

<div>Form 5500</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Annual Return/Report of Employee Benefit Plan</div> <div>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).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2009</div> <div>This Form is Open to Public Inspection</div>
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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:	<div>☐ a multiemployer plan;</div> <div>☒ a single-employer plan;</div> <div>☐ a multiple-employer plan; or</div> <div>☐ a DFE (specify) ____</div>
B This return/report is:	<div>☐ the first return/report;</div> <div>☐ the final return/report;</div> <div>☐ an amended return/report;</div> <div>☐ a short plan year return/report (less than 12 months).</div>
C If the plan is a collectively-bargained plan, check here.	☒
D Check box if filing under:	<div>☒ Form 5558;</div> <div>☐ automatic extension;</div> <div>☐ the DFVC program;</div> <div>☐ special extension (enter description)</div>

Part II	Basic Plan Information—enter all requested information
1a Name of plan REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN	1b Three-digit plan number (PN) ▶ 005
	1c Effective date of plan 01/01/1975
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) WINDSOR REPUBLIC DOOR, INC. 150 CAMPUS VIEW BLVD, SUITE 250 COLUMBUS, OH 43235	2b Employer Identification Number (EIN) 75-3130734
	2c Sponsor's telephone number 614-888-8855
	2d Business code (see instructions) 321210

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.	10/15/2010	ROGER BAILEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") WINDSOR REPUBLIC DOOR, INC. 150 CAMPUS VIEW BLVD, SUITE 250 COLUMBUS, OH 43235	3b Administrator's EIN 75-3130734 3c Administrator's telephone number 614-888-8855
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	326
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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	137
b Retired or separated participants receiving benefits.....	6b	81
c Other retired or separated participants entitled to future benefits.....	6c	80
d Subtotal. Add lines 6a , 6b , and 6c	6d	298
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	10
f Total. Add lines 6d and 6e	6f	308
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	16

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 1B 1G 3H

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
 (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
 (3) ☒ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
 (2) ☐ **I** (Financial Information – Small Plan)
 (3) ☐ **A** (Insurance Information)
 (4) ☒ **C** (Service Provider Information)
 (5) ☐ **D** (DFE/Participating Plan Information)
 (6) ☐ **G** (Financial Transaction Schedules)

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>WINDSOR REPUBLIC DOOR, INC.</u>	D Employer Identification Number (EIN) <u>75-3130734</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2009</u>
2	Assets:
a	Market value 2a <u>2447631</u>
b	Actuarial value 2b <u>2692394</u>
3	Funding target/participant count breakdown
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>77</u> <u>1006896</u>
b	For terminated vested participants 3b <u>80</u> <u>546636</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>1355932</u>
(2)	Vested benefits 3c(2) <u>40272</u>
(3)	Total active 3c(3) <u>169</u> <u>1396204</u>
d	Total 3d <u>326</u> <u>2949736</u>
4	If the plan is at-risk, check the box and complete items (a) and (b) ☐
a	Funding target disregarding prescribed at-risk assumptions 4a
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor 4b
5	Effective interest rate 5 <u>8.13</u> %
6	Target normal cost 6 <u>71804</u>

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	<u>10/06/2010</u>
Signature of actuary	Date
<u>JASON C. WELLS</u>	<u>08-07067</u>
Type or print name of actuary	Most recent enrollment number
<u>AON CONSULTING</u>	<u>614-436-8100</u>
Firm name	Telephone number (including area code)
<u>445 HUTCHINSON AVENUE, SUITE 900</u> <u>COLUMBUS, OH 43235-8619</u>	
Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II Beginning of year carryover and prefunding balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	0	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8).....	0	0
10 Interest on item 9 using prior year's actual return of <u>-27.70</u> %		
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		58
b Interest on (a) using prior year's effective rate of <u>6.17</u> %		4
c Total available at beginning of current plan year to add to prefunding balance		62
d Portion of (c) to be added to prefunding balance.....		62
12 Reduction in balances due to elections or deemed elections.....	0	0
13 Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	0	62

Part III Funding percentages		
14 Funding target attainment percentage.....	14	91.27 %
15 Adjusted funding target attainment percentage.....	15	91.27 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	94.43 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and liquidity shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2009	30669				
07/13/2009	30669				
10/09/2009	20538				
01/11/2010	30669				
09/09/2010	16187				
			Totals ►	18(b) 128732	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contribution from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	121255
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No	
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No	
c If 20a is "Yes," see instructions and complete the following table as applicable:		

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
b Applicable month (enter code)				21b 2
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	71804
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	257404	49494
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	121298
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	43
36 Additional cash requirement (item 34 minus item 35).....	36	121255
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	121255
38 Interest-adjusted excess contributions for current year (see instructions).....	38	0
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.

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

<div>A Name of plan</div> <div>REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN</div>	<div>B Three-digit plan number (PN)</div> <div>▶</div> <div>005</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500</div> <div>WINDSOR REPUBLIC DOOR, INC.</div>	<div>D Employer Identification Number (EIN)</div> <div>75-3130734</div>

Part I

Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

MORGAN STANLEY SMITH BARNEY

13-2655998

(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)

(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 ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>		
A Name of plan <u>REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>WINDSOR REPUBLIC DOOR, INC.</u>	D Employer Identification Number (EIN) <u>75-3130734</u>	

Part I	Asset and Liability Statement
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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)	<u>33062</u>	<u>46856</u>
(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)	<u>4388</u>	<u>100</u>
(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)		
(9) Value of interest in common/collective trusts.....	1c(9)	<u>39619</u>	<u>0</u>
(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)	<u>2371253</u>	<u>2831640</u>
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(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	2448322	2878596

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 through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	2448322	2878596
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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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	128732	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		128732

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0

(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)	82174	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		82174

(3) Rents	2b(3)		
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(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	354288	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		354288
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		1490
d Total income. Add all income amounts in column (b) and enter total.....	2d		566684

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	136410	
(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)		136410
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		136410

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		430274
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: NORMAN, JONES, ENLOW AND COMPANY

(2) EIN: 31-1282719

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.).....		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.).....		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.)		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.).....		X	
e Was this plan covered by a fidelity bond?.....	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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?		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?		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.).....	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.).....		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?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		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.			

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection.
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

A Name of plan <u>REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>WINDSOR REPUBLIC DOOR, INC.</u>	D Employer Identification Number (EIN) <u>75-3130734</u>

Part I	Distributions
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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	<u>0</u>
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): <u>13-2655998</u>		
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	<u>1</u>

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

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

Schedule R (Form 5500) 2009
v.092308.1

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): _____

**REPUBLIC BUILDERS PRODUCTS
HOURLY PENSION PLAN
FINANCIAL STATEMENTS AND SCHEDULE
As of December 31, 2009 and 2008**



Norman Jones Enlow & Co.

Certified Public Accountants
& Management Consultants

INDEPENDENT AUDITORS' REPORT

Plan Administrator
Republic Builders Products Hourly Pension Plan
150 East Campus View Boulevard, Suite 250
Columbus, OH 43235

We have audited the accompanying statements of net assets available for plan benefits of Republic Builders Products Hourly Pension Plan (the "Plan") as of December 31, 2009, and the related statements of changes in net assets available for plan benefits for the year then ended, and the supplemental schedule as of December 31, 2009. These financial statements and supplemental schedule are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audit, as of December 31, 2009, in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Plan as of December 31, 2009, and the changes in net assets for the year then ended in conformity with accounting principles generally accepted in the United States of America.

We were engaged to audit the accompanying statement of net assets available for benefits of Republic Builders Products Hourly Pension Plan (the "Plan") as of December 31, 2008, and the related statement of changes in net assets available for benefits for the year then ended. In our report dated July 24, 2009, we did not express an opinion due to the significance of the information that we did not audit as permitted by 29 CFR 2520.103-8, which is summarized in Note 7. The form and content of the information included in the financial statements, other than that derived from the information certified by the former Custodian, 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.

Norman Jones Enlow

Columbus, Ohio
September 21, 2010

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
ASSETS		
Cash	\$ 380,297	\$ 44,004
Investments, at fair value		
Common trust fund	-	415,598
Mutual funds	<u>2,451,343</u>	<u>1,955,655</u>
TOTAL INVESTMENTS	<u>2,451,343</u>	<u>2,371,253</u>
Receivable	<u>46,856</u>	<u>34,181</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 2,878,496</u></u>	<u><u>\$ 2,449,438</u></u>

See notes to financial statements.

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
Years Ended December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
CONTRIBUTIONS	\$ 128,732	\$ 128,719
INVESTMENT ACTIVITY		
Interest and dividend income	87,326	163,065
Net appreciation (depreciation) in fair value of mutual funds	<u>354,193</u>	<u>(1,090,870)</u>
TOTAL CONTRIBUTIONS AND INVESTMENT ACTIVITY	570,251	(799,086)
DEDUCTIONS		
Benefit payments	135,291	126,669
Plan administrative expenses	5,902	464
TOTAL DEDUCTIONS	<u>141,193</u>	<u>127,133</u>
(DECREASE) INCREASE IN NET ASSETS AVAILABLE FOR PLAN BENEFITS	429,058	(926,219)
NET ASSETS AVAILABLE FOR PLAN BENEFITS AT BEGINNING OF YEAR	<u>2,449,438</u>	<u>3,375,657</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS AT END OF YEAR	<u><u>\$ 2,878,496</u></u>	<u><u>\$ 2,449,438</u></u>

See notes to financial statements.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

1. DESCRIPTION OF RETIREMENT PENSION PLAN

The following description of the Republic Builders Products Hourly Pension Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan, established January 1, 1975, is a noncontributory defined benefit pension plan covering the hourly employees, including those employees who are members of the United Steelworkers of America Local 8195, of Republic Products Company (the "Company"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Eligibility and Vesting

All employees whose employment is governed by the collective bargaining agreement negotiated by the United Steelworkers of America Local 8195 are included in the Plan as participants after one year of service, as defined by the Plan, and attainment of age 21.

Participants become 100% vested upon completion of five years of service. If a participant terminates employment before completing three years of service, he/she forfeits the right to receive the benefits accumulated, unless the participant has reached age 65.

Pension Benefits

At normal retirement (age 65), participants are entitled to monthly pension benefits based on years of service and specified multipliers, as defined by the Plan. A participant is entitled to reduced monthly pension benefits at the age of 60 with ten years of vesting service.

If the participant is married on the date the benefits are to begin, the participant will automatically receive a joint and 50% survivor annuity, unless otherwise elected. If the participant is single on the date the benefits are to begin, the participant will automatically receive a life annuity, unless otherwise elected.

If the participant is not married, and dies prior to receipt of benefit payments, no death benefit is payable. Participants who become totally and permanently disabled are eligible to receive monthly disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they have completed a six-month waiting period after becoming totally disabled. Disability benefits are paid until normal retirement age, at which time disabled participants begin receiving normal retirement benefits.

Funding Policy

The Company contributes such annual amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to Plan participants. The Plan has met the minimum funding requirements of ERISA. The Company's present intention is to make annual contributions in amounts sufficient to fund the Plan's current year service cost and the initial past service cost plus interest.

Plan Termination

Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions set forth in ERISA. In the event of full or partial termination of the Plan, the accrued benefits of the participants become fully vested.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

1. DESCRIPTION OF RETIREMENT PENSION PLAN (CONTINUED)

Plan Termination (Continued)

Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated Plan benefits will be paid depends on the priority of those benefits, the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (the "PBGC"), and the sufficiency at the time of the Plan's net assets to fund those benefits. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Administrative Expenses

Administrative expenses, including Trustee, actuarial, and audit fees paid by the Plan were \$5,902 and \$464 for the years ended December 31, 2009 and 2008, respectively.

Tax Status

The Plan obtained a determination letter on March 18, 2003, in which the Internal Revenue Service (IRS) stated that the Plan is qualified under Section 401(a) of the Internal Revenue Code (IRC) and, therefore, the related trust is exempt from taxation. Subsequent to this issuance of the determination letter, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan Administrator believes the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan, as amended, is qualified and the related trust is exempt.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Valuation on Investments

The fair value of units owned by the Plan in a common trust fund is based on quoted redemption values on the last business day of the Plan year. Investments in mutual funds are presented at fair value, based on quoted market prices.

Fair Value of Investments

In September 2006, the Financial Accounting Standards Board (FASB) issued Accounting Standards Codification (ASC) 820-10-65, *Fair Value Measurements*. FASB ASC 820-10-65 establishes a framework for measuring fair value under generally accepted accounting principles, clarifies the definition of fair value within that framework, and expands financial statement disclosures about the use of fair value measurements. The financial statement preparation and disclosure provisions are effective for financial statements issued for annual periods beginning after November 15, 2007. The Plan adopted the provisions of FASB ASC 820-10-65 at January 1, 2008.

Estimates

The preparation of financial statements, in conformity with accounting principles generally accepted in the United States of America, requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and disclosures of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Risks and Uncertainties

Contributions to the Plan and the actuarial present value of accumulated Plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, employee compensation, and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term, and due to uncertainties inherent in setting assumptions, that the affect of such changes could be material to the financial statements. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statement of Net Assets Available for Plan Benefits.

Accounting for Uncertainty in Income Taxes

The Plan has adopted FASB ASC 740-10-65, regarding uncertainty in income taxes, as of January 1, 2009. The Plan evaluates all tax positions in conformity with FASB ASC 450 for contingencies, and as such would reserve for any tax positions deemed probable of not being sustained by the IRS. The Plan recognizes tax benefits only to the extent that the Plan believes it is "more likely than not" that its tax positions will be sustained upon IRS examination. The Plan does not have a provision for unpaid federal income taxes (liability for unrecognized tax benefits) related to uncertain tax positions in the balance sheet as it believes all tax positions taken would "more likely than not" be sustained upon IRS examination.

Plan Changes

During the year ended December 31, 2009, the Plan moved the investments from Merrill Lynch to Morgan Stanley.

3. INVESTMENTS

The fair market value of individual assets that represent 5% or more of the Plan's net assets, as of December 31, 2009 and 2008, are as follows:

<u>Investment</u>	<u>2009</u>	<u>2008</u>
PIMCO Total Return Fund	\$ 1,086,525	\$ 955,767
Principal Cash	380,297	-
American Funds Fundamental Investments	311,300	-
American Funds Growth Fund of America	310,815	204,260
American Fund Investment Company of America	297,055	-
American Funds Capital Income Builder	133,912	-
Managers Special Equity Fund	-	304,908
American Century International Growth Fund	-	287,401
Davis New York Venture Fund	-	203,319

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

4. FAIR VALUE

FASB ASC 820-10-65 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unobservable inputs (Level 3 measurement). The three levels of the fair value hierarchy under FASB ASC 820-10-65 are described below:

- Level 1** Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2** Inputs to the valuation methodology include:
 Quoted prices for similar assets or liabilities in active markets;
 Quoted prices for identical or similar assets or liabilities in inactive markets;
 Inputs other than quoted prices that are observable for the asset or liability;
 Inputs that are derived principally from or corroborated by observable market data by correlation or other means;
- If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3** Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

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

The method 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 and 2008.

Description	Fair Value Measurements Reporting Data Using Quoted Prices in Active Markets for Identical Assets (Level 1)	
	2009	2008
Cash	\$ 380,297	\$ 44,044
Common trust fund	-	415,598
Mutual funds	2,451,343	1,955,655

Earnings on the investments held by the Plan were \$87,326 and \$163,065 for the years ended December 31, 2009 and 2008, respectively. Net appreciation for the year ended December 31, 2009 was \$354,193, and net depreciation for the year ended December 31, 2008 was \$1,090,870.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated Plan benefits are those future periodic payments, including lump sum distributions, that are attributable, under the Plan's provisions, to the service employees have rendered through the valuation date. Accumulated Plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries or employees who have died, and (c) present employees or their beneficiaries. The accumulated Plan benefits are based on the monthly benefit amount designated by the Plan and in effect at the valuation date. Benefits payable under all circumstances – retirement, death, disability, and termination of employment are included, to the extent they are deemed attributable to employee service rendered through the valuation date.

The actuarial present value of accumulated Plan benefits is that amount which results from applying actuarial assumptions to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment, and was determined by an independent actuary. The significant actuarial assumptions and method underlying the actuarial computations as of December 31, 2009 and 2008 are as follows:

Actuarial cost method – Projected Unit Credit Actuarial Cost Method

Mortality – The RP-2000 projected to 2009 blended annuitant/non-annuitant mortality table

Assumed rate of return – 8% compounded annually for 2009 and 2008

Retirement age – Between ages 60 and 65, according to a set of retirement rates for active members; age 65 for terminated members with vested rights

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits.

6. ACCUMULATED PLAN BENEFITS

An actuary estimates the benefit obligation of accumulated Plan benefits.

The actuarial present value of accumulated Plan benefits of the Plan as of January 1 is as follows:

	<u>2009</u>	<u>2008</u>
Participants currently receiving payments	\$ 996,804	\$ 1,011,036
Other participants	<u>1,841,495</u>	<u>1,687,185</u>
Total vested benefits	2,838,299	2,698,221
Non-vested benefits	<u>44,016</u>	<u>46,987</u>
Total	<u>\$ 2,882,315</u>	<u>\$ 2,745,208</u>

Changes in the actuarial present value of accumulated Plan benefits are as follows at January 1, 2010:

Actuarial present value of accumulated Plan benefits at January 1, 2008	\$ 2,745,208
Benefits accumulated and gains and losses	49,129
Interest due to the decrease in the discount period	214,647
Benefits paid	<u>(126,669)</u>
Actuarial present value of accumulated Plan benefits at January 1, 2009	<u>\$ 2,882,315</u>

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

6. ACCUMULATED PLAN BENEFITS (CONTINUED)

Changes in the projected benefit obligation of accumulated Plan benefits are as follows at December 31, 2009:

Projected benefit obligation at January 1, 2009	\$ 3,463,553
Service cost	94,410
Interest cost	218,138
Actuarial (gain) or loss	143,231
Benefits paid	<u>(135,291)</u>
Projected benefit obligation at December 31, 2009	<u>\$ 3,784,041</u>

7. SUMMARY OF INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

The Plan Administrator has obtained certification from the Trustee that the information provided to the Plan Administrator by the Trustee is complete and accurate in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. A summary of information included in the financial statements, which has been certified, is as follows:

	<u>December 31 2008</u>
Cash	\$ 44,004
Investments, at fair value	2,371,253

	<u>December 31 2008</u>
Net appreciation (depreciation) in fair value of investments	\$ (1,090,870)
Investment income	163,065
Benefit payments	126,669
Plan administrative expenses	464

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	<u>2009</u>
Net assets available per the financial statements	\$ 2,878,496
Plus: Cash in transit	100
Net assets available per Form 5500	<u>\$ 2,878,596</u>

The following is a reconciliation of total contributions and investment activity per the financial statements to Form 5500 as of December 31, 2009:

	<u>2009</u>
Total contributions and investment activity per the financial statements	\$ 570,251
Less: Investment activity on the 5500	<u>(3,567)</u>
Total contributions and investment activity per Form 5500	<u>\$ 566,684</u>

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)

The following is a reconciliation of total deductions per the financial statements to Form 5500 as of December 31, 2009:

	<u>2009</u>
Total deductions per the financial statements	\$ 141,193
Add: Deemed distributions	1,119
Less: Administrative fees not on the 5500	<u>(5,902)</u>
Total deductions per Form 5500	<u>\$ 136,410</u>

9. SUBSEQUENT EVENTS

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through September 21, 2010, the date the financial statements were available to be issued. No events arose during management's review of subsequent events.

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
FORM 5500 PLAN 003 EIN: 52-2187273
December 31, 2009

Schedule H, Part IV, Line 4i - SCHEDULE OF ASSETS HELD AT THE END OF THE YEAR

(a)	(b) Identity of issue	(c) Description of investment	(d) Cost	(e) Current value
	PIMCO	PIMCO Total Return Fund	\$ 1,080,028	\$ 1,086,525
*	Morgan Stanley	Principal Cash	380,297	380,297
	American Funds	American Funds Fundamental Investments	242,511	311,300
	American Funds	American Funds Growth Fund of America	240,574	310,815
	American Funds	American Fund Investment Company of America	244,401	297,055
	American Funds	American Funds Capital Income Builder	117,286	133,912
	American Funds	American Funds Small Capital World	70,844	105,436
	American Funds	American Fund Europacific Growth	57,249	76,479
	American Funds	American Funds Capital World Growth	57,858	72,977
	American Funds	American Funds New Perspective	42,701	56,844
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES			\$ 2,533,749	\$ 2,831,640

* Denotes party-in-interest

The accompanying notes to financial statements are an integral part of this schedule.

See independent auditors' report.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009

► **Round off amounts to nearest dollar.**

► **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

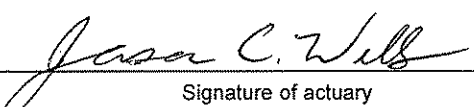
A Name of plan <u>Republic Builders Products Hourly Pension Plan</u>	B Three-digit plan number (PN) <u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>Windsor Republic Door, Inc.</u>	D Employer Identification Number (EIN) <u>75-3130734</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other	
F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500	

Part I Basic Information

1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2009</u>			
2 Assets:			
a Market value.....	2a		2,447,631
b Actuarial value.....	2b		2,692,394
3 Funding target/participant count breakdown		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a	77	1,006,896
b For terminated vested participants.....	3b	80	546,636
c For active participants:			
(1) Non-vested benefits.....	3c(1)		1,355,932
(2) Vested benefits.....	3c(2)		40,272
(3) Total active.....	3c(3)	169	1,396,204
d Total.....	3d	326	2,949,736
4 If the plan is at-risk, check the box and complete items (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions.....	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor.....	4b		
5 Effective interest rate.....	5		8.13 %
6 Target normal cost.....	6		71,804

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	 Signature of actuary	<u>10/06/2010</u> Date
<u>Jason C. Wells</u> Type or print name of actuary		<u>08-07067</u> Most recent enrollment number
<u>Aon Consulting</u> Firm name		<u>(614) 436-8100</u> Telephone number (including area code)
<u>445 Hutchinson Avenue, Suite 900</u> Address of the firm		
<u>Columbus</u> Address of the firm		
<u>OH 43235-8619</u> Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	0	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8).....	0	0
10 Interest on item 9 using prior year's actual return of <u>(27.70)</u> %		
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		58
b Interest on (a) using prior year's effective rate of <u>6.17</u> %		4
c Total available at beginning of current plan year to add to prefunding balance		62
d Portion of (c) to be added to prefunding balance.....		62
12 Reduction in balances due to elections or deemed elections.....	0	0
13 Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	0	62

Part III Funding percentages

14 Funding target attainment percentage.....	14	91.27 %
15 Adjusted funding target attainment percentage.....	15	91.27 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	94.43 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2009	30,669				
07/13/2009	30,669				
10/09/2009	20,538				
01/11/2010	30,669				
09/09/2010	16,187				
Totals ▶			18(b)	128,732	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contribution from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	121,255

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions used to determine funding target and target normal cost

21 Discount rate:				
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
b Applicable month (enter code)				21b 2
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.	27

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)	30	0

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)	31	71,804
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	257,404	49,494
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)	34	121,298
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	43
36 Additional cash requirement (item 34 minus item 35)	36	121,255
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (item 19c)	37	121,255
38 Interest-adjusted excess contributions for current year (see instructions)	38	0
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	39	0
40 Unpaid minimum required contribution for all years	40	0

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, line 19 – Discounted Employer Contributions

The following contributions for the plan year were made or are assumed to be made on the dates indicated. Contributions are discounted at the funding target effective interest rate 8.13%.

		Discounted Contribution as of 01/01/2009
Date	Contribution	
04/14/2009	\$30,669	\$30,000
07/13/2009	\$30,669	\$29,427
10/09/2009	\$20,538	\$19,339
01/11/2010	\$30,669	\$28,302
09/09/2010	\$16,187	\$14,187
Total	\$128,732	\$121,255

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, line 22 – Description of Weighted Average Retirement Age

	(1)	(2)	(3)	(4)	(5)	(6)
	Retirement		Cumulative		Retirement	
Age	qx	px	px	= (1) * (3)	Age	= (4) * (5)
60	0.1	0.900000	1.000000	0.100000	60.0	6.000
61	0.1	0.900000	0.900000	0.090000	61.0	5.490
62	0.1	0.900000	0.810000	0.081000	62.0	5.022
63	0.1	0.900000	0.729000	0.072900	63.0	4.593
64	0.1	0.900000	0.656100	0.065610	64.0	4.199
65	1.0	0.000000	0.590490	0.590490	65.0	38.382
Totals:				1.00000		63.686
Total of Column (6) / Total of Column (4), Rounded to nearest age:						64.000

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

Cost Method

Funding: Traditional Unit Credit.

FAS 87: Projected Unit Credit.

Asset Method

Funding: Based on average of the annual fair market values over the period beginning on the last day of the 25th month preceding the month in which the valuation occurs and ending on the Valuation Date. This result is limited to no lower than 90% and no greater than 110% of the fair market value of plan assets as of the Valuation Date.

FAS 87: The Fair Value is used.

Dates of Calculations

Funding: The Valuation Date is January 1, 2009.

FAS 87: The Measurement Date is January 1, 2009.

Employees Included in the Calculations

All active employees who have met the Plan's eligibility requirements as of the valuation date are included in the calculations. Former employees or their survivors who are receiving or entitled to receive an immediate or deferred benefit under the provisions of the Plan are also included.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (cont.)

Source of Data

Data is as of the valuation date and is supplied to us by the Employer.

Employees are assumed to work full time in all future years.

We rely on the Employer to inform us of any former participants who have been rehired and lost prior service because of the length of their break in service. These employees may have participation requirements different from other new employees.

Financial information was supplied to us by Merrill Lynch and Desco Corporation.

Although we believe these to be accurate and complete, the data and financial information have not been audited by us.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (cont.)

Interest and Other Rate Assumptions

Below is a summary of interest and inflation rates used for the January 1, 2009 valuation.

Interest Rates		Assumption
(1)	Funding	Full Yield Curve Effective November 2008
(2)	FAS 35	8.00%
(3)	FAS 87	
	(a) Discount	6.44%
	(b) Long-Term Rate of Return	8.00%
(4)	Funding Long-Term Rate of Return	8.00%

Other Rates		Assumption
(1)	Future Salaries	N/A
(2)	Increase Rate for the Maximum Benefit and Compensation Limits for FAS 87	N/A

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (cont.)

Decrement Assumptions

Below is a summary of decrements used in this valuation.

Mortality Decrements	Description
(1) Funding Target	
(a) Healthy	IRS 2009 Non-Annuitant/Annuitant Tables for Males and Females
(b) Disabled	Current liability mortality tables (post-1995)
(2) FAS 35 and FAS 87	RP-2000 Combined Healthy Mortality for males and females

—Retirement—		—Non-Annuitant Mortality—			—Termination—		
Decrement		Decrement	Male	Female	Decrement	Male	Female
Age	Rates	Age	Rates	Rates	Age	Rates	Rates
60	0.10	25	0.000295	0.000148	25	0.0967	0.0967
61	0.10	40	0.000890	0.000491	40	0.0775	0.0775
62	0.10	55	0.001911	0.002083	55	0.0155	0.0155
63	0.10	65	0.005399	0.005161	65	0.0000	0.0000
64	0.10						
65	1.00						
		—Annuitant Mortality—			—Disability— ¹		
		Decrement	Male	Female	Decrement	Male	Female
		Age	Rates	Rates	Age	Rates	Rates
		45	0.001739	0.000767	25	0.0015	0.0007
		55	0.004344	0.003105	40	0.0037	0.0034
		65	0.007090	0.009565	55	0.0150	0.0127
		75	0.030193	0.024716	65	0.00000	0.00000

The weighted average retirement age is 63.69. Sample Retirement and Termination rates are illustrated in the tables above.

¹ Disability mortality published in the Social Security Administration's Actuarial Study No. 75

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (cont.)

Expenses

The normal cost for funding purposes includes assumed expenses equal to the actual expenses paid by the trust in the previous year. General administrative expenses include trustee fees.

Form of Benefit Payment

Participants are assumed to elect the Normal Form of benefits, a straight life annuity for single participants and 50% joint and survivor for married participants.

Other Considerations

For the purpose of valuing death benefits, 80% of employees are assumed to be married. Wives are assumed to be three years younger than their husbands.

The present value of accrued benefits shown in the Benefits Security Ratio section is based on the blended Segment Value Interest Rates for the November preceding the valuation date and the required mortality table for cash distributions during the plan year.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V - Summary of Plan Provisions

The following summary describes principal plan provisions assumed in calculating the cost of your pension plan.

General Information

Original Effective Date:	January 1, 1975
Effective Date of Last Amendment:	November 25, 2003
Plan Year:	January 1 st to December 31 st
Employer Fiscal Year	January 1 st to December 31 st
Employer ID Number:	75-3130734
Plan Administrator's ID Number:	75-3130734
Plan Number:	005
Plan Administrator:	Desco Corporation

Eligibility

All employees of Republic Builders Products compensated on an hourly basis upon completion of one year of service and attainment of age 21.

Credited Service

A year of service is credited for each calendar year during which an employee works 1,000 hours. Fractions of years are credited to the nearest month if less than 1,000 hours in the year of hire or the year of exit.

Normal Retirement Date

Age 65 and 5 Years of Service.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V - Summary of Plan Provisions (cont.)

Normal Retirement Benefits

The monthly amount of Normal Retirement pension is equal to \$12.00 times the participant's credited service. The benefit multiplier is increased to \$13.00 effective December 1, 2001.

Early Retirement Date

Age 60 and 15 Years of Service.

Early Retirement Benefits

The amount of Early Retirement Benefit is based on the Normal Retirement Benefit, and is reduced as shown below interpolated for each month the benefit commences prior to Normal Retirement.

Age	Reduction
60	0.670
61	0.723
62	0.781
63	0.846
64	0.918
65	1.000

Delayed Retirement Benefits

If a participant continues to work beyond his Normal Retirement Date, he will receive a retirement benefit beginning at his actual retirement date that is the greater of his benefit calculated based on his service at delayed retirement date or the actuarial equivalent of his normal retirement benefit.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V - Summary of Plan Provisions (cont.)

Pre-Retirement Death Benefit

Upon the death of a vested participant, the benefit payable to the surviving spouse is calculated as the amount the spouse would have received if the participant had terminated on the date of death, survived to his Early Retirement Date, elected a 50% joint and survivor form of pension (unless another form has previously been elected) and died on the following day.

Disability Retirement Date

First day of the year after the Participant is totally and permanently disabled for six consecutive months.

Disability Retirement Benefit

Actuarial Equivalent of Accrued Benefit at Normal Retirement Date.

Vesting

100% upon completion of 5 Years of Service.

Termination Benefit

Vested employees receive the Amount of Normal Retirement Benefit accrued to date of termination of employment commencing at Normal Retirement.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Part V - Summary of Plan Provisions (cont.)

Forms of Payment

Normal forms:

Life annuity - Normal form for single employees.

50% Contingent Annuity - Normal form for married employees.

Optional forms:

75% Contingent Annuity

100% Contingent Annuity

5-Year Certain & Continuous Annuity

10-Year Certain & Continuous Annuity

All forms of payment are the actuarial equivalent of a life annuity.

Changes in Plan Provisions from the Prior Year

There were no changes in plan provisions from the prior year.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, Line 24 – Change in Actuarial Assumptions

An assumption for expenses paid from the trust has been added to the Funding Target normal cost as required by the Pension Protection Act of 2006.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, line 25 - Change in Method

1. The asset valuation method has been changed such that the actuarial value of assets is based on the average annual fair market values over the period beginning on the last day of the 25th month preceding the month in which the valuation occurs and ending on the Valuation Date. This result is limited to no lower than 90% and no greater than 110% of the fair market value of plan assets as of the Valuation Date.
2. Effective with the January 1, 2009 a change in valuation software systems was made. The change is in accordance with Announcement 2010-3 to qualify for automatic approval.
3. The Funding Target interest rates were changed from the segment rates with no lookback to the full yield curve with a two-month lookback.

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

Schedule SB, line 26 - Schedule of Active Participant Data

Age/Service	<u>Years of Credited Service as of January 1, 2009</u>										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	
Under 25	0	7	0	0	0	0	0	0	0	0	7
25-29	0	3	3	0	0	0	0	0	0	0	6
30-34	0	8	2	3	0	0	0	0	0	0	13
35-39	0	10	1	8	0	0	0	0	0	0	19
40-44	0	7	3	5	0	0	1	0	0	0	16
45-49	0	7	9	9	0	1	1	4	0	0	31
50-54	0	5	5	9	2	0	5	6	0	0	32
55-59	0	3	4	6	2	2	3	6	0	0	26
60-64	0	1	0	6	1	0	0	5	0	0	13
65-69	0	0	0	0	0	0	1	2	0	0	3
70 & up	0	0	0	0	1	0	0	2	0	0	3
Total	0	51	27	46	6	3	11	25	0	0	169

Plan Sponsor: Windsor Republic Door, Inc.
Plan Name: Republic Builders Products Hourly Pension Plan
EIN: 75-3130734
Plan Number: 005

**Schedule SB, line 32 - Schedule of Amortization
Bases**

Date Established	Period Remaining	Current Year Present Value Factor	Balance		Annual Payment
			Original	Remaining	
1/1/2008	6	4.998889	\$198,960	\$166,353	\$33,278
1/1/2009	7	5.614894	\$91,051	\$91,051	\$16,216
Total				\$257,404	\$49,494

**REPUBLIC BUILDERS PRODUCTS
HOURLY PENSION PLAN
FINANCIAL STATEMENTS AND SCHEDULE
As of December 31, 2009 and 2008**



Norman Jones Enlow & Co.

Certified Public Accountants
& Management Consultants

INDEPENDENT AUDITORS' REPORT

Plan Administrator
Republic Builders Products Hourly Pension Plan
150 East Campus View Boulevard, Suite 250
Columbus, OH 43235

We have audited the accompanying statements of net assets available for plan benefits of Republic Builders Products Hourly Pension Plan (the "Plan") as of December 31, 2009, and the related statements of changes in net assets available for plan benefits for the year then ended, and the supplemental schedule as of December 31, 2009. These financial statements and supplemental schedule are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audit, as of December 31, 2009, in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Plan as of December 31, 2009, and the changes in net assets for the year then ended in conformity with accounting principles generally accepted in the United States of America.

We were engaged to audit the accompanying statement of net assets available for benefits of Republic Builders Products Hourly Pension Plan (the "Plan") as of December 31, 2008, and the related statement of changes in net assets available for benefits for the year then ended. In our report dated July 24, 2009, we did not express an opinion due to the significance of the information that we did not audit as permitted by 29 CFR 2520.103-8, which is summarized in Note 7. The form and content of the information included in the financial statements, other than that derived from the information certified by the former Custodian, 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.

Norman Jones Enlow

Columbus, Ohio
September 21, 2010

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
ASSETS		
Cash	\$ 380,297	\$ 44,004
Investments, at fair value		
Common trust fund	-	415,598
Mutual funds	<u>2,451,343</u>	<u>1,955,655</u>
TOTAL INVESTMENTS	<u>2,451,343</u>	<u>2,371,253</u>
Receivable	<u>46,856</u>	<u>34,181</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 2,878,496</u></u>	<u><u>\$ 2,449,438</u></u>

See notes to financial statements.

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
Years Ended December 31, 2009 and 2008

	<u>2009</u>	<u>2008</u>
CONTRIBUTIONS	\$ 128,732	\$ 128,719
INVESTMENT ACTIVITY		
Interest and dividend income	87,326	163,065
Net appreciation (depreciation) in fair value of mutual funds	<u>354,193</u>	<u>(1,090,870)</u>
TOTAL CONTRIBUTIONS AND INVESTMENT ACTIVITY	570,251	(799,086)
DEDUCTIONS		
Benefit payments	135,291	126,669
Plan administrative expenses	5,902	464
TOTAL DEDUCTIONS	<u>141,193</u>	<u>127,133</u>
(DECREASE) INCREASE IN NET ASSETS AVAILABLE FOR PLAN BENEFITS	429,058	(926,219)
NET ASSETS AVAILABLE FOR PLAN BENEFITS AT BEGINNING OF YEAR	<u>2,449,438</u>	<u>3,375,657</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS AT END OF YEAR	<u><u>\$ 2,878,496</u></u>	<u><u>\$ 2,449,438</u></u>

See notes to financial statements.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

1. DESCRIPTION OF RETIREMENT PENSION PLAN

The following description of the Republic Builders Products Hourly Pension Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan, established January 1, 1975, is a noncontributory defined benefit pension plan covering the hourly employees, including those employees who are members of the United Steelworkers of America Local 8195, of Republic Products Company (the "Company"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Eligibility and Vesting

All employees whose employment is governed by the collective bargaining agreement negotiated by the United Steelworkers of America Local 8195 are included in the Plan as participants after one year of service, as defined by the Plan, and attainment of age 21.

Participants become 100% vested upon completion of five years of service. If a participant terminates employment before completing three years of service, he/she forfeits the right to receive the benefits accumulated, unless the participant has reached age 65.

Pension Benefits

At normal retirement (age 65), participants are entitled to monthly pension benefits based on years of service and specified multipliers, as defined by the Plan. A participant is entitled to reduced monthly pension benefits at the age of 60 with ten years of vesting service.

If the participant is married on the date the benefits are to begin, the participant will automatically receive a joint and 50% survivor annuity, unless otherwise elected. If the participant is single on the date the benefits are to begin, the participant will automatically receive a life annuity, unless otherwise elected.

If the participant is not married, and dies prior to receipt of benefit payments, no death benefit is payable. Participants who become totally and permanently disabled are eligible to receive monthly disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they have completed a six-month waiting period after becoming totally disabled. Disability benefits are paid until normal retirement age, at which time disabled participants begin receiving normal retirement benefits.

Funding Policy

The Company contributes such annual amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to Plan participants. The Plan has met the minimum funding requirements of ERISA. The Company's present intention is to make annual contributions in amounts sufficient to fund the Plan's current year service cost and the initial past service cost plus interest.

Plan Termination

Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions set forth in ERISA. In the event of full or partial termination of the Plan, the accrued benefits of the participants become fully vested.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

1. DESCRIPTION OF RETIREMENT PENSION PLAN (CONTINUED)

Plan Termination (Continued)

Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated Plan benefits will be paid depends on the priority of those benefits, the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (the "PBGC"), and the sufficiency at the time of the Plan's net assets to fund those benefits. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Administrative Expenses

Administrative expenses, including Trustee, actuarial, and audit fees paid by the Plan were \$5,902 and \$464 for the years ended December 31, 2009 and 2008, respectively.

Tax Status

The Plan obtained a determination letter on March 18, 2003, in which the Internal Revenue Service (IRS) stated that the Plan is qualified under Section 401(a) of the Internal Revenue Code (IRC) and, therefore, the related trust is exempt from taxation. Subsequent to this issuance of the determination letter, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan Administrator believes the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan, as amended, is qualified and the related trust is exempt.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Valuation on Investments

The fair value of units owned by the Plan in a common trust fund is based on quoted redemption values on the last business day of the Plan year. Investments in mutual funds are presented at fair value, based on quoted market prices.

Fair Value of Investments

In September 2006, the Financial Accounting Standards Board (FASB) issued Accounting Standards Codification (ASC) 820-10-65, *Fair Value Measurements*. FASB ASC 820-10-65 establishes a framework for measuring fair value under generally accepted accounting principles, clarifies the definition of fair value within that framework, and expands financial statement disclosures about the use of fair value measurements. The financial statement preparation and disclosure provisions are effective for financial statements issued for annual periods beginning after November 15, 2007. The Plan adopted the provisions of FASB ASC 820-10-65 at January 1, 2008.

Estimates

The preparation of financial statements, in conformity with accounting principles generally accepted in the United States of America, requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and disclosures of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Risks and Uncertainties

Contributions to the Plan and the actuarial present value of accumulated Plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, employee compensation, and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term, and due to uncertainties inherent in setting assumptions, that the affect of such changes could be material to the financial statements. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statement of Net Assets Available for Plan Benefits.

Accounting for Uncertainty in Income Taxes

The Plan has adopted FASB ASC 740-10-65, regarding uncertainty in income taxes, as of January 1, 2009. The Plan evaluates all tax positions in conformity with FASB ASC 450 for contingencies, and as such would reserve for any tax positions deemed probable of not being sustained by the IRS. The Plan recognizes tax benefits only to the extent that the Plan believes it is "more likely than not" that its tax positions will be sustained upon IRS examination. The Plan does not have a provision for unpaid federal income taxes (liability for unrecognized tax benefits) related to uncertain tax positions in the balance sheet as it believes all tax positions taken would "more likely than not" be sustained upon IRS examination.

Plan Changes

During the year ended December 31, 2009, the Plan moved the investments from Merrill Lynch to Morgan Stanley.

3. INVESTMENTS

The fair market value of individual assets that represent 5% or more of the Plan's net assets, as of December 31, 2009 and 2008, are as follows:

<u>Investment</u>	<u>2009</u>	<u>2008</u>
PIMCO Total Return Fund	\$ 1,086,525	\$ 955,767
Principal Cash	380,297	-
American Funds Fundamental Investments	311,300	-
American Funds Growth Fund of America	310,815	204,260
American Fund Investment Company of America	297,055	-
American Funds Capital Income Builder	133,912	-
Managers Special Equity Fund	-	304,908
American Century International Growth Fund	-	287,401
Davis New York Venture Fund	-	203,319

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

4. FAIR VALUE

FASB ASC 820-10-65 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unobservable inputs (Level 3 measurement). The three levels of the fair value hierarchy under FASB ASC 820-10-65 are described below:

- Level 1** Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2** Inputs to the valuation methodology include:
 Quoted prices for similar assets or liabilities in active markets;
 Quoted prices for identical or similar assets or liabilities in inactive markets;
 Inputs other than quoted prices that are observable for the asset or liability;
 Inputs that are derived principally from or corroborated by observable market data by correlation or other means;
- If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3** Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

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

The method 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 and 2008.

Description	Fair Value Measurements Reporting Data Using Quoted Prices in Active Markets for Identical Assets (Level 1)	
	2009	2008
Cash	\$ 380,297	\$ 44,044
Common trust fund	-	415,598
Mutual funds	2,451,343	1,955,655

Earnings on the investments held by the Plan were \$87,326 and \$163,065 for the years ended December 31, 2009 and 2008, respectively. Net appreciation for the year ended December 31, 2009 was \$354,193, and net depreciation for the year ended December 31, 2008 was \$1,090,870.

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

5. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated Plan benefits are those future periodic payments, including lump sum distributions, that are attributable, under the Plan's provisions, to the service employees have rendered through the valuation date. Accumulated Plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries or employees who have died, and (c) present employees or their beneficiaries. The accumulated Plan benefits are based on the monthly benefit amount designated by the Plan and in effect at the valuation date. Benefits payable under all circumstances – retirement, death, disability, and termination of employment are included, to the extent they are deemed attributable to employee service rendered through the valuation date.

The actuarial present value of accumulated Plan benefits is that amount which results from applying actuarial assumptions to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment, and was determined by an independent actuary. The significant actuarial assumptions and method underlying the actuarial computations as of December 31, 2009 and 2008 are as follows:

Actuarial cost method – Projected Unit Credit Actuarial Cost Method

Mortality – The RP-2000 projected to 2009 blended annuitant/non-annuitant mortality table

Assumed rate of return – 8% compounded annually for 2009 and 2008

Retirement age – Between ages 60 and 65, according to a set of retirement rates for active members; age 65 for terminated members with vested rights

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits.

6. ACCUMULATED PLAN BENEFITS

An actuary estimates the benefit obligation of accumulated Plan benefits.

The actuarial present value of accumulated Plan benefits of the Plan as of January 1 is as follows:

	<u>2009</u>	<u>2008</u>
Participants currently receiving payments	\$ 996,804	\$ 1,011,036
Other participants	<u>1,841,495</u>	<u>1,687,185</u>
Total vested benefits	2,838,299	2,698,221
Non-vested benefits	<u>44,016</u>	<u>46,987</u>
Total	<u>\$ 2,882,315</u>	<u>\$ 2,745,208</u>

Changes in the actuarial present value of accumulated Plan benefits are as follows at January 1, 2010:

Actuarial present value of accumulated Plan benefits at January 1, 2008	\$ 2,745,208
Benefits accumulated and gains and losses	49,129
Interest due to the decrease in the discount period	214,647
Benefits paid	<u>(126,669)</u>
Actuarial present value of accumulated Plan benefits at January 1, 2009	<u>\$ 2,882,315</u>

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

6. ACCUMULATED PLAN BENEFITS (CONTINUED)

Changes in the projected benefit obligation of accumulated Plan benefits are as follows at December 31, 2009:

Projected benefit obligation at January 1, 2009	\$ 3,463,553
Service cost	94,410
Interest cost	218,138
Actuarial (gain) or loss	143,231
Benefits paid	<u>(135,291)</u>
Projected benefit obligation at December 31, 2009	<u>\$ 3,784,041</u>

7. SUMMARY OF INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

The Plan Administrator has obtained certification from the Trustee that the information provided to the Plan Administrator by the Trustee is complete and accurate in accordance with 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. A summary of information included in the financial statements, which has been certified, is as follows:

	<u>December 31 2008</u>
Cash	\$ 44,004
Investments, at fair value	2,371,253

	<u>December 31 2008</u>
Net appreciation (depreciation) in fair value of investments	\$ (1,090,870)
Investment income	163,065
Benefit payments	126,669
Plan administrative expenses	464

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	<u>2009</u>
Net assets available per the financial statements	\$ 2,878,496
Plus: Cash in transit	100
Net assets available per Form 5500	<u>\$ 2,878,596</u>

The following is a reconciliation of total contributions and investment activity per the financial statements to Form 5500 as of December 31, 2009:

	<u>2009</u>
Total contributions and investment activity per the financial statements	\$ 570,251
Less: Investment activity on the 5500	<u>(3,567)</u>
Total contributions and investment activity per Form 5500	<u>\$ 566,684</u>

**REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
NOTES TO FINANCIAL STATEMENTS**

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)

The following is a reconciliation of total deductions per the financial statements to Form 5500 as of December 31, 2009:

	<u>2009</u>
Total deductions per the financial statements	\$ 141,193
Add: Deemed distributions	1,119
Less: Administrative fees not on the 5500	<u>(5,902)</u>
Total deductions per Form 5500	<u>\$ 136,410</u>

9. SUBSEQUENT EVENTS

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through September 21, 2010, the date the financial statements were available to be issued. No events arose during management's review of subsequent events.

REPUBLIC BUILDERS PRODUCTS HOURLY PENSION PLAN
FORM 5500 PLAN 003 EIN: 52-2187273
December 31, 2009

Schedule H, Part IV, Line 4i - SCHEDULE OF ASSETS HELD AT THE END OF THE YEAR

(a)	(b) Identity of issue	(c) Description of investment	(d) Cost	(e) Current value
	PIMCO	PIMCO Total Return Fund	\$ 1,080,028	\$ 1,086,525
*	Morgan Stanley	Principal Cash	380,297	380,297
	American Funds	American Funds Fundamental Investments	242,511	311,300
	American Funds	American Funds Growth Fund of America	240,574	310,815
	American Funds	American Fund Investment Company of America	244,401	297,055
	American Funds	American Funds Capital Income Builder	117,286	133,912
	American Funds	American Funds Small Capital World	70,844	105,436
	American Funds	American Fund Europacific Growth	57,249	76,479
	American Funds	American Funds Capital World Growth	57,858	72,977
	American Funds	American Funds New Perspective	42,701	56,844
TOTAL ASSETS HELD FOR INVESTMENT PURPOSES			\$ 2,533,749	\$ 2,831,640

* Denotes party-in-interest

The accompanying notes to financial statements are an integral part of this schedule.

See independent auditors' report.