects the employee's length of service and compensation. No such additional contributions were made for the 2009 plan year.

Rollover Provision

The Plan allows participants to "roll over" assets from other qualified savings plans into the Plan.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants who are not covered by the terms of a collective bargaining agreement are immediately vested in company matching contributions plus actual earnings thereon. Participants who are covered by certain collective bargaining agreements become fully vested in company contributions after five years of service based on the following table:

Less than 2 years of service	0%
2 years of service	40%
3 years of service	60%
4 years of service	80%
5 years of service	100%

Participant Loans

Participants may borrow from their fund accounts a minimum of $1,000 up to the lesser of $50,000 or 50% of their vested account balance. Loan terms for all loans other than for principal residence range from 1-5 years. Principal residence loan terms range from 1-15 years. The loans are secured by the balance in the participant's account and bear interest at rates that range from 4.25% - 9.25%.

Payment of Benefits

Participants are entitled to withdraw all or a portion of their vested account balances upon termination of services due to death, permanent disability, retirement or for other reasons or any time thereafter. The Plan also provides that a participant may receive liquidation of all or part of his vested benefits in the event of extreme economic hardship, subject to approval by the administrative committee. In accordance with the Internal Revenue Code, benefits withdrawn prior to age 59½ may be subject to additional taxes.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue the contributions 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 their accounts.

Forfeitures

Account balances forfeited by prior plan participants may be used by the employer to reduce its contributions to the Plan. Forfeiture balances are as follows:

Forfeited nonvested accounts as of January 1, 2009	$	1,722
Participant forfeitures during 2009		11,364
Investment earnings during 2009		74
Forfeitures used to reduce employer contributions during 2009		(10,564)
Forfeited nonvested accounts as of December 31, 2009	$	2,596

Participant Accounts

Participant accounts may be invested in one or more of the investment funds available under the Plan at the direction of the participant. Each participant's account is credited with (a) participant's contributions, (b) an allocation of employer contributions and (c) an allocation of investment earnings, and is charged with (a) withdrawals, (b) an allocation of investment losses and (c) administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

2 Summary of Significant Accounting Policies

Adoption of the FASB Accounting Standards Codification

In June 2009, the Financial Accounting Standards Board (FASB) issued the FASB Accounting Standards Codification (ASC). The ASC became the single source for all authoritative Generally Accepted Accounting Principles (GAAP) recognized by the FASB and is required to be applied to financial statements issued for interim and annual periods ending after September 15, 2009. The ASC does not change GAAP and did not impact the Plan's financial statements.

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 accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation

The Plan's investments are stated 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 4 for description of fair value measurements.

Income and Expenses of the Plan

Income from investments is recognized when earned. 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.

The Plan Sponsor pays substantially all expenses for the administration of the Plan except for certain investment related and participant requested service expenses.

Benefit Payments

Benefits are recorded when paid.

Risks and Uncertainties

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

3 Investments

The following presents the fair value of investments. A more detailed presentation of the investments appears in the supplemental schedule of assets (held at end of year). Investments that represent 5% or more of the Plan's net assets are separately identified.

December 31	2009	2008
Guaranteed income fund	**$ 10,777,902**	$ 12,249,574
Pooled separate accounts		
Individually less than 5% of net assets	**5,260,921**	5,883,273
Mutual funds		
Individually less than 5% of net assets	**4,763,622**	1,744,232
Self-directed brokerage accounts		
Individually less than 5% of net assets	**1,154,919**	619,514
Participant loans		
Individually less than 5% of net assets	**939,855**	953,011
	$ 22,897,219	$ 21,449,604

During 2009, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value as follows:

For the year ended December 31	2009
Pooled separate accounts	$ 1,110,047
Mutual funds	1,036,961
Self-directed brokerage accounts	346,439
	$ 2,493,447

4 Fair Value Measurement

Effective January 1, 2008, the Plan adopted the provisions of Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) No. 820 – *Fair Value Measurements and Disclosures*. FASB ASC No. 820 establishes a single authoritative definition of fair value, sets out a framework for measuring fair value and requires disclosures about fair value measurement. FASB ASC No. 820 establishes 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 No. 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 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.

Pooled separate accounts: based on net asset value per unit, as determined by the custodian, using quoted market prices of the underlying assets.

Guaranteed income fund: comprised of a guaranteed income fund valued at contract value which represents contributions, earnings at guaranteed crediting rates, less withdrawals and fees. The fund is a stable value product specifically designed for defined contribution plans to provide money market like liquidity and safety of principal with an attractive rate of return. The concept of a value other than contract value does not apply to this insurance company issued, general account backed evergreen group annuity spread product even upon a discontinuance of the contract in which case the contract value would be paid no later than 90 days from the date the sponsor provides notice to discontinue. This contract's operation is different than many other evergreen group annuity products in the market by virtue of the fact that a market value (fair value) adjustment does not apply upon discontinuance.

Mutual funds: valued at net asset value (NAV) of shares held by the Plan at year-end.

Self-directed brokerage accounts: the brokerage accounts are comprised of common stocks, mutual funds and a partnership investment. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded. Mutual funds are valued at net asset value (NAV). Investments in partnerships are valued at appraised values at the end of the Plan year as reported by the partnerships' respective general partners and the trustee of the Plan.

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

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 table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009 and 2008. As required by FASB ASC No. 820, assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

December 31, 2009	Level 1	Level 2	Level 3	Total
Investments, at fair value:				
Guaranteed income fund	$ -	$ -	$ 10,777,902	$ 10,777,902
Pooled separate accounts				
Small cap growth funds	-	489,252	-	489,252
Mid cap growth funds	-	677,245	-	677,245
Large cap blend funds	-	724,951	-	724,951
Large cap value funds	-	508,177	-	508,177
IncomeFlex funds	-	734,053	-	734,053
Balanced - lifetime funds	-	1,804,955	-	1,804,955
Fixed income - domestic funds	-	322,288	-	322,288
Total pooled separate accounts	-	5,260,921	-	5,260,921
Mutual funds				
International large blend funds	550,815	-	-	550,815
Small cap blend funds	632,649	-	-	632,649
Mid cap value funds	416,781	-	-	416,781
Large cap value funds	455,431	-	-	455,431
Large cap growth funds	1,376,895	-	-	1,376,895
Balanced funds	521,862	-	-	521,862
Equity funds - energy	271,287	-	-	271,287
World stock funds	519,981			519,981
U.S. government and corporate bonds	17,921	-	-	17,921
Total mutual funds	4,763,622	-	-	4,763,622
Self-directed brokerage accounts				
Interest bearing cash	121,487	-	-	121,487
Mutual funds	137,956	-	-	137,956
Common stock	758,471	-	-	758,471
Partnership / joint venture interest	-	-	137,005	137,005
Total self-directed brokerage accounts	1,017,914	-	137,005	1,154,919
Participant loans	-	-	939,855	939,855
Total investments	$ 5,781,536	$ 5,260,921	$ 11,854,762	$ 22,897,219

December 31, 2008	Level 1	Level 2	Level 3	Total
Investments, at fair value:				
Guaranteed income fund	$ -	$ -	$ 12,249,574	$ 12,249,574
Pooled separate accounts	-	5,883,273	-	5,883,273
Mutual funds	1,744,232	-	-	1,744,232
Self-directed brokerage accounts	574,364	-	45,150	619,514
Participant loans	-	-	953,011	953,011
Total investments	$ 2,318,596	$ 5,883,273	$ 13,247,735	$ 21,449,604

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 investments.

For the year ended December 31, 2009	Guaranteed Income Fund	Self-directed Brokerage Accounts	Participant Loans
Balance, beginning of year	$ 12,249,574	$ 45,150	$ 953,011
Interest income	388,925	-	-
Purchases, sales, issuances and settlements - net	(1,860,597)	91,855	(13,156)
Balance, end of year	$ 10,777,902	$ 137,005	$ 939,855

5 Tax Status of the Plan

The Internal Revenue Service has determined and informed the Company by a letter dated August 31, 2006, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code. There have been no amendments to the Plan since receiving the determination letter.

6 Related-party Transactions

Certain plan investments are units of pooled separate accounts and interest in a guaranteed income fund managed by Prudential. Prudential is the plan trustee and custodian, and, therefore, these transactions qualify as party-in-interest. Fees paid from plan assets for the services provided by Prudential amounted to $15,941 for the year ended December 31, 2009.

7 Certified Financial Information (Unaudited)

The following unaudited information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified as complete and accurate by Prudential Bank & Trust, F.S.B. and Prudential Retirement Insurance and Annuity Company, collectively, the trustee and custodian of the Plan.

December 31	2009	2008
Investments, at fair value:		
Guaranteed income fund	**$ 10,777,902**	$ 12,249,574
Pooled separate accounts and mutual funds	**10,024,543**	7,627,505
Brokerage accounts	**1,154,919**	619,514
Participant loans	**939,855**	953,011
Total investments, at fair value	**$ 22,897,219**	$ 21,449,604

For the year ended December 31	2009
Net appreciation in fair value of investments	$ 2,493,447
Interest income	420,095
Dividends	44,139
Net investment income	$ 2,957,681

8 Investment Contract with Insurance Company

The Plan holds a benefit-responsive investment contract with Prudential Retirement Insurance and Annuity Company (Prudential Insurance). Prudential Insurance maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The contract is included in the financial statements at fair value, which approximates contract value, as reported to the Plan by Prudential Insurance. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk on the contract issuer or otherwise. The average yield and crediting interest rate was approximately 2.85% and 3.60% for 2009 and 2008, respectively. The crediting interest rate is based on a formula agreed upon with the issuer, but may not be less than 1.50%. Such interest rates are reviewed on a quarterly basis for resetting.

9 Reconciliation of Financial Statements to Form 5500

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

December 31	**2009**	**2008**
Net assets available for benefits per the financial statements	**$ 22,914,935**	$ 21,453,977
Less: participant contributions receivable	**(12,090)**	(3,030)
Less: employer contributions receivable	**(5,626)**	(1,343)
Total contributions receivable	**(17,716)**	(4,373)
Net assets available for benefits per the Form 5500	**$ 22,897,219**	$ 21,449,604

The following is a reconciliation of contributions per the financial statements to the Form 5500:

For the year ended December 31	**2009**
Employer contributions per the financial statements	$ 352,376
Add: employer contribution receivable at December 31, 2008	1,343
Less: employer contribution receivable at December 31, 2009	(5,626)
Employer contributions per the Form 5500	$ 348,093
Participant contributions per the financial statements	$ 800,763
Add: participant contribution receivable at December 31, 2008	3,030
Less: participant contribution receivable at December 31, 2009	(12,090)
Participant contributions per the Form 5500	$ 791,703

10 Subsequent Events

Plan management has evaluated all subsequent events through October 8, 2010 and determined that no subsequent events have occurred requiring adjustments to the financial statements or disclosures.

Schedule of assets (held at end of year)

As of December 31, 2009

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current value
*	Prudential Retirement Insurance & Annuity Company	GUARANTEED INCOME FUND	$ 10,777,902
*	Prudential Retirement Insurance & Annuity Company	MID CAP GROWTH/ARTISAN	677,245
*	Prudential Retirement Insurance & Annuity Company	SMALL CAP GROWTH/TIMESSQ	489,252
*	Prudential Retirement Insurance & Annuity Company	IFX LT INC & EQUITY FD (I)	192,807
*	Prudential Retirement Insurance & Annuity Company	IFX LT AGG GROWTH FD (I)	234,999
*	Prudential Retirement Insurance & Annuity Company	IFX LT GROWTH FD (I)	170,763
*	Prudential Retirement Insurance & Annuity Company	IFX LT BALANCED FUND (I)	76,073
*	Prudential Retirement Insurance & Annuity Company	IFX LT CONSERVATIVE FD (I)	59,411
*	Prudential Retirement Insurance & Annuity Company	AIM DIVERSIFIED DIVIDEND	508,177
*	Prudential Retirement Insurance & Annuity Company	LIFETIME AGGRESSIVE	262,754
*	Prudential Retirement Insurance & Annuity Company	LIFETIME GROWTH FD	250,194
*	Prudential Retirement Insurance & Annuity Company	LIFETIME BALANCED FD	951,230
*	Prudential Retirement Insurance & Annuity Company	LIFETIME CONSERVATIVE	319,995
*	Prudential Retirement Insurance & Annuity Company	LIFETIME INCOME & EQUITY	20,782
*	Prudential Retirement Insurance & Annuity Company	DRYDEN S&P 500 INDEX FUND	686,248
*	Prudential Retirement Insurance & Annuity Company	CORE BOND ENHAN INDEX	322,288
*	Prudential Retirement Insurance & Annuity Company	LARGE CAP BLEND/VICTORY	38,703
*	Prudential Mutual Funds	AMER: EUROPACIFIC GROW R3	550,815
*	Prudential Mutual Funds	GROWTH FUND OF AMERICA R3	1,058,676
*	Prudential Mutual Funds	CAP WORLD GROW & INCO R3	519,981
*	Prudential Mutual Funds	FID ADVISOR NEW INSIGHTS	318,219
*	Prudential Mutual Funds	AIM ENERGY A	271,287
*	Prudential Mutual Funds	JANUS BALANCED FD CL S	521,862
*	Prudential Mutual Funds	EATON VANCE LG CAP VAL A	455,431
*	Prudential Mutual Funds	VICTORY ESTABLISHED VALUE	416,781
*	Prudential Mutual Funds	DELAWARE INFL PROT BOND A	17,921
*	Prudential Mutual Funds	WELLS FARGO ADV SM CAP	632,649
	NATIONAL FINANCIAL	Interest Bearing Cash	121,487
	AMER INTL GROUP INC	Corporate Stock - Common	1,499
	ASSURED PHARMACY INC COM	Corporate Stock - Common	6
	BANK OF AMERICA CORP	Corporate Stock - Common	3,012
	CENTRAL FD CDA CL A ISIN #CA1535011011	Corporate Stock - Common	140,556

Schedule of assets (held at end of year) (cont'd)

As of December 31, 2009

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current value
	CHINA VOIP & DIGITAL TELECOM INC COM	Corporate Stock - Common	105
	CLEAN ENERGY FUELS CORP	Corporate Stock - Common	5,147
	COMPOSITE TECHNOLOGY CORP	Corporate Stock - Common	397
	COSINE COMMUNICATIONS INC	Corporate Stock - Common	38
	DC BRANDS INTL INC COM NEW	Corporate Stock - Common	130
	FAIRPOINT COMMUNICATIONS INC	Corporate Stock - Common	20
	FEDERAL NATL MTG ASSN	Corporate Stock - Common	590
	FORD MTR CO DEL COM	Corporate Stock - Common	11,750
	GLOBAL HIGH INCOME FUND INC	Corporate Stock - Common	170,100
	HECLA MINING CO	Corporate Stock - Common	43,260
	ISHARES TR FTSE XINHUA HK CHINA 25	Corporate Stock - Common	25,356
	LEHMAN BROS HLDGS CORP	Corporate Stock - Common	70
	LOWES COMPANIES	Corporate Stock - Common	22,642
	MACQUARIE INFRASTRUCTURE CO	Corporate Stock - Common	104,380
	MANITOWOC INC	Corporate Stock - Common	4,985
	MOTORS LIQ CO COM	Corporate Stock - Common	188
	NORTHERN OIL & GAS INC NEV	Corporate Stock - Common	5,920
	PEABODY ENERGY CORP	Corporate Stock - Common	49,731
	SILVER WHEATON CORP COM	Corporate Stock - Common	141,188
	SPDR SER TR S&P OIL & GAS EQUIP	Corporate Stock - Common	11,392
	WESTERN COPPER CORP COM	Corporate Stock - Common	10,716
	YADKIN VY FINL CORP COM	Corporate Stock - Common	1,830
	ZENN MOTOR COMPANY INC COM NPV	Corporate Stock - Common	3,463
	BERWYN INCOME FUND	Mutual Funds	27,074
	FIDELITY STRATEGIC INCOME	Mutual Funds	25,216
	FPA CRESCENT INSTL	Mutual Funds	25,609
	JANUS ORION FUND CLASS J SHARES	Mutual Funds	6,385
	MATTHEWS ASIAN GROWTH & INCOME FUND	Mutual Funds	24,933
	YACKTMAN FUND	Mutual Funds	28,739
	BUCKEYE PARTNERS L P UNIT LTD PARTNERSHIP	Part. / Joint Venture Interest	76,230
	TARGA RES PARTNERS LP COM UNIT LTD	Part. / Joint Venture Interest	60,775
*	PARTICIPANT LOANS	4.25% - 9.25%	939,855
			$ 22,897,219

* Indicates party-in-interest to the Plan

Note: Cost information (column d) has been excluded because all investments are participant-directed