Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**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;
- [X] 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
NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/1956

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

720 PETE ROSE WAY
CINCINNATI, OH 45202

720 PETE ROSE WAY
CINCINNATI, OH 45202

2b Employer Identification Number (EIN) 41-2245403

2c Sponsor's telephone number 513-287-1828

2d Business code (see instructions) 541800

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.	10/14/2010	STEPHANIE KIRSCHNER
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") NORTHLICH, LLC 720 PETE ROSE WAY CINCINNATI, OH 45202	**3b** Administrator's EIN 41-2245403 **3c** Administrator's telephone number 513-287-1828

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:		**4b** EIN
a Sponsor's name		**4c** PN

5 Total number of participants at the beginning of the plan year	**5**	218
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**	75
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	143
d Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	218
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	2
f Total. Add lines **6d** and **6e**	**6f**	220
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	195
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	17
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2F 2G 2J 2K 2T 3D

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

9a Plan funding arrangement (check all that apply)			**9b** Plan benefit arrangement (check all that apply)		
(1)	☐	Insurance	**(1)**	☐	Insurance
(2)	☐	Code section 412(e)(3) insurance contracts	**(2)**	☐	Code section 412(e)(3) insurance contracts
(3)	X	Trust	**(3)**	X	Trust
(4)	☐	General assets of the sponsor	**(4)**	☐	General assets of the sponsor

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

a Pension Schedules			**b General Schedules**		
(1)	X	**R** (Retirement Plan Information)	**(1)**	X	**H** (Financial Information)
(2)	☐	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	**(2)**	☐	**I** (Financial Information – Small Plan)
			(3)	☐	___ **A** (Insurance Information)
			(4)	X	**C** (Service Provider Information)
(3)	☐	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	**(5)**	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 Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).	2009
Department of Labor Employee Benefits Security Administration	▶ **File as an attachment to Form 5500.**	**This Form is Open to Public Inspection.**
Pension Benefit Guaranty Corporation		

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

A Name of plan
NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
41-2245403

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 65 37 60	RECORDKEEPER	15576	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ABF LG CAP VAL INV - STATE STREET B 04-1867445	0.35%

(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)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection.**

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

A Name of plan
NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
41-2245403

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: FID MGD INC PORT

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3022712-024	C	232562

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

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b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

a Plan name

b Name of plan sponsor

c EIN-PN

SCHEDULE H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2009** **This Form is Open to Public Inspection**

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

A Name of plan
NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
41-2245403

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	207362	224515
(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)	98566	33832
(9) Value of interest in common/collective trusts	1c(9)	230863	232562
(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)	4964781	4045573
(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	5501572	4536482
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	5501572	4536482

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)	21669	
(B) Participants	2a(1)(B)	250844	
(C) Others (including rollovers)	2a(1)(C)	1361	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		273874
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	629	
(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)	3136	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3765
(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)	105128	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		105128
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		12075
(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)		797230
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		1192072

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2137916	
(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)		2137916
f Corrective distributions (see instructions)	2f		641
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)	18605	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		18605
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2157162

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		-965090
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)** ☒ Disclaimer **(4)** ☐ Adverse

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

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

(1) Name: BARNES DENNIG & COMPANY, LTD **(2)** EIN: 31-1119890

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)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 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.**	**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
NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
41-2245403

Part I Distributions

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

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

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

EIN(s): 04-6568107 _____

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

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

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

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

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

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

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

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

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

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

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):

Northlich, LLC Profit Sharing and 401(k) Plan

Financial Statements
Years Ended December 31, 2009 and 2008
With Report of Independent Certified Public Accountants

BARNES DENNIG
Accounting • Tax • Business Insight

Report of Independent Certified Public Accountants

To the Plan Administrator of the
Northlich, LLC Profit Sharing and 401(k) Plan
Cincinnati, Ohio

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of Northlich, LLC Profit Sharing and 401(k) Plan as of December 31, 2009 and 2008, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2009, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) at December 31, 2009, and Schedule H, Line 4a – Schedule of Delinquent Participant Contributions at December 31, 2009. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8, of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 8, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the 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.

Barnes Dennig & Co. Ltd.

Cincinnati, Ohio
September 16, 2010

150 East Fourth Street | Cincinnati, OH 45202 | Tel 513.241.8313 | Fax 513.241.8303
www.barnesdennig.com Member, PKF International

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Statements of Net Assets Available for Benefits
At December 31, 2009 and 2008

	2009	2008
Investments at fair value (unless noted):		
Mutual funds	$ 4,045,573	$ 4,964,781
Fidelity retirement money market portfolio	224,515	207,362
Interest in common collective trusts	232,562	230,863
Participant loans at carrying value	33,832	98,566
Total investments	4,536,482	5,501,572
Receivables:		
Employer contribution receivable	-	21,149
Total receivables	-	21,149
Net assets available for benefits at fair value	4,536,482	5,522,721
Adjustment from fair value to contract value for fully benefit-responsive investment contract	4,324	12,453
Net assets available for benefits	$ 4,540,806	$ 5,535,174

The accompanying notes are an integral part of these financial statements

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2009

Additions:	
Investment income:	
Net appreciation in fair value of investments	$ 797,228
Interest and dividend income	112,841
Total investment income	910,069
Contributions	
Employee	250,844
Other	520
Rollover	1,361
Total contributions	252,725
Total additions	1,162,794
Deductions:	
Benefit payments to participants	2,138,557
Administrative fees	18,605
Total deductions	2,157,162
Net decrease	(994,368)
Net assets available for benefits:	
Beginning of year	5,535,174
End of year	$ 4,540,806

The accompanying notes are an integral part of these financial statements

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Notes to Financial Statements

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

The accompanying financial statements of the Northlich, LLC Profit Sharing and 401(k) Plan (the Plan) have been prepared on the accrual basis.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment in the collective trust as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation

Investments are reported at fair value. Quoted market prices are used to value investments. Shares of mutual funds are valued at the net asset value of shares held by the Plan at year end and are stated at fair value as determined by quoted market prices.

Investment transactions are accounted for on the trade date (the date the order to buy or sell is executed). The cost of investments sold is computed on an average cost basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

Related-Party Transactions

Certain Plan investments are investments in mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the asset custodian and trustee as defined by the Plan and therefore, these transactions qualify as party-in-interest.

Several employees of the Northlich, LLC (the Company) provide administrative services to the Plan. These services include Plan oversight and day-to-day Plan administration. The Plan is not charged by the Plan Sponsor for the services of the employees to the Plan.

Estimates

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

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Benefit Payments

Benefit payments are recorded when paid.

Subsequent Events

The Company has evaluated subsequent events through September 16, 2010, which is the date these financial statements were available to be issued, and have determined that there are no subsequent events that require disclosure under applicable GAAP for subsequent events.

NOTE 2 DESCRIPTION OF THE PLAN

The following description of the Plan provides only general information. Participants should refer to the Summary Plan Description for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan. All employees of the Company who are 21 years of age and have completed one year of service are eligible to participate in the Plan. Employees do not have to complete any service requirements to become eligible for deferral contributions. Effective January 1, 2008, employees may enter the Plan immediately upon meeting the eligibility requirements. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA).

Effective January 2008, the Company changed ownership and the Plan changed its name from Northlich, Inc. Profit Sharing and 401(k) Plan to Northlich, LLC Profit Sharing and 401(k) Plan.

Contributions

The Plan allows for the Company to make discretionary employer matching contributions throughout the Plan year and a discretionary profit sharing contribution at the end of each Plan year. Participants must complete at least one year of service in order to participate in the matching and profit sharing contribution parts of the Plan. For the year ending December 31, 2009, the Company did not make any contributions. A participant may contribute up to 60% of eligible compensation. However, contributions may not exceed limitations established under Section 402(g) of the Internal Revenue Code of 1986 as amended ($16,500 at December 31, 2009). For 2009, Section 414(v) of the Internal Revenue Code of 1986 as amended allowed a maximum catch-up contribution of $5,500. The participants designate the percentage of their total contribution to be invested in any of the Plan's investment funds. Participants may change the percentage of contributions invested in each account and may make transfers between accounts anytime during the year. A participant may change the amount of his or her elective deferred contributions as of the beginning of each payroll period.

Rollover Contributions

Participants may roll over the taxable portion of funds previously held in their account in another employee benefit plan to the Plan on a tax-free basis.

NOTE 2 DESCRIPTION OF THE PLAN (CONTINUED)

Participant Accounts

Each participant's account is credited with the participant's and Company's contributions and a pro-rata allocation of the Plan's earnings. The pro-rata allocation is based upon the proportion of individual account balances to total participants' account balances in the respective investment funds. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Vesting

Participants become immediately vested in their contributions plus actual earnings thereon at the time of participation in the Plan. Vesting in the Company's matching and profit sharing contribution portion of their accounts, plus actual earnings thereon, is based on years of service. Participants become partially vested after one year with 100% vesting being attained after five years. Non-vested portions of participant accounts that are forfeited upon payment of benefits are retained in the Plan and used to reduce future employer contributions or pay Plan expenses. During 2009, the Company paid $18,163 in plan expenses with forfeiture funds. The balance of unallocated forfeitures was $23,860 and $25,408 as of December 31, 2009 and 2008, respectively.

Payment of Benefits

Upon a participant's retirement, death, total and permanent disability, other termination of employment with the Company or termination of the Plan, the participant's account is distributed in the form of a lump sum payment or installment payments. If the vested interest is $1,000 or less, the payment will be in the form of a lump sum payment, payable as soon as administratively feasible.

Upon termination of the Plan, the assets will be distributed to participants in accordance with the Plan's provisions and existing laws and regulations.

In-service distributions are permissible from the Plan for participants that have obtained the age of 59 1/2. Participants electing in-service distributions may elect to receive all or a portion of their vested benefits in a lump sum payment or annual installments.

In conditions of "financial hardship", a participant may apply to the Plan administrator for approval to withdraw that portion of their elective deferrals necessary to meet the financial hardship, subject to the limitations of the Plan and the Internal Revenue Code.

Loans

Participant loans are available based on amounts in the participant's account. Participants may have one loan outstanding at any time and may be taken for any purpose. The minimum loan is $1,000; the maximum loan amount is the lesser of one-half of the vested account balance or $50,000 reduced by the highest outstanding loan balance in the account during the prior twelve-month period. The vested participant account balance is used as collateral for the loan. All loans bear a reasonable rate of interest as determined by the Plan administrator. All loans are required to be repaid in equal installments at least on a quarterly basis and within a five-year period unless it is for the purchase of a principal residence. Then the loan may be repaid over a ten-year period.

NOTE 2 DESCRIPTION OF THE PLAN (CONTINUED)

Administrative Expenses

Certain Plan expenses are paid by the Company.

NOTE 3 BENEFIT-RESPONSIVE INVESTMENT

The Plan's investment in the Fidelity Managed Income Portfolio Fund is a benefit-responsive investment with Fidelity Management Trust Company. Fidelity maintains the contributions in a general account, which is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The investment is included in the financial statement at contract value as reported to the Plan by Fidelity. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The existence of certain conditions can limit the fund's ability to transact at contract value with the issuers of its investment contracts. Specifically, any event outside the normal operation of the trust which causes a withdrawal from an investment contract may result in a negative market value adjustment with respect to such withdrawal. Examples of such events include, but are not limited to, partial or complete legal termination of the trust, tax disqualification of the trust, and transfers of assets from the fund directly to a competing investment option. As of December 31, 2009, the occurrence of an event outside the normal operation of the fund which would cause a withdrawal from an investment contract is not considered to be probable.

In addition to the limitations noted above, issuers of investment contracts have certain rights to terminate a contract and settle at an amount which differs from contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate was approximately 1.2% and 3.0% at December 31, 2009 and 2008, respectively. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on a monthly basis for resetting and will not fall below zero percent. The average yield for the years ended December 31, 2009 and 2008 was approximately 1.6% and 4.6%, respectively. The crediting rate, and hence a portfolio's return, may be affected by many factors, including purchases and redemptions by unitholders. The impact depends on whether the market value of the underlying assets is higher or lower than the contract value of those assets. If the market value of underlying assets is higher than their contract value, the crediting rate will ordinarily be higher than the yield of the underlying assets. Under these circumstances, cash from new investors will tend to lower the crediting rate and a portfolio's return, and redemptions by existing shareholders will tend to increase the crediting rate and a portfolio's return.

NOTE 4 INVESTMENTS

The following investments represent five percent or more of the Plan's net assets available for benefits as of December 31, 2009 and 2008:

	2009	2008
Fidelity Fund	$ 443,914	$ 329,019
Fidelity Diversified International Fund	360,753	325,825
Fidelity Freedom Income Fund	*	1,336,865
Fidelity Freedom 2010 Fund	274,152	478,695
Fidelity Freedom 2020 Fund	717,445	554,211
Fidelity Freedom 2030 Fund	344,415	288,278
Spartan U.S. Equity Index Fund	643,866	580,989
Fidelity Managed Income Portfolio	236,886	*
Fidelity U.S. Bond Index Fund	292,751	*

* Fund was not 5% of total assets during the year.

During 2009, the Plan's mutual funds appreciated by $797,228.

NOTE 5 FAIR VALUE MEASUREMENTS

The financial statements have been prepared in accordance with applicable GAAP for fair value measurements and disclosures, effective for fiscal years beginning after November 15, 2007 for financial assets and liabilities. Under the applicable GAAP literature, fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date.

In determining fair value, the Plan uses various valuation approaches. The applicable GAAP literature establishes a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are inputs that market participants would use in pricing the asset or liability developed based on market data obtained from sources independent of the Plan. Unobservable inputs are inputs that reflect the Plan's assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available in the circumstances. The hierarchy is broken down into three levels based on the ability to observe inputs 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.

NOTE 5 FAIR VALUE MEASUREMENTS (CONTINUED)

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in methodologies used at December 31, 2009 and 2008.

Mutual Funds: Valued at the net asset value ('NAV") of shares held by the Plan at year end.

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

Money Market Funds: Valued at the net asset value ('NAV") of shares held by the Plan at year end.

Common Collective Trusts: Valued at fair value of the collective trust's underlying investments based on information reported by the investment advisor using the audited financial statements of the collective trust at year-end.

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

The following table sets 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
Mutual funds	$ 4,045,573	$ -	$ -	$ 4,045,573
Money market funds	-	224,515	-	224,515
Common collective trusts	-	232,562	-	232,562
Participant loans	-	-	33,832	33,832
Total assets at fair value	$ 4,045,573	$ 457,077	$ 33,832	$ 4,536,482

NOTE 5 FAIR VALUE MEASUREMENTS (CONTINUED)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2008:

	Level 1	Level 2	Level 3	Total
Mutual funds	$ 4,964,781	$ -	$ -	$ 4,964,781
Money market funds	207,362	-	-	207,362
Common collective trusts	-	230,863	-	230,863
Participant loans	-	-	98,566	98,566
Total assets at fair value	$ 5,172,143	$ 230,863	$ 98,566	$ 5,501,572

The following is a summary of changes in the fair value of the Plan's level 3 assets for year ended December 31, 2009:

	Participant Loans
Balance, beginning of year	$ 98,566
Interest income	3,136
Unrealized gains (losses) relating to instruments still held at the reporting date	-
Purchases, sales, issuances and settlements (net)	(67,870)
Balance, end of year	$ 33,832

NOTE 6 PARTIAL TERMINATION OF PLAN

Subsequent to the Plan year ended December 31, 2008, the Company determined that a partial termination of the Plan had occurred affecting several Plan participants involuntarily terminated during the Plan year ended December 31, 2008. The result of the partial termination was that all affected participants became fully vested in their account balances. Certain affected participants received distributions during the Plan year and forfeited their unvested portion. As a result, approximately $2,500 was repaid to the participants accounts out of the Plan's forfeiture account during 2009.

NOTE 7 TAX STATUS

The Company has adopted a prototype plan which has received an opinion letter from the Internal Revenue Service dated March 31, 2008, which states the provider's prototype, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). The Plan itself has not received a determination letter from the IRS. The Plan has been amended since adoption of the prototype plan. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code, therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 8 INFORMATION CERTIFIED BY TRUSTEE

The following information provided by Fidelity Management Trust Company for the years ended December 31, 2009 and 2008 was certified by them to be accurate and complete:

(a) The assets held by Fidelity Management Trust Company as of December 31, 2009 and 2008, as well as the transactions involving these assets for the years ended December 31, 2009 and 2008.

(b) The amount of investment income for the year ended December 31, 2009.

(c) The Schedule H, Line 4i – Schedule of Assets (Held at End of Year) at December 31, 2009.

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	2009
Ending net assets available for benefits per financial statements	$ 4,540,806
Less: Adjustment from fair value to contract value for fully benefit-responsive contracts	(4,324)
Ending net assets available for benefits per 5500	$ 4,536,482

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2008 to Form 5500:

	2008
Ending net assets available for benefits per financial statements	$ 5,535,174
Less: Adjustment from fair value to contract value for fully benefit-responsive contracts	(12,453)
Less: 2008 contributions recorded in 2009 on 5500	(21,149)
Ending net assets available for benefits per 5500	$ 5,501,572

The following is a reconciliation of contributions per the financial statements at December 31, 2009 to Form 5500:

	2009
Total contributions per financial statements	$ 252,725
Add: 2008 contributions recorded in 2009 on 5500	21,149
Total contributions per 5500	$ 273,874

The following is a reconciliation of investment appreciation per the financial statements at December 31, 2009 to Form 5500:

Net investment appreciation per financial statements	$ 910,069
Less: Adjustment from fair value to contract value for benefit-responsive contracts	8,129
Net investment appreciation per Form 5500	$ 918,198

NOTE 10 PLAN TERMINATION

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

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2009

Schedule H (Form 5500)
EIN 31-1249740
Plan Number – 001

Column A	Column B	Column C	Column D	Column E
	Identity of issuer, borrower of similar entity	Description of Investment	Cost	Current Value
*	Fidelity Fund	Equity Fund		$ 443,914
*	Fidelity Capital & Income Fund	Equity Fund		209,017
*	Fidelity Aggressive Growth Fund	Equity Fund		197,993
*	Fidelity Diversified International Fund	Equity Fund		360,753
*	Fidelity Small Cap Independence Fund	Equity Fund		122,571
*	Fidelity Freedom Income Fund	Equity Fund		12,108
*	Fidelity Freedom 2000 Fund	Equity Fund		31,348
*	Fidelity Freedom 2005 Fund	Equity Fund		809
*	Fidelity Freedom 2010 Fund	Equity Fund		274,152
*	Fidelity Freedom 2015 Fund	Equity Fund		12,670
*	Fidelity Freedom 2020 Fund	Equity Fund		717,445
*	Fidelity Freedom 2025 Fund	Equity Fund		76,160
*	Fidelity Freedom 2030 Fund	Equity Fund		344,415
*	Fidelity Freedom 2035 Fund	Equity Fund		82,682
*	Fidelity Freedom 2040 Fund	Equity Fund		82,366
*	Fidelity Freedom 2045 Fund	Equity Fund		1,283
*	Fidelity Freedom 2050 Fund	Equity Fund		4,432
*	Fidelity Retirement Government Money Market Portfolio	Money Market Fund		224,515
*	Fidelity Managed Income Portfolio	Interest in Common Trust		232,562
*	Spartan U.S. Equity Index Fund	Equity Fund		643,866
*	Fidelity U.S. Bond Index Fund	Equity Fund		292,751
*	Fidelity Contrafund	Equity Fund		64,074
	ABF Large Cap Value Fund	Equity Fund		23,875
*	Fidelity Leveraged Company Stock Fund	Equity Fund		46,889
*	Participant Loans	5.00%		33,832
				$ 4,536,482

NOTE: The above data is based upon information that has been certified as complete and accurate by Fidelity Management Trust Company.

* Denotes Party-In-Interest

See accompanying independent auditors' disclaimer of opinion

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Schedule H, Line 4a– Schedule of Delinquent Participant Contributions
December 31, 2009

Schedule H (Form 5500)
EIN 31-1249740
Plan Number – 001

Participant Contribution Payments Transferred Late to Plan	Total that Constitute Nonexempt Prohibitive Transactions
2009	2009
$ 3,117	$ 3,117

See accompanying independent auditors' disclaimer of opinion

Northlich, LLC Profit Sharing and 401(k) Plan

Financial Statements
Years Ended December 31, 2009 and 2008
With Report of Independent Certified Public Accountants

BARNES DENNIG
Accounting • Tax • Business Insight

Report of Independent Certified Public Accountants

To the Plan Administrator of the
Northlich, LLC Profit Sharing and 401(k) Plan
Cincinnati, Ohio

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of Northlich, LLC Profit Sharing and 401(k) Plan as of December 31, 2009 and 2008, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2009, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) at December 31, 2009, and Schedule H, Line 4a – Schedule of Delinquent Participant Contributions at December 31, 2009. These financial statements and schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8, of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 8, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedule. We have been informed by the Plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2009 and 2008, that the information provided to the Plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying financial statements and schedules taken as a whole. The form and content of the information included in the financial statements and schedules, other than that derived from the information certified by the 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.

Barnes Dennig & Co. Ltd.

Cincinnati, Ohio
September 16, 2010

150 East Fourth Street | Cincinnati, OH 45202 | Tel 513.241.8313 | Fax 513.241.8303
www.barnesdennig.com Member, PKF International

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Statements of Net Assets Available for Benefits
At December 31, 2009 and 2008

	2009	2008
Investments at fair value (unless noted):		
Mutual funds	$ 4,045,573	$ 4,964,781
Fidelity retirement money market portfolio	224,515	207,362
Interest in common collective trusts	232,562	230,863
Participant loans at carrying value	33,832	98,566
Total investments	4,536,482	5,501,572
Receivables:		
Employer contribution receivable	-	21,149
Total receivables	-	21,149
Net assets available for benefits at fair value	4,536,482	5,522,721
Adjustment from fair value to contract value for fully benefit-responsive investment contract	4,324	12,453
Net assets available for benefits	$ 4,540,806	$ 5,535,174

The accompanying notes are an integral part of these financial statements

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2009

Additions:	
Investment income:	
Net appreciation in fair value of investments	$ 797,228
Interest and dividend income	112,841
Total investment income	910,069
Contributions	
Employee	250,844
Other	520
Rollover	1,361
Total contributions	252,725
Total additions	1,162,794
Deductions:	
Benefit payments to participants	2,138,557
Administrative fees	18,605
Total deductions	2,157,162
Net decrease	(994,368)
Net assets available for benefits:	
Beginning of year	5,535,174
End of year	$ 4,540,806

The accompanying notes are an integral part of these financial statements

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Notes to Financial Statements

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

The accompanying financial statements of the Northlich, LLC Profit Sharing and 401(k) Plan (the Plan) have been prepared on the accrual basis.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Statement of Net Assets Available for Benefits presents the fair value of the investment in the collective trust as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation

Investments are reported at fair value. Quoted market prices are used to value investments. Shares of mutual funds are valued at the net asset value of shares held by the Plan at year end and are stated at fair value as determined by quoted market prices.

Investment transactions are accounted for on the trade date (the date the order to buy or sell is executed). The cost of investments sold is computed on an average cost basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

Related-Party Transactions

Certain Plan investments are investments in mutual funds managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the asset custodian and trustee as defined by the Plan and therefore, these transactions qualify as party-in-interest.

Several employees of the Northlich, LLC (the Company) provide administrative services to the Plan. These services include Plan oversight and day-to-day Plan administration. The Plan is not charged by the Plan Sponsor for the services of the employees to the Plan.

Estimates

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

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Benefit Payments

Benefit payments are recorded when paid.

Subsequent Events

The Company has evaluated subsequent events through September 16, 2010, which is the date these financial statements were available to be issued, and have determined that there are no subsequent events that require disclosure under applicable GAAP for subsequent events.

NOTE 2 DESCRIPTION OF THE PLAN

The following description of the Plan provides only general information. Participants should refer to the Summary Plan Description for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan. All employees of the Company who are 21 years of age and have completed one year of service are eligible to participate in the Plan. Employees do not have to complete any service requirements to become eligible for deferral contributions. Effective January 1, 2008, employees may enter the Plan immediately upon meeting the eligibility requirements. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA).

Effective January 2008, the Company changed ownership and the Plan changed its name from Northlich, Inc. Profit Sharing and 401(k) Plan to Northlich, LLC Profit Sharing and 401(k) Plan.

Contributions

The Plan allows for the Company to make discretionary employer matching contributions throughout the Plan year and a discretionary profit sharing contribution at the end of each Plan year. Participants must complete at least one year of service in order to participate in the matching and profit sharing contribution parts of the Plan. For the year ending December 31, 2009, the Company did not make any contributions. A participant may contribute up to 60% of eligible compensation. However, contributions may not exceed limitations established under Section 402(g) of the Internal Revenue Code of 1986 as amended ($16,500 at December 31, 2009). For 2009, Section 414(v) of the Internal Revenue Code of 1986 as amended allowed a maximum catch-up contribution of $5,500. The participants designate the percentage of their total contribution to be invested in any of the Plan's investment funds. Participants may change the percentage of contributions invested in each account and may make transfers between accounts anytime during the year. A participant may change the amount of his or her elective deferred contributions as of the beginning of each payroll period.

Rollover Contributions

Participants may roll over the taxable portion of funds previously held in their account in another employee benefit plan to the Plan on a tax-free basis.

NOTE 2 DESCRIPTION OF THE PLAN (CONTINUED)

Participant Accounts

Each participant's account is credited with the participant's and Company's contributions and a pro-rata allocation of the Plan's earnings. The pro-rata allocation is based upon the proportion of individual account balances to total participants' account balances in the respective investment funds. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Vesting

Participants become immediately vested in their contributions plus actual earnings thereon at the time of participation in the Plan. Vesting in the Company's matching and profit sharing contribution portion of their accounts, plus actual earnings thereon, is based on years of service. Participants become partially vested after one year with 100% vesting being attained after five years. Non-vested portions of participant accounts that are forfeited upon payment of benefits are retained in the Plan and used to reduce future employer contributions or pay Plan expenses. During 2009, the Company paid $18,163 in plan expenses with forfeiture funds. The balance of unallocated forfeitures was $23,860 and $25,408 as of December 31, 2009 and 2008, respectively.

Payment of Benefits

Upon a participant's retirement, death, total and permanent disability, other termination of employment with the Company or termination of the Plan, the participant's account is distributed in the form of a lump sum payment or installment payments. If the vested interest is $1,000 or less, the payment will be in the form of a lump sum payment, payable as soon as administratively feasible.

Upon termination of the Plan, the assets will be distributed to participants in accordance with the Plan's provisions and existing laws and regulations.

In-service distributions are permissible from the Plan for participants that have obtained the age of 59 1/2. Participants electing in-service distributions may elect to receive all or a portion of their vested benefits in a lump sum payment or annual installments.

In conditions of "financial hardship", a participant may apply to the Plan administrator for approval to withdraw that portion of their elective deferrals necessary to meet the financial hardship, subject to the limitations of the Plan and the Internal Revenue Code.

Loans

Participant loans are available based on amounts in the participant's account. Participants may have one loan outstanding at any time and may be taken for any purpose. The minimum loan is $1,000; the maximum loan amount is the lesser of one-half of the vested account balance or $50,000 reduced by the highest outstanding loan balance in the account during the prior twelve-month period. The vested participant account balance is used as collateral for the loan. All loans bear a reasonable rate of interest as determined by the Plan administrator. All loans are required to be repaid in equal installments at least on a quarterly basis and within a five-year period unless it is for the purchase of a principal residence. Then the loan may be repaid over a ten-year period.

NOTE 2 DESCRIPTION OF THE PLAN (CONTINUED)

Administrative Expenses

Certain Plan expenses are paid by the Company.

NOTE 3 BENEFIT-RESPONSIVE INVESTMENT

The Plan's investment in the Fidelity Managed Income Portfolio Fund is a benefit-responsive investment with Fidelity Management Trust Company. Fidelity maintains the contributions in a general account, which is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The investment is included in the financial statement at contract value as reported to the Plan by Fidelity. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The existence of certain conditions can limit the fund's ability to transact at contract value with the issuers of its investment contracts. Specifically, any event outside the normal operation of the trust which causes a withdrawal from an investment contract may result in a negative market value adjustment with respect to such withdrawal. Examples of such events include, but are not limited to, partial or complete legal termination of the trust, tax disqualification of the trust, and transfers of assets from the fund directly to a competing investment option. As of December 31, 2009, the occurrence of an event outside the normal operation of the fund which would cause a withdrawal from an investment contract is not considered to be probable.

In addition to the limitations noted above, issuers of investment contracts have certain rights to terminate a contract and settle at an amount which differs from contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate was approximately 1.2% and 3.0% at December 31, 2009 and 2008, respectively. The crediting interest rate is based on a formula agreed upon with the issuer. Such interest rates are reviewed on a monthly basis for resetting and will not fall below zero percent. The average yield for the years ended December 31, 2009 and 2008 was approximately 1.6% and 4.6%, respectively. The crediting rate, and hence a portfolio's return, may be affected by many factors, including purchases and redemptions by unitholders. The impact depends on whether the market value of the underlying assets is higher or lower than the contract value of those assets. If the market value of underlying assets is higher than their contract value, the crediting rate will ordinarily be higher than the yield of the underlying assets. Under these circumstances, cash from new investors will tend to lower the crediting rate and a portfolio's return, and redemptions by existing shareholders will tend to increase the crediting rate and a portfolio's return.

NOTE 4 INVESTMENTS

The following investments represent five percent or more of the Plan's net assets available for benefits as of December 31, 2009 and 2008:

	2009	2008
Fidelity Fund	$ 443,914	$ 329,019
Fidelity Diversified International Fund	360,753	325,825
Fidelity Freedom Income Fund	*	1,336,865
Fidelity Freedom 2010 Fund	274,152	478,695
Fidelity Freedom 2020 Fund	717,445	554,211
Fidelity Freedom 2030 Fund	344,415	288,278
Spartan U.S. Equity Index Fund	643,866	580,989
Fidelity Managed Income Portfolio	236,886	*
Fidelity U.S. Bond Index Fund	292,751	*

* Fund was not 5% of total assets during the year.

During 2009, the Plan's mutual funds appreciated by $797,228.

NOTE 5 FAIR VALUE MEASUREMENTS

The financial statements have been prepared in accordance with applicable GAAP for fair value measurements and disclosures, effective for fiscal years beginning after November 15, 2007 for financial assets and liabilities. Under the applicable GAAP literature, fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date.

In determining fair value, the Plan uses various valuation approaches. The applicable GAAP literature establishes a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are inputs that market participants would use in pricing the asset or liability developed based on market data obtained from sources independent of the Plan. Unobservable inputs are inputs that reflect the Plan's assumptions about the assumptions market participants would use in pricing the asset or liability developed based on the best information available in the circumstances. The hierarchy is broken down into three levels based on the ability to observe inputs 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.

NOTE 5 FAIR VALUE MEASUREMENTS (CONTINUED)

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in methodologies used at December 31, 2009 and 2008.

Mutual Funds: Valued at the net asset value ('NAV") of shares held by the Plan at year end.

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

Money Market Funds: Valued at the net asset value ('NAV") of shares held by the Plan at year end.

Common Collective Trusts: Valued at fair value of the collective trust's underlying investments based on information reported by the investment advisor using the audited financial statements of the collective trust at year-end.

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

The following table sets 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
Mutual funds	$ 4,045,573	$ -	$ -	$ 4,045,573
Money market funds	-	224,515	-	224,515
Common collective trusts	-	232,562	-	232,562
Participant loans	-	-	33,832	33,832
Total assets at fair value	$ 4,045,573	$ 457,077	$ 33,832	$ 4,536,482

NOTE 5 FAIR VALUE MEASUREMENTS (CONTINUED)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2008:

	Level 1	Level 2	Level 3	Total
Mutual funds	$ 4,964,781	$ -	$ -	$ 4,964,781
Money market funds	207,362	-	-	207,362
Common collective trusts	-	230,863	-	230,863
Participant loans	-	-	98,566	98,566
Total assets at fair value	$ 5,172,143	$ 230,863	$ 98,566	$ 5,501,572

The following is a summary of changes in the fair value of the Plan's level 3 assets for year ended December 31, 2009:

	Participant Loans
Balance, beginning of year	$ 98,566
Interest income	3,136
Unrealized gains (losses) relating to instruments still held at the reporting date	-
Purchases, sales, issuances and settlements (net)	(67,870)
Balance, end of year	$ 33,832

NOTE 6 PARTIAL TERMINATION OF PLAN

Subsequent to the Plan year ended December 31, 2008, the Company determined that a partial termination of the Plan had occurred affecting several Plan participants involuntarily terminated during the Plan year ended December 31, 2008. The result of the partial termination was that all affected participants became fully vested in their account balances. Certain affected participants received distributions during the Plan year and forfeited their unvested portion. As a result, approximately $2,500 was repaid to the participants accounts out of the Plan's forfeiture account during 2009.

NOTE 7 TAX STATUS

The Company has adopted a prototype plan which has received an opinion letter from the Internal Revenue Service dated March 31, 2008, which states the provider's prototype, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (IRC). The Plan itself has not received a determination letter from the IRS. The Plan has been amended since adoption of the prototype plan. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code, therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 8 INFORMATION CERTIFIED BY TRUSTEE

The following information provided by Fidelity Management Trust Company for the years ended December 31, 2009 and 2008 was certified by them to be accurate and complete:

(a) The assets held by Fidelity Management Trust Company as of December 31, 2009 and 2008, as well as the transactions involving these assets for the years ended December 31, 2009 and 2008.

(b) The amount of investment income for the year ended December 31, 2009.

(c) The Schedule H, Line 4i – Schedule of Assets (Held at End of Year) at December 31, 2009.

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	2009
Ending net assets available for benefits per financial statements	$ 4,540,806
Less: Adjustment from fair value to contract value for fully benefit-responsive contracts	(4,324)
Ending net assets available for benefits per 5500	$ 4,536,482

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2008 to Form 5500:

	2008
Ending net assets available for benefits per financial statements	$ 5,535,174
Less: Adjustment from fair value to contract value for fully benefit-responsive contracts	(12,453)
Less: 2008 contributions recorded in 2009 on 5500	(21,149)
Ending net assets available for benefits per 5500	$ 5,501,572

The following is a reconciliation of contributions per the financial statements at December 31, 2009 to Form 5500:

	2009
Total contributions per financial statements	$ 252,725
Add: 2008 contributions recorded in 2009 on 5500	21,149
Total contributions per 5500	$ 273,874

The following is a reconciliation of investment appreciation per the financial statements at December 31, 2009 to Form 5500:

Net investment appreciation per financial statements	$ 910,069
Less: Adjustment from fair value to contract value for benefit-responsive contracts	8,129
Net investment appreciation per Form 5500	$ 918,198

NOTE 10 PLAN TERMINATION

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

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2009

Schedule H (Form 5500)
EIN 31-1249740
Plan Number – 001

Column A	Column B	Column C	Column D	Column E
	Identity of issuer, borrower of similar entity	Description of Investment	Cost	Current Value
*	Fidelity Fund	Equity Fund		$ 443,914
*	Fidelity Capital & Income Fund	Equity Fund		209,017
*	Fidelity Aggressive Growth Fund	Equity Fund		197,993
*	Fidelity Diversified International Fund	Equity Fund		360,753
*	Fidelity Small Cap Independence Fund	Equity Fund		122,571
*	Fidelity Freedom Income Fund	Equity Fund		12,108
*	Fidelity Freedom 2000 Fund	Equity Fund		31,348
*	Fidelity Freedom 2005 Fund	Equity Fund		809
*	Fidelity Freedom 2010 Fund	Equity Fund		274,152
*	Fidelity Freedom 2015 Fund	Equity Fund		12,670
*	Fidelity Freedom 2020 Fund	Equity Fund		717,445
*	Fidelity Freedom 2025 Fund	Equity Fund		76,160
*	Fidelity Freedom 2030 Fund	Equity Fund		344,415
*	Fidelity Freedom 2035 Fund	Equity Fund		82,682
*	Fidelity Freedom 2040 Fund	Equity Fund		82,366
*	Fidelity Freedom 2045 Fund	Equity Fund		1,283
*	Fidelity Freedom 2050 Fund	Equity Fund		4,432
*	Fidelity Retirement Government Money Market Portfolio	Money Market Fund		224,515
*	Fidelity Managed Income Portfolio	Interest in Common Trust		232,562
*	Spartan U.S. Equity Index Fund	Equity Fund		643,866
*	Fidelity U.S. Bond Index Fund	Equity Fund		292,751
*	Fidelity Contrafund	Equity Fund		64,074
	ABF Large Cap Value Fund	Equity Fund		23,875
*	Fidelity Leveraged Company Stock Fund	Equity Fund		46,889
*	Participant Loans	5.00%		33,832
				$ 4,536,482

NOTE: The above data is based upon information that has been certified as complete and accurate by Fidelity Management Trust Company.

* Denotes Party-In-Interest

See accompanying independent auditors' disclaimer of opinion

NORTHLICH, LLC PROFIT SHARING AND 401(K) PLAN

Schedule H, Line 4a– Schedule of Delinquent Participant Contributions
December 31, 2009

Schedule H (Form 5500)
EIN 31-1249740
Plan Number – 001

Participant Contribution Payments Transferred Late to Plan	Total that Constitute Nonexempt Prohibitive Transactions
2009	2009
$ 3,117	$ 3,117

See accompanying independent auditors' disclaimer of opinion