# 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
TRUCK CENTERS, INC. NADART SALARY DEF 401K PLAN

**1b** Three-digit plan number (PN) ▶ 002

**1c** Effective date of plan 06/01/1986

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

2280 FORMOSA RD
TROY, IL 62294

**2b** Employer Identification Number (EIN) 37-0922808

**2c** Sponsor's telephone number 618-667-3454

**2d** Business code (see instructions) 441229

**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. | 10/12/2010 | ALAN B. SVEDLOW |
| | **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")
ALAN B. SVEDLOW, ADMINISTRATOR NADART

P.O. BOX 9200
MCLEAN, VA 22102

**3b** Administrator's EIN
31-1255362

**3c** Administrator's telephone number
800-462-3278

**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** | 442 |
| **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** | 363 |
| **b** | Retired or separated participants receiving benefits | **6b** | 18 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 33 |
| **d** | Subtotal. Add lines **6a**, **6b**, and **6c** | **6d** | 414 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits | **6e** | 1 |
| **f** | Total. Add lines **6d** and **6e** | **6f** | 415 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 318 |
| **h** | Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 5 |
| **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 3D 2K 2F 2G 2S 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)** | | 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)** | | 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)** | | **A** (Insurance Information) |
| **(4)** | X | **C** (Service Provider Information) |
| **(5)** | X | **D** (DFE/Participating Plan Information) |
| **(6)** | | **G** (Financial Transaction Schedules) |

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2009**<br>**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
TRUCK CENTERS, INC. NADART SALARY DEF 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
TRUCK CENTERS, INC.

**D** Employer Identification Number (EIN)
37-0922808

## 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).. . . . . ☐ 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

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

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

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

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

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

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

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

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

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

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

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

**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)

NADART

PO BOX 9200
MCLEAN, VA 22102

31-1255362

| (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 | RETIREMENT PLAN | 21688 | Yes [ ] No [X] | Yes [ ] No [X] | | Yes [ ] No [X] |

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

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

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

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

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

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

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

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

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

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

## Part I Service Provider Information (continued)

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

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

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

| **(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
TRUCK CENTERS, INC. NADART SALARY DEF 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
TRUCK CENTERS, INC.

**D** Employer Identification Number (EIN)
37-0922808

**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: NATIONAL AUTOMOBILE DEALERS ASSOCIA

**b** Name of sponsor of entity listed in (a): NATIONAL AUTOMOBILE DEALERS ASSOCIATION

| **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) |
|---|---|---|
| 56-2505985-001 | C | 7047611 |

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

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-462 | C | 357587 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT INCOME SL SE

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-563 | C | 303650 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2010 SECURIT

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-564 | C | 1041988 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2015 SL SERI

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-618 | C | 24750 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2020 SECURIT

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-560 | C | 24203 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2025 SL SERI

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-0025081-619 | C | 565973 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2030 SECURIT

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-561 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24044 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2035 SL SERI

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-620 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7043 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2040 SECURIT

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-562 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4385 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2045 SL SERI

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-621 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1429 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TARGET RETIREMENT 2050 SL SERI

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-659 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3569 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 SMALL CAP FUND

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-086 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 600814 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: S AND P 400 MID CAP FUND

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-079 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1304359 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: S AND P 500 LARGE CAP FUND

**b** Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

| **c** EIN-PN 04-0025081-085 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2436928 |
|---|---|---|

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

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

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

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

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

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

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

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Financial Information

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

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

OMB No. 1210-0110

**2009**

**This Form is Open to Public Inspection**

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

**A** Name of plan
TRUCK CENTERS, INC. NADART SALARY DEF 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
TRUCK CENTERS, INC.

**D** Employer Identification Number (EIN)
37-0922808

## 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) | 0 | 0 |
| **(2)** Participant contributions | 1b(2) | 0 | 0 |
| **(3)** Other | 1b(3) | | |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 0 | 0 |
| **(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) | 469385 | 586525 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 11729448 | 13748333 |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | | |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | | |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | | |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | 201838 | 364557 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|---|
| **1d** | Employer-related investments: | | | |
| | **(1)** Employer securities | 1d(1) | | |
| | **(2)** Employer real property | 1d(2) | | |
| **e** | Buildings and other property used in plan operation | 1e | | |
| **f** | Total assets (add all amounts in lines 1a through 1e) | 1f | 12400671 | 14699415 |
| | **Liabilities** | | | |
| **g** | Benefit claims payable | 1g | 30047 | 47141 |
| **h** | Operating payables | 1h | | |
| **i** | Acquisition indebtedness | 1i | | |
| **j** | Other liabilities | 1j | | |
| **k** | Total liabilities (add all amounts in lines 1g through1j) | 1k | 30047 | 47141 |
| | **Net Assets** | | | |
| **l** | Net assets (subtract line 1k from line 1f) | 1l | 12370624 | 14652274 |

## 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) | 0 | |
| | **(B)** Participants | 2a(1)(B) | 680674 | |
| | **(C)** Others (including rollovers) | 2a(1)(C) | 82208 | |
| | **(2)** Noncash contributions | 2a(2) | | |
| | **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 762882 |
| **b** | **Earnings on investments:** | | | |
| | **(1)** Interest: | | | |
| | **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 19900 | |
| | **(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) | 33473 | |
| | **(F)** Other | 2b(1)(F) | 0 | |
| | **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 53373 |
| | **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| | **(B)** Common stock | 2b(2)(B) | | |
| | **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | | |
| | **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 0 |
| | **(3)** Rents | 2b(3) | | |
| | **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | | |
| | **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | | |
| | **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 0 |

| | | | (a) Amount | (b) Total |
|---|---|---|---|---|
| 2b | (5) Unrealized appreciation (depreciation) of assets: (A) Real estate | 2b(5)(A) | | |
| | (B) Other | 2b(5)(B) | | |
| | (C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B) | 2b(5)(C) | | 0 |
| | (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | 2586984 |
| | (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | |
| | (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | |
| | (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| | (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | 94636 |
| c | Other income | 2c | | |
| d | Total income. Add all **income** amounts in column (b) and enter total | 2d | | 3497875 |
| | **Expenses** | | | |
| e | Benefit payment and payments to provide benefits: | | | |
| | (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 1147396 | |
| | (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) | | 1147396 |
| f | Corrective distributions (see instructions) | 2f | | 47141 |
| g | Certain deemed distributions of participant loans (see instructions) | 2g | | |
| h | Interest expense | 2h | | |
| i | Administrative expenses: (1) Professional fees | 2i(1) | | |
| | (2) Contract administrator fees | 2i(2) | | |
| | (3) Investment advisory and management fees | 2i(3) | | |
| | (4) Other | 2i(4) | 21688 | |
| | (5) Total administrative expenses. Add lines 2i(1) through (4) | 2i(5) | | 21688 |
| j | Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 1216225 |
| | **Net Income and Reconciliation** | | | |
| k | Net income (loss). Subtract line 2j from line 2d | 2k | | 2281650 |
| 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: LARSONALLEN LLP **(2)** EIN: 41-0746749

**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 | | 500000 |
| **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
TRUCK CENTERS, INC. NADART SALARY DEF 401K PLAN

**B** Three-digit plan number (PN) ▶ 002

**C** Plan sponsor's name as shown on line 2a of Form 5500
TRUCK CENTERS, INC.

**D** Employer Identification Number (EIN)
37-0922808

## 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): 51-0210613

**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** 42

## 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** 0

**b** Enter the amount contributed by the employer to the plan for this plan year ..... **6b** 0

**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** 0

**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):

# TRUCK CENTERS, INC. NADART
# SALARY DEFERRAL 401(K) PLAN

## FINANCIAL STATEMENTS AND
## SUPPLEMENTARY INFORMATION

## YEARS ENDED DECEMBER 31, 2009 AND 2008

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**TABLE OF CONTENTS**
**YEARS ENDED DECEMBER 31, 2009 AND 2008**


| | |
|---|---|
| **INDEPENDENT AUDITORS' REPORT** | **1** |
| **FINANCIAL STATEMENTS** | |
| **STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS** | **2** |
| **STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS** | **3** |
| **NOTES TO FINANCIAL STATEMENTS** | **4** |
| **SUPPLEMENTAL SCHEDULE (ATTACHMENT TO FORM 5500)** | |
| **SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)** | **12** |

LarsonAllen LLP

CPAs, Consultants & Advisors

www.larsonallen.com

## INDEPENDENT AUDITORS' REPORT

Plan Administrator
Truck Centers, Inc. NADART Salary Deferral 401(k) Plan
Troy, Illinois

We were engaged to audit the financial statements and supplemental schedule of Truck Centers, Inc. NADART Salary Deferral 401(k) Plan (the Plan) as of December 31, 2009 and 2008, and for the years then ended, 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 cited in Note 3, which was certified by Cardinal Bank, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and the supplemental schedule. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the trustee as of December 31, 2009 and 2008 and for the years then ended, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

LarsonAllen LLP

**LarsonAllen LLP**

St. Louis, Missouri
October 7, 2010



NEXIA INTERNATIONAL
An independent member of Nexia International

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2009 AND 2008**

| | 2009 | 2008 |
|---|---|---|
| **ASSETS** | | |
| **INVESTMENTS (at Fair Value)** | | |
| Mutual Funds | $ 364,557 | $ 201,838 |
| Collective Trust Funds | 13,748,333 | 11,729,448 |
| Participant Loans | 586,525 | 469,385 |
| Total Investments (at Fair Value) | 14,699,415 | 12,400,671 |
| **LIABILITIES** | | |
| **EXCESS CONTRIBUTIONS PAYABLE** | 47,141 | 30,047 |
| **NET ASSETS REFLECTING INVESTMENTS AT FAIR VALUE** | 14,652,274 | 12,370,624 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract | (31,056) | 128,920 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 14,621,218 | $ 12,499,544 |

*See accompanying Notes to Financial Statements.*

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEARS ENDED DECEMBER 31, 2009 AND 2008**

| | 2009 | 2008 |
|---|---|---|
| **ADDITIONS TO (DEDUCTIONS FROM) NET ASSETS AVAILABLE FOR BENEFITS ATTRIBUTED TO:** | | |
| **INVESTMENT INCOME (LOSS)** | | |
| Net Appreciation (Depreciation) in Fair Value of Investments | $ 2,521,644 | $ (4,684,298) |
| Interest | 33,473 | 38,441 |
| Dividends | 19,900 | 102,649 |
| Total Investment Income (Loss) | 2,575,017 | (4,543,208) |
| **CONTRIBUTIONS** | | |
| Employee Pre-Tax 401(k) Deferrals | 638,704 | 939,838 |
| Employee After-Tax | 41,970 | 84,459 |
| Employer Match | - | 342,179 |
| Employee Rollover | 82,208 | 295 |
| Total Contributions | 762,882 | 1,366,771 |
| **BENEFITS PAID TO PARTICIPANTS** | (1,147,396) | (555,175) |
| **CORRECTIVE CONTRIBUTION DISTRIBUTIONS** | (47,141) | (30,047) |
| **ADMINISTRATIVE EXPENSES** | (21,688) | (18,443) |
| **NET INCREASE (DECREASE)** | 2,121,674 | (3,780,102) |
| **NET ASSETS AVAILABLE FOR BENEFITS** | | |
| Beginning of Year | 12,499,544 | 16,279,646 |
| **END OF YEAR** | $ 14,621,218 | $ 12,499,544 |

*See accompanying Notes to Financial Statements.*

## NOTE 1 DESCRIPTION OF PLAN

The following description of Truck Centers, Inc. (the "Employer") NADART Salary Deferral 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

The National Automobile Dealers Association (NADA) represents nearly 20,000 new car and truck dealers, both import and domestic, with more than 43,000 separate franchises. NADA membership is open to any new-automobile or new-truck dealership holding a new automobile or truck sales and service franchise. NADA Retirement Administrators Inc. dba NADART, an affiliate of NADA, provides and administers 401(k), pension and profit sharing plans for NADA members, non-members, and their employees. NADART sponsors a Master Plan, consisting of the basic plan document and the adoption agreement, which outlines the rules and provisions of the retirement plan adopted by the Employer. Employers establish the Plan by executing an Adoption Agreement (Plan Agreement).

### General

The Plan is a defined contribution plan originally effective June 1, 1986. The Plan has been amended and restated throughout the years to comply with tax legislation and was last amended and restated effective January 1, 2010. The Plan is sponsored by Truck Centers, Inc. and covers employees who meet certain eligibility requirements. An employee is eligible to participate in the Plan upon attaining age 21 and the completion of one month of service. Employees may participate in the Plan on the first day of the following month upon meeting the eligibility requirements. The Plan excludes collective bargaining unit employees. It is subject to the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

### Contributions

The Plan includes a salary deferral arrangement allowed under Section 401(k) of the Internal Revenue Code. Eligible participants may elect to have a percentage of their compensation contributed as pre-tax 401(k) contributions to the Plan. Eligible participants may also elect to have a percentage of their compensation contributed as after-tax 401(k) contributions to the Plan. The Plan allows participants age 50 and older to make catch-up contributions. The Plan has an automatic enrollment feature that automatically withholds 3% as a pretax 401(k) deferral unless otherwise elected by the participant.

The Employer may, at its discretion, elect to make an Employer matching contribution or Employer non-elective contribution to the Plan. From January 1, 2008 through December 1, 2008, the Employer matching contribution was 100% of deferrals up to 2.5% of compensation up to a maximum of $3,000 per participant per Plan year. On December 1, 2008, the Employer matching contributions were ceased. There were no Employer non-elective contributions for the years ended December 31, 2009 and 2008.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of contributions into various investment options offered by the Plan. Contributions are subject to limitations.

## NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

### Participant Accounts

Each participant's account is credited with the participant's contribution, the Employer matching contribution, an allocation of the Employer's non-elective contribution, earnings or losses, and the participant's share of administrative expenses. Allocations are based on participant earnings or account balances as defined in the Plan. Income is allocated daily based on the number of shares in the participant's account. The benefit to which a participant is entitled is the benefit that can be provided by the participant's vested account.

### Vesting

Participants are immediately vested in their contributions, Employer contributions, and actual earnings thereon.

### Participant Loans

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50 percent of their vested account balance. Principal and interest is paid ratably through payroll deductions. Loan terms are up to five years, except for loans to fund the purchase of a principal residence, for which the loan may be repaid over a reasonable period that may exceed five years. Participants may have two loans outstanding at one time. The loans are secured by the balance in the participant's account and bear interest at the Prime interest rate plus 1%. At December 31, 2009, interest rates on outstanding loans ranged from 4.25% to 10.5%.

### Benefit Payments

Upon termination of service, death, disability, or retirement (early or normal), the participant will receive the value of the vested interest in his or her account in the form of a lump sum distribution, in installments, or, if qualified, as an annuity. The Plan allows for in-service distributions if a participant reaches age 59½ and has seven years of credited service and hardship distributions subject to Plan provisions. If a participant terminates employment and the participant's account balance does not exceed $1,000, the Plan administrator will authorize the benefit payment without the participant's consent. If a terminated participant's account balance is between $1,000 and $5,000, the Plan administrator may elect to roll the account balance into an individual retirement account in the participant's name.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### Basis of Accounting

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

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

### Basis of Accounting (Continued)

The Statements of Net Assets Available for Benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statements of Changes in Net Assets Available for Benefits are prepared on a contract value basis.

### Fair Value Measurements

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy 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 market 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. There have been no changes in the valuation methodologies used at December 31, 2009 and 2008.

During 2009, Financial Accounting Standards Board (FASB) released guidance that requires disclosures to include the nature of any restrictions on the ability to redeem certain investments at the measurement date, any unfunded commitments, and the investment strategies of the investees effective for fiscal years ending after December 15, 2009. See Note 4 for more information.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

### Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

### Investment Valuation and Income Recognition

The Plan's investments are valued 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. Investments in the mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year end. Investments in the collective trust funds are valued using the net asset value of units, which are based on observable market prices for the underlying assets, held by the Plan at year-end. Investment in participant loans are 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.

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. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

### Administrative Expenses

The Employer pays certain administrative expenses on behalf of the Plan.

### Benefit Payments

Benefit payments are recorded when paid.

### Subsequent Events

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through October 7, 2010, the date the financial statements were available to be issued.

## NOTE 3 CERTIFICATION OF INVESTMENT INFORMATION

Cardinal Bank, the trustee of the Plan, has supplied the Plan administrator with certifications as to the completeness and accuracy of all investment information reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, the schedule of assets (held at end of year) as of December 31, 2009, and the related investment activity reflected in the statements of changes in net assets available for benefits for the years ended December 31, 2009 and 2008. Subsequent to year-end, the Plan changed trustees from Cardinal Bank to Alerus Financial, N.A.

## NOTE 4 FAIR VALUE OF INVESTMENTS

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

| | 2009 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Assets: | | | | |
| Mutual Funds: | | | | |
| Large Cap Stocks Funds | $ 364,557 | $ - | $ - | $ 364,557 |
| Total Mutual Funds | 364,557 | - | - | 364,557 |
| Collective Trust Funds: | | | | |
| Income Funds | - | 2,258,717 | - | 2,258,717 |
| International Funds | - | 528,590 | - | 528,590 |
| Balanced Funds | - | 3,381,010 | - | 3,381,010 |
| Large Cap Funds | - | 2,920,189 | - | 2,920,189 |
| Mid Cap Funds | - | 1,635,344 | - | 1,635,344 |
| Small Cap Funds | - | 1,023,449 | - | 1,023,449 |
| Target Dated Funds | - | 2,001,034 | - | 2,001,034 |
| Total Collective Trust Funds | - | 13,748,333 | - | 13,748,333 |
| Participant Loans | - | - | 586,525 | 586,525 |
| Total Investments at Fair Value | $ 364,557 | $ 13,748,333 | $ 586,525 | $ 14,699,415 |

| | 2008 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Assets: | | | | |
| Mutual Funds | $ 201,838 | $ - | $ - | $ 201,838 |
| Collective Trust Funds | - | 11,729,448 | - | 11,729,448 |
| Participant Loans | - | - | 469,385 | 469,385 |
| Total Investments at Fair Value | $ 201,838 | $ 11,729,448 | $ 469,385 | $ 12,400,671 |

## NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

The following tables set forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31:

| | 2009 | 2008 |
|---|---|---|
| | Participant Loans | Participant Loans |
| Balance, Beginning of Year | $ 469,385 | $ 491,166 |
| Purchases, issuances and settlement, net | 117,140 | (21,781) |
| Balance, End of Year | $ 586,525 | $ 469,385 |

The following table sets forth additional disclosures for the fair value measurement of investments in certain entities that calculate net asset value per share (or its equivalent) as of December 31, 2009:

| Investment Type | Fair Value | Unfunded Commitments | Redemption Frequency | Redemption Notice Period |
|---|---|---|---|---|
| Collective Trust Funds: | | | | |
| Income Funds | $ 2,258,717 | $ - | Daily | None |
| International Funds | 528,590 | - | Daily | None |
| Balanced Funds | 3,381,010 | - | Daily | None |
| Large Cap Funds | 2,920,189 | - | Daily | None |
| Mid Cap Funds | 1,635,344 | - | Daily | None |
| Small Cap Funds | 1,023,449 | - | Daily | None |
| Target Dated Funds | 2,001,034 | - | Daily | None |

The Income Funds seek to preserve capital while providing prevailing interest rate returns.

The International Funds seek to provide investors a core value approach to investments with diversified exposure to the international equity markets, across capitalization and regions, with a focus on well-managed companies.

The Balanced Funds seek to provide for moderate growth and reinvestment of income.

The Large Cap Funds seek to provide investors with long-term growth of capital.

The Mid Cap Funds seek long-term growth of capital in a manner consistent with the preservation of capital.

The Small Cap Funds seek high levels of capital appreciation.

The Target Date Funds seek to allocate assets across multiple asset classes in a manner that becomes increasingly conservative over time, while seeking to achieve the appropriate level of risk given a participants' anticipated retirement date.

## NOTE 5 INVESTMENTS

The following investments represent 5% or more of the Plan's net assets available for benefits at December 31:

| Investments at Fair Value | 2009 | 2008 | |
|---|---|---|---|
| NADART Fund Separate Portfolio | $ 3,381,010 | $ 2,902,069 | |
| S&P 500 Large Cap Fund | 2,436,928 | 2,062,360 | |
| S&P 400 Mid Cap Fund | 1,304,359 | 936,576 | |
| Income Fund | 1,286,870 | 1,452,523 | |
| SSgA Target Retirement 2010 Securities Lending Series Fund | 1,041,988 | 963,702 | |
| PIMCO Total Return Fund | 814,455 | 616,086 | * |

* Investment did not exceed 5% of Plan's net assets available for benefits for the Plan year noted.

During 2009 and 2008, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) in mutual funds and collective trust funds appreciated (depreciated) as follows:

| | 2009 | 2008 |
|---|---|---|
| Mutual Funds | $ 94,636 | $ (176,275) |
| Collective Trust Funds | 2,427,008 | (4,508,023) |
| Total | $ 2,521,644 | $ (4,684,298) |

## NOTE 6 RISKS AND UNCERTAINTIES

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

## NOTE 7 PLAN TERMINATION

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

## NOTE 8 PLAN TAX STATUS

The Plan is placing reliance on an opinion letter dated March 31, 2008 received from the Internal Revenue Service on the prototype plan indicating that the Plan is qualified under Section 401 of the Internal Revenue Code (IRC) and is therefore not subject to tax under current income tax law. The Plan has been amended since receiving the opinion letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

## NOTE 9 PARTY-IN-INTEREST TRANSACTIONS

The investments are managed by Cardinal Bank, the trustee of the Plan. NADART is the third-party administrator for the Plan. Therefore, these transactions qualify as party-in-interest.

## NOTE 10 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:

| | 2009 | 2008 |
|---|---|---|
| Net Assets Available for Benefits per Financial Statements | $ 14,621,218 | $ 12,499,544 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract | 31,056 | (128,920) |
| Net Assets Available for Benefits per Form 5500 | $ 14,652,274 | $ 12,370,624 |

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

| | 2009 |
|---|---|
| Net Increase per Financial Statements | $ 2,121,674 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract - Prior Year | 128,920 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract - Current Year | 31,056 |
| Net Increase per Form 5500 | $ 2,281,650 |

The Form 5500 reflects the fully benefit-responsive investments at fair value whereas the financial statements reflect them at contract value.

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**E.I.N. 37-0922808 PLAN NO. 002**
**SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**DECEMBER 31, 2009**

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost Value ** | Current Value |
| | | Mutual Funds | | |
| | Longleaf | Longleaf Partners Fund | | $ 247,165 |
| | Vanguard | Vanguard Growth Index Fund | | 117,392 |
| | | Collective Trust Funds | | |
| * | NADART | International Investor's Fund Separate Portfolio | | 171,003 |
| * | NADART | Gabelli Small Cap Growth Fund Separate Portfolio | | 422,635 |
| * | NADART | Income Fund | | 1,286,870 |
| | State Street Global Advisors | International Fund | | 357,587 |
| * | NADART | Janus Adviser Mid-Cap Growth Fund Separate Portfolio | | 196,248 |
| * | NADART | Legg Mason Large Cap Separate Portfolio | | 140,450 |
| * | NADART | NADART Fund Separate Portfolio | | 3,381,010 |
| * | NADART | NADART Growth Trust Fund Separate Portfolio | | 81,628 |
| * | NADART | PIMCO All Asset Fund Separate Portfolio | | 157,392 |
| * | NADART | PIMCO Total Return Fund Separate Portfolio | | 814,455 |
| | State Street Global Advisors | Russell 2000 Small Cap Fund | | 600,814 |
| | State Street Global Advisors | S&P 400 Mid Cap Fund | | 1,304,359 |
| | State Street Global Advisors | S&P 500 Large Cap Fund | | 2,436,928 |
| | State Street Global Advisors | SSgA Retirement Income Strategy | | 303,650 |
| | State Street Global Advisors | SSgA Target Retirement 2010 Securities Lending Series Fund | | 1,041,988 |
| | State Street Global Advisors | SSgA Target Retirement 2015 Securities Lending Series Fund | | 24,750 |
| | State Street Global Advisors | SSgA Target Retirement 2020 Securities Lending Series Fund | | 24,203 |
| | State Street Global Advisors | SSgA Target Retirement 2025 Securities Lending Series Fund | | 565,973 |

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**E.I.N. 37-0922808 PLAN NO. 002**
**SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)**
**DECEMBER 31, 2009**

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost Value ** | Current Value |
| | State Street Global Advisors | SSgA Target Retirement 2030 Securities Lending Series Fund | | 24,044 |
| | State Street Global Advisors | SSgA Target Retirement 2035 Securities Lending Series Fund | | 7,043 |
| | State Street Global Advisors | SSgA Target Retirement 2040 Securities Lending Series Fund | | 4,385 |
| | State Street Global Advisors | SSgA Target Retirement 2045 Securities Lending Series Fund | | 1,429 |
| | State Street Global Advisors | SSgA Target Retirement 2050 Securities Lending Series Fund | | 3,569 |
| * | NADART | Turner Mid Cap Growth Fund Separate Portfolio | | 134,737 |
| * | NADART | T. Rowe Price Equity Income Fund Separate Portfolio | | 261,183 |
| * | Participants | Participant Loans<br>Rates from 4.25% to 10.5% | - | 586,525 |
| | | | | $ 14,699,415 |

** Indicates Party-in-Interest*
***Cost omitted for participant-directed accounts*

# Truck Centers, Inc.
# NADART Salary Deferral 401(k) Plan
# EIN 37-0922808 Plan ID 002
# Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
# 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 | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| * | International Investors Fund | Common / Collective Trust | N/R | $ 171,003 |
| * | Gabelli Small Cap Growth | Common / Collective Trust | N/R | 422,635 |
| * | Income Fund | Common / Collective Trust | N/R | 1,286,870 |
| | International Fund | Common / Collective Trust | N/R | 357,587 |
| * | Janus Enterprise | Common / Collective Trust | N/R | 196,248 |
| * | Legg Mason Growth Trust | Common / Collective Trust | N/R | 140,450 |
| * | NADART Fund | Common / Collective Trust | N/R | 3,381,010 |
| * | NADART Large Cap Growth Fund | Common / Collective Trust | N/R | 81,628 |
| * | PIMCO All Asset Fund | Common / Collective Trust | N/R | 157,392 |
| * | PIMCO Total Return Fund | Common / Collective Trust | N/R | 814,455 |
| | Russell 2000 Small Cap Fund | Common / Collective Trust | N/R | 600,814 |
| | S&P 400 Mid Cap Fund | Common / Collective Trust | N/R | 1,304,359 |
| | S&P 500 Large Cap Fund | Common / Collective Trust | N/R | 2,436,928 |
| | SSgA Retirement Income Strategy | Common / Collective Trust | N/R | 303,650 |
| | SSgA 2010 Strategy | Common / Collective Trust | N/R | 1,041,988 |
| | SSgA 2015 Strategy | Common / Collective Trust | N/R | 24,750 |
| | SSgA 2020 Strategy | Common / Collective Trust | N/R | 24,203 |
| | SSgA 2025 Strategy | Common / Collective Trust | N/R | 565,973 |
| | SSgA 2030 Strategy | Common / Collective Trust | N/R | 24,044 |
| | SSgA 2035 Strategy | Common / Collective Trust | N/R | 7,043 |
| | SSgA 2040 Strategy | Common / Collective Trust | N/R | 4,385 |
| | SSgA 2045 Strategy | Common / Collective Trust | N/R | 1,429 |
| | SSgA 2050 Strategy | Common / Collective Trust | N/R | 3,569 |
| * | Turner Mid Cap Growth | Common / Collective Trust | N/R | 134,737 |
| * | T. Rowe Price Equity Income | Common / Collective Trust | N/R | 261,183 |
| | Common / Collective Trust Total | | | 13,748,333 |
| | Longleaf Partners Fund | Mutual Fund | N/R | 247,165 |
| | Vanguard Growth Index Fund | Mutual Fund | N/R | 117,392 |
| | Mutual Fund Total | | | 364,557 |
| * | Participant Notes (All notes initiated at prime rate plus 1% with an interest rate range of 4.25% to 10.50%) | | - | 586,525 |
| | Total Investments | | | $ 14,699,415 |

* A party-in-interest as defined by ERISA

N/R Historical cost is not required to be presented for participant-directed investments

# TRUCK CENTERS, INC. NADART
# SALARY DEFERRAL 401(K) PLAN

## FINANCIAL STATEMENTS AND
## SUPPLEMENTARY INFORMATION

## YEARS ENDED DECEMBER 31, 2009 AND 2008

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**TABLE OF CONTENTS**
**YEARS ENDED DECEMBER 31, 2009 AND 2008**


| | |
|---|---|
| **INDEPENDENT AUDITORS' REPORT** | **1** |
| **FINANCIAL STATEMENTS** | |
| **STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS** | **2** |
| **STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS** | **3** |
| **NOTES TO FINANCIAL STATEMENTS** | **4** |
| **SUPPLEMENTAL SCHEDULE (ATTACHMENT TO FORM 5500)** | |
| **SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)** | **12** |

LarsonAllen LLP

CPAs, Consultants & Advisors

www.larsonallen.com

## INDEPENDENT AUDITORS' REPORT

Plan Administrator
Truck Centers, Inc. NADART Salary Deferral 401(k) Plan
Troy, Illinois

We were engaged to audit the financial statements and supplemental schedule of Truck Centers, Inc. NADART Salary Deferral 401(k) Plan (the Plan) as of December 31, 2009 and 2008, and for the years then ended, 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 cited in Note 3, which was certified by Cardinal Bank, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and the supplemental schedule. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained certifications from the trustee as of December 31, 2009 and 2008 and for the years then ended, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and supplemental schedule taken as a whole. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

LarsonAllen LLP

**LarsonAllen LLP**

St. Louis, Missouri
October 7, 2010



NEXIA INTERNATIONAL
An independent member of Nexia International

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**
**DECEMBER 31, 2009 AND 2008**

| | 2009 | 2008 |
|---|---|---|
| **ASSETS** | | |
| **INVESTMENTS (at Fair Value)** | | |
| Mutual Funds | $ 364,557 | $ 201,838 |
| Collective Trust Funds | 13,748,333 | 11,729,448 |
| Participant Loans | 586,525 | 469,385 |
| Total Investments (at Fair Value) | 14,699,415 | 12,400,671 |
| **LIABILITIES** | | |
| **EXCESS CONTRIBUTIONS PAYABLE** | 47,141 | 30,047 |
| **NET ASSETS REFLECTING INVESTMENTS AT FAIR VALUE** | 14,652,274 | 12,370,624 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract | (31,056) | 128,920 |
| **NET ASSETS AVAILABLE FOR BENEFITS** | $ 14,621,218 | $ 12,499,544 |

*See accompanying Notes to Financial Statements.*

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**
**YEARS ENDED DECEMBER 31, 2009 AND 2008**

| | 2009 | 2008 |
|---|---|---|
| **ADDITIONS TO (DEDUCTIONS FROM) NET ASSETS AVAILABLE FOR BENEFITS ATTRIBUTED TO:** | | |
| **INVESTMENT INCOME (LOSS)** | | |
| Net Appreciation (Depreciation) in Fair Value of Investments | $ 2,521,644 | $ (4,684,298) |
| Interest | 33,473 | 38,441 |
| Dividends | 19,900 | 102,649 |
| Total Investment Income (Loss) | 2,575,017 | (4,543,208) |
| **CONTRIBUTIONS** | | |
| Employee Pre-Tax 401(k) Deferrals | 638,704 | 939,838 |
| Employee After-Tax | 41,970 | 84,459 |
| Employer Match | - | 342,179 |
| Employee Rollover | 82,208 | 295 |
| Total Contributions | 762,882 | 1,366,771 |
| **BENEFITS PAID TO PARTICIPANTS** | (1,147,396) | (555,175) |
| **CORRECTIVE CONTRIBUTION DISTRIBUTIONS** | (47,141) | (30,047) |
| **ADMINISTRATIVE EXPENSES** | (21,688) | (18,443) |
| **NET INCREASE (DECREASE)** | 2,121,674 | (3,780,102) |
| **NET ASSETS AVAILABLE FOR BENEFITS** | | |
| Beginning of Year | 12,499,544 | 16,279,646 |
| **END OF YEAR** | $ 14,621,218 | $ 12,499,544 |

*See accompanying Notes to Financial Statements.*

## NOTE 1 DESCRIPTION OF PLAN

The following description of Truck Centers, Inc. (the "Employer") NADART Salary Deferral 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

The National Automobile Dealers Association (NADA) represents nearly 20,000 new car and truck dealers, both import and domestic, with more than 43,000 separate franchises. NADA membership is open to any new-automobile or new-truck dealership holding a new automobile or truck sales and service franchise. NADA Retirement Administrators Inc. dba NADART, an affiliate of NADA, provides and administers 401(k), pension and profit sharing plans for NADA members, non-members, and their employees. NADART sponsors a Master Plan, consisting of the basic plan document and the adoption agreement, which outlines the rules and provisions of the retirement plan adopted by the Employer. Employers establish the Plan by executing an Adoption Agreement (Plan Agreement).

### General

The Plan is a defined contribution plan originally effective June 1, 1986. The Plan has been amended and restated throughout the years to comply with tax legislation and was last amended and restated effective January 1, 2010. The Plan is sponsored by Truck Centers, Inc. and covers employees who meet certain eligibility requirements. An employee is eligible to participate in the Plan upon attaining age 21 and the completion of one month of service. Employees may participate in the Plan on the first day of the following month upon meeting the eligibility requirements. The Plan excludes collective bargaining unit employees. It is subject to the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

### Contributions

The Plan includes a salary deferral arrangement allowed under Section 401(k) of the Internal Revenue Code. Eligible participants may elect to have a percentage of their compensation contributed as pre-tax 401(k) contributions to the Plan. Eligible participants may also elect to have a percentage of their compensation contributed as after-tax 401(k) contributions to the Plan. The Plan allows participants age 50 and older to make catch-up contributions. The Plan has an automatic enrollment feature that automatically withholds 3% as a pretax 401(k) deferral unless otherwise elected by the participant.

The Employer may, at its discretion, elect to make an Employer matching contribution or Employer non-elective contribution to the Plan. From January 1, 2008 through December 1, 2008, the Employer matching contribution was 100% of deferrals up to 2.5% of compensation up to a maximum of $3,000 per participant per Plan year. On December 1, 2008, the Employer matching contributions were ceased. There were no Employer non-elective contributions for the years ended December 31, 2009 and 2008.

Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of contributions into various investment options offered by the Plan. Contributions are subject to limitations.

## NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

### Participant Accounts

Each participant's account is credited with the participant's contribution, the Employer matching contribution, an allocation of the Employer's non-elective contribution, earnings or losses, and the participant's share of administrative expenses. Allocations are based on participant earnings or account balances as defined in the Plan. Income is allocated daily based on the number of shares in the participant's account. The benefit to which a participant is entitled is the benefit that can be provided by the participant's vested account.

### Vesting

Participants are immediately vested in their contributions, Employer contributions, and actual earnings thereon.

### Participant Loans

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50 percent of their vested account balance. Principal and interest is paid ratably through payroll deductions. Loan terms are up to five years, except for loans to fund the purchase of a principal residence, for which the loan may be repaid over a reasonable period that may exceed five years. Participants may have two loans outstanding at one time. The loans are secured by the balance in the participant's account and bear interest at the Prime interest rate plus 1%. At December 31, 2009, interest rates on outstanding loans ranged from 4.25% to 10.5%.

### Benefit Payments

Upon termination of service, death, disability, or retirement (early or normal), the participant will receive the value of the vested interest in his or her account in the form of a lump sum distribution, in installments, or, if qualified, as an annuity. The Plan allows for in-service distributions if a participant reaches age 59½ and has seven years of credited service and hardship distributions subject to Plan provisions. If a participant terminates employment and the participant's account balance does not exceed $1,000, the Plan administrator will authorize the benefit payment without the participant's consent. If a terminated participant's account balance is between $1,000 and $5,000, the Plan administrator may elect to roll the account balance into an individual retirement account in the participant's name.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### Basis of Accounting

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

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

### Basis of Accounting (Continued)

The Statements of Net Assets Available for Benefits present the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statements of Changes in Net Assets Available for Benefits are prepared on a contract value basis.

### Fair Value Measurements

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy 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 market 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. There have been no changes in the valuation methodologies used at December 31, 2009 and 2008.

During 2009, Financial Accounting Standards Board (FASB) released guidance that requires disclosures to include the nature of any restrictions on the ability to redeem certain investments at the measurement date, any unfunded commitments, and the investment strategies of the investees effective for fiscal years ending after December 15, 2009. See Note 4 for more information.

## NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

### Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

### Investment Valuation and Income Recognition

The Plan's investments are valued 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. Investments in the mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year end. Investments in the collective trust funds are valued using the net asset value of units, which are based on observable market prices for the underlying assets, held by the Plan at year-end. Investment in participant loans are 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.

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. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

### Administrative Expenses

The Employer pays certain administrative expenses on behalf of the Plan.

### Benefit Payments

Benefit payments are recorded when paid.

### Subsequent Events

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through October 7, 2010, the date the financial statements were available to be issued.

## NOTE 3 CERTIFICATION OF INVESTMENT INFORMATION

Cardinal Bank, the trustee of the Plan, has supplied the Plan administrator with certifications as to the completeness and accuracy of all investment information reflected on the accompanying statements of net assets available for benefits as of December 31, 2009 and 2008, the schedule of assets (held at end of year) as of December 31, 2009, and the related investment activity reflected in the statements of changes in net assets available for benefits for the years ended December 31, 2009 and 2008. Subsequent to year-end, the Plan changed trustees from Cardinal Bank to Alerus Financial, N.A.

## NOTE 4 FAIR VALUE OF INVESTMENTS

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

| | 2009 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Assets: | | | | |
| Mutual Funds: | | | | |
| Large Cap Stocks Funds | $ 364,557 | $ - | $ - | $ 364,557 |
| Total Mutual Funds | 364,557 | - | - | 364,557 |
| Collective Trust Funds: | | | | |
| Income Funds | - | 2,258,717 | - | 2,258,717 |
| International Funds | - | 528,590 | - | 528,590 |
| Balanced Funds | - | 3,381,010 | - | 3,381,010 |
| Large Cap Funds | - | 2,920,189 | - | 2,920,189 |
| Mid Cap Funds | - | 1,635,344 | - | 1,635,344 |
| Small Cap Funds | - | 1,023,449 | - | 1,023,449 |
| Target Dated Funds | - | 2,001,034 | - | 2,001,034 |
| Total Collective Trust Funds | - | 13,748,333 | - | 13,748,333 |
| Participant Loans | - | - | 586,525 | 586,525 |
| Total Investments at Fair Value | $ 364,557 | $ 13,748,333 | $ 586,525 | $ 14,699,415 |

| | 2008 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Assets: | | | | |
| Mutual Funds | $ 201,838 | $ - | $ - | $ 201,838 |
| Collective Trust Funds | - | 11,729,448 | - | 11,729,448 |
| Participant Loans | - | - | 469,385 | 469,385 |
| Total Investments at Fair Value | $ 201,838 | $ 11,729,448 | $ 469,385 | $ 12,400,671 |

## NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

The following tables set forth a summary of changes in the fair value of the Plan's level 3 assets for the years ended December 31:

| | 2009 | 2008 |
|---|---|---|
| | Participant Loans | Participant Loans |
| Balance, Beginning of Year | $ 469,385 | $ 491,166 |
| Purchases, issuances and settlement, net | 117,140 | (21,781) |
| Balance, End of Year | $ 586,525 | $ 469,385 |

The following table sets forth additional disclosures for the fair value measurement of investments in certain entities that calculate net asset value per share (or its equivalent) as of December 31, 2009:

| Investment Type | Fair Value | Unfunded Commitments | Redemption Frequency | Redemption Notice Period |
|---|---|---|---|---|
| Collective Trust Funds: | | | | |
| Income Funds | $ 2,258,717 | $ - | Daily | None |
| International Funds | 528,590 | - | Daily | None |
| Balanced Funds | 3,381,010 | - | Daily | None |
| Large Cap Funds | 2,920,189 | - | Daily | None |
| Mid Cap Funds | 1,635,344 | - | Daily | None |
| Small Cap Funds | 1,023,449 | - | Daily | None |
| Target Dated Funds | 2,001,034 | - | Daily | None |

The Income Funds seek to preserve capital while providing prevailing interest rate returns.

The International Funds seek to provide investors a core value approach to investments with diversified exposure to the international equity markets, across capitalization and regions, with a focus on well-managed companies.

The Balanced Funds seek to provide for moderate growth and reinvestment of income.

The Large Cap Funds seek to provide investors with long-term growth of capital.

The Mid Cap Funds seek long-term growth of capital in a manner consistent with the preservation of capital.

The Small Cap Funds seek high levels of capital appreciation.

The Target Date Funds seek to allocate assets across multiple asset classes in a manner that becomes increasingly conservative over time, while seeking to achieve the appropriate level of risk given a participants' anticipated retirement date.

## NOTE 5 INVESTMENTS

The following investments represent 5% or more of the Plan's net assets available for benefits at December 31:

| Investments at Fair Value | 2009 | 2008 | |
|---|---|---|---|
| NADART Fund Separate Portfolio | $ 3,381,010 | $ 2,902,069 | |
| S&P 500 Large Cap Fund | 2,436,928 | 2,062,360 | |
| S&P 400 Mid Cap Fund | 1,304,359 | 936,576 | |
| Income Fund | 1,286,870 | 1,452,523 | |
| SSgA Target Retirement 2010 Securities Lending Series Fund | 1,041,988 | 963,702 | |
| PIMCO Total Return Fund | 814,455 | 616,086 | * |

* Investment did not exceed 5% of Plan's net assets available for benefits for the Plan year noted.

During 2009 and 2008, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) in mutual funds and collective trust funds appreciated (depreciated) as follows:

| | 2009 | 2008 |
|---|---|---|
| Mutual Funds | $ 94,636 | $ (176,275) |
| Collective Trust Funds | 2,427,008 | (4,508,023) |
| Total | $ 2,521,644 | $ (4,684,298) |

## NOTE 6 RISKS AND UNCERTAINTIES

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

## NOTE 7 PLAN TERMINATION

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

## NOTE 8 PLAN TAX STATUS

The Plan is placing reliance on an opinion letter dated March 31, 2008 received from the Internal Revenue Service on the prototype plan indicating that the Plan is qualified under Section 401 of the Internal Revenue Code (IRC) and is therefore not subject to tax under current income tax law. The Plan has been amended since receiving the opinion letter. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

## NOTE 9 PARTY-IN-INTEREST TRANSACTIONS

The investments are managed by Cardinal Bank, the trustee of the Plan. NADART is the third-party administrator for the Plan. Therefore, these transactions qualify as party-in-interest.

## NOTE 10 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:

| | 2009 | 2008 |
|---|---|---|
| Net Assets Available for Benefits per Financial Statements | $ 14,621,218 | $ 12,499,544 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract | 31,056 | (128,920) |
| Net Assets Available for Benefits per Form 5500 | $ 14,652,274 | $ 12,370,624 |

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

| | 2009 |
|---|---|
| Net Increase per Financial Statements | $ 2,121,674 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract - Prior Year | 128,920 |
| Adjustment From Fair Value to Contract Value For Fully Beneft-Responsive Investment Contract - Current Year | 31,056 |
| Net Increase per Form 5500 | $ 2,281,650 |

The Form 5500 reflects the fully benefit-responsive investments at fair value whereas the financial statements reflect them at contract value.

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**E.I.N. 37-0922808 PLAN NO. 002**
**SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)**
**DECEMBER 31, 2009**

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost Value ** | Current Value |
| | | Mutual Funds | | |
| | Longleaf | Longleaf Partners Fund | | $ 247,165 |
| | Vanguard | Vanguard Growth Index Fund | | 117,392 |
| | | Collective Trust Funds | | |
| * | NADART | International Investor's Fund Separate Portfolio | | 171,003 |
| * | NADART | Gabelli Small Cap Growth Fund Separate Portfolio | | 422,635 |
| * | NADART | Income Fund | | 1,286,870 |
| | State Street Global Advisors | International Fund | | 357,587 |
| * | NADART | Janus Adviser Mid-Cap Growth Fund Separate Portfolio | | 196,248 |
| * | NADART | Legg Mason Large Cap Separate Portfolio | | 140,450 |
| * | NADART | NADART Fund Separate Portfolio | | 3,381,010 |
| * | NADART | NADART Growth Trust Fund Separate Portfolio | | 81,628 |
| * | NADART | PIMCO All Asset Fund Separate Portfolio | | 157,392 |
| * | NADART | PIMCO Total Return Fund Separate Portfolio | | 814,455 |
| | State Street Global Advisors | Russell 2000 Small Cap Fund | | 600,814 |
| | State Street Global Advisors | S&P 400 Mid Cap Fund | | 1,304,359 |
| | State Street Global Advisors | S&P 500 Large Cap Fund | | 2,436,928 |
| | State Street Global Advisors | SSgA Retirement Income Strategy | | 303,650 |
| | State Street Global Advisors | SSgA Target Retirement 2010 Securities Lending Series Fund | | 1,041,988 |
| | State Street Global Advisors | SSgA Target Retirement 2015 Securities Lending Series Fund | | 24,750 |
| | State Street Global Advisors | SSgA Target Retirement 2020 Securities Lending Series Fund | | 24,203 |
| | State Street Global Advisors | SSgA Target Retirement 2025 Securities Lending Series Fund | | 565,973 |

**TRUCK CENTERS, INC. NADART SALARY DEFERRAL 401(K) PLAN**
**E.I.N. 37-0922808 PLAN NO. 002**
**SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)**
**DECEMBER 31, 2009**

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment | Cost Value ** | Current Value |
| | State Street Global Advisors | SSgA Target Retirement 2030 Securities Lending Series Fund | | 24,044 |
| | State Street Global Advisors | SSgA Target Retirement 2035 Securities Lending Series Fund | | 7,043 |
| | State Street Global Advisors | SSgA Target Retirement 2040 Securities Lending Series Fund | | 4,385 |
| | State Street Global Advisors | SSgA Target Retirement 2045 Securities Lending Series Fund | | 1,429 |
| | State Street Global Advisors | SSgA Target Retirement 2050 Securities Lending Series Fund | | 3,569 |
| * | NADART | Turner Mid Cap Growth Fund Separate Portfolio | | 134,737 |
| * | NADART | T. Rowe Price Equity Income Fund Separate Portfolio | | 261,183 |
| * | Participants | Participant Loans<br>Rates from 4.25% to 10.5% | - | 586,525 |
| | | | | $ 14,699,415 |

** Indicates Party-in-Interest*
***Cost omitted for participant-directed accounts*