Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110			
101113300	This form is required to be filed for employee benefit plans under sections 104	2009			
Department of the Treasury Internal Revenue Service	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).				
Department of Labor Employee Benefits Security Administration	Complete all entries in accordance with the instructions to the Form 5500.	2000			
Pension Benefit Guaranty Corporation		This Form is Open to Public Inspection			
Part I Annual Report Iden	tification Information				
For calendar plan year 2009 or fiscal		2009			
A This return/report is for:	a multiemployer plan; a multiple-employer plan; or				
	a single-employer plan; a DFE (specify)				
B This return/report is:	the first return/report; the final return/report;				
	an amended return/report; a short plan year return/report (less t	than 12 months).			
C If the plan is a collectively-bargaine	ed plan, check here				
D Check box if filing under:	Form 5558; automatic extension;	the DFVC program;			
	special extension (enter description)				
Part II Basic Plan Inform	nation—enter all requested information				
1a Name of plan KNOWLES ELECTRONICS LLC PEN		1b Three-digit plan number (PN) ▶ 001			
		1c Effective date of plan 07/01/1963			
2a Plan sponsor's name and address (Address should include room or s KNOWLES ELECTRONICS LLC	s (employer, if for a single-employer plan) uite no.)	2b Employer Identification Number (EIN) 36-4316363			
CONNIE GREVE		2c Sponsor's telephone number 630-250-5100			
1151 MAPLEWOOD DRIVE ITASCA, IL 60143	1151 MAPLEWOOD DRIVE ITASCA, IL 60143	2d Business code (see instructions) 335900			

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	CARY CHARLES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

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AD	Plan administrator's name and address (if same as plan sponsor, enter "Same") MINISTRATIVE COMMITTEE KNOWLES ELECTRONICS LLC PENSION PLAN		3b Administrator's EIN 36-2904902			
115	NNIE GREVE 51 MAPLEWOOD DRIVE SCA, IL 60143	3c Administrator's telephone number 630-250-5100				
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 the plan number from the last return/report:	and	4b EIN			
а	Sponsor's name		4c PN			
5	Total number of participants at the beginning of the plan year	5	1085			
6	Number of participants as of the end of the plan year (welfare plans complete only lines 6a, 6b, 6c, and 6d).		• •			
а	Active participants	6a	0			
b	Retired or separated participants receiving benefits	6b	0			
С	Other retired or separated participants entitled to future benefits	6c	0			
d	Subtotal. Add lines 6a, 6b, and 6c	6d	0			
е	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	0			
f	Total. Add lines 6d and 6e	6f	0			
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g				
	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	2			
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7				

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 1A 1C 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	9a Plan funding arrangement (check all that apply)					9b Plan benefit arrangement (check all that apply)				
	(1)		Insurance		(1)		Insurance			
	(2)		Code section 412(e)(3) insurance contracts		(2)		Code section 412(e)(3) insurance contracts			
	(3)	X	Trust		(3)	X	Trust			
	(4)		General assets of the sponsor		(4)		General assets of the sponsor			
10	Check a	ıll ap	10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)							
	a Pension Schedules			b General Schedules						
а	Pensio	n Sc	hedules	b	General	l Sci	hedules			
а	Pensio (1)	n Sci	hedules R (Retirement Plan Information)	b	General (1)	I Sci	hedules H (Financial Information)			
а		n Sci X		b		I Sci				
а	(1)	n Sc X	 R (Retirement Plan Information) MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan 	b	(1)		H (Financial Information)			
а	(1)	n Scl	R (Retirement Plan Information)MB (Multiemployer Defined Benefit Plan and Certain Money	b	(1) (2)	I Sci	H (Financial Information)I (Financial Information – Small Plan)			
а	(1)	n Sci	 R (Retirement Plan Information) MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan 	b	(1) (2) (3)		 H (Financial Information) I (Financial Information – Small Plan) A (Insurance Information) 			

(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Actu This schedule is require Retirement Income Secur	uarial Inform					2009		
Internal Revenue Service Department of Labor Employee Benefits Security Administration	Retirement Income Secur	d to be filed upder a	Single-Employer Defined Benefit Plan Actuarial Information						
Employee Benefits Security Administration	Retirement Income Secur		ection 10	4 of the Employee					
	Intern		SA) and s		•	This Form	n is Open to Public		
		I	nspection						
For colonder plan year 2000 or figeal r		ttachment to Form	5500 or		. 12/31	/2009			
For calendar plan year 2009 or fiscal p Round off amounts to nearest do		72009		and ending	12/31	72009			
Caution: A penalty of \$1,000 will b		s report unless reas	onable ca	use is established					
A Name of plan				B Three-digit					
KNOWLES ELECTRONICS LLC PEN	SION PLAN			plan numbe	r (PN)	•	001		
					<u> </u>				
0.5							/= N N		
C Plan sponsor's name as shown on I KNOWLES ELECTRONICS LLC	line 2a of Form 5500 or 5500-8	5F		D Employer Ide 36-4316363	entificati	on Number	(EIN)		
E Type of plan: 🛛 Single 🗌 Multip	le-A Multiple-B	F Prior year pl	an size:	100 or fewer	101-50	0 X More	than 500		
Part I Basic Information									
1 Enter the valuation date:	Month <u>01</u> Day	Year	2009	_					
2 Assets:									
a Market value					2a		6786376		
b Actuarial value					2b		6786376 ⁷		
3 Funding target/participant count l	breakdown		(1) N	lumber of participa	nts	(2)	Funding Target		
	beneficiaries receiving paymer				456		34529525		
b For terminated vested partic	cipants	3b			444		1794086		
c For active participants:			1						
(1) Non-vested benefits		,	-		-		458749		
					405		1070821		
					185 1085		11166960 63637346		
4 If the plan is at-risk, check the bo	av and complete items (a) and (Π	1000		0000104		
· · · · · · · · · · · · · · · · · · ·	,	. ,		·Ll	40				
 a Funding target disregarding b Funding target reflecting at a 				E E E E E E E E E E E E E E E E E E E	4a				
	risk assumptions, but disregard nsecutive years and disregard				4b				
5 Effective interest rate					5		6.84 %		
6 Target normal cost					6		152302 ²		
Statement by Enrolled Actuary To the best of my knowledge, the information s accordance with applicable law and regulation:	s. In my opinion, each other assumption								
combination, offer my best estimate of anticipa	ated experience under the plan.								
SIGN HERE						10/11/2	2010		
	Signature of actuary					Date			
JAMES M. DERENGOWSKI, A.S.A., E	.A.			_		08-06	555		
Type TOWERS WATSON PENNSYLVANIA,	or print name of actuary INC.				Most re	cent enrollm 312-525	nent number -2500		
191 N. WACKER DRIVE CHICAGO, IL 60606	Firm name			Tele	phone r	number (incl	uding area code)		
	Address of the firm			_					
f the actuary has not fully reflected any		ed under the statute	in comple	eting this schedule	check	the box and	see		
nstructions For Paperwork Reduction Act Notice	and OMB Control Numbers	see the instruction	ns for For	rm 5500 or 5500-9	F.	Sche	⊔ dule SB (Form 5500) 20		

orm 5500) 2009 v.092308.1 (

Part II	Beginning of year carryover and prefunding balances
---------	---

		<u> </u>			(a) (Carryover balance	(b) Prefundi	ng balar	nce
7		0 1 2	er applicable adjustments (Item 13			1974306	50			0
8	Portion used to o	offset prior year's fund	ding requirement (Item 35 from pric	r year)		7067:	39			0
9	Amount remainii	ng (Item 7 minus item	8)			1903632	21			0
10	Interest on item	9 using prior year's ac	ctual return of <u>14.79</u> %			-28154	72			
11	Prior year's exce	ess contributions to be	e added to prefunding balance:							
a Excess contributions (Item 38 from prior year)										0
b Interest on (a) using prior year's effective rate of <u>6.30</u> %										0
	C Total availabl	e at beginning of currer	nt plan year to add to prefunding bala	ance						0
	d Portion of (c)	to be added to prefur	nding balance							0
12	Reduction in bal	ances due to elections	s or deemed elections							
13	Balance at begir	nning of current year (i	item 9 + item 10 + item 11d – item	12)		1622084	19			0
P	art III Fun	ding percentage	S							
14	Funding target a	ttainment percentage						14	8	1.15 %
15	Adjusted funding	g target attainment per	rcentage					15	10	6.64 %
16			rposes of determining whether car					16	11	9.95 %
17	,	0 1	e plan is less than 70 percent of the					17		%
Pa	art IV Con	tributions and lie	quidity shortfalls							
18	Contributions ma	ade to the plan for the	plan year by employer(s) and emp	oloyees:						
(N	(a) Date IM-DD-YYYY)	(b) Amount paid b employer(s)	by (c) Amount paid by employees	(a) Da (MM-DD-Y		(b) Amount paid b employer(s)	У	(c) Amou empl	nt paid b oyees	ру
04	/15/2009	200	00000							
07	//01/2009	200	00000							
10	/15/2009	200	00000							
12	2/21/2009	180	00000							
				Totals Fotol	18(b)	7800	000 18	c)		
19	Discounted emp	loyer contributions – s	see instructions for small plan with	a valuation da	ate after th	he beginning of the year	ar:			
	a Contributions	allocated toward unpa	aid minimum required contribution	from prior yea	rs		а			
	b Contributions	made to avoid restrict	tions adjusted to valuation date				b			
	C Contributions a	allocated toward minimu	um required contribution for current y	rear adjusted to	o valuatior	19 date 19	C		7	484839
20	Quarterly contrib	outions and liquidity sh	nortfalls:							
	a Did the plan h	ave a "funding shortfa	all" for the prior year?					·····>	Yes	No
	b If 20a is "Yes,	" were required quarte	erly installments for the current yea	r made in a ti	mely man	ner?			Yes	No
	C If 20a is "Yes,	" see instructions and	complete the following table as ap	plicable:						
			Liquidity shortfall as of en	nd of Quarter	of this pla					
	(1) 19		(2) 2nd		(3)	3rd		(4) 4tl	ו	
		0		0		0				0

Page 3

Pa	art V Assumptio	ons used to determine for	unding target and target n	ormal cost						
21	Discount rate:									
	a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %		X N/A, full yield curve used				
	70 70 7 b Applicable month (enter code) 7 7 7					1				
22		21b 22	64							
-	Mortality table(s) (see	tirement age	scribed - separate	Substitute						
	23 Mortality table(s) (see instructions) Prescribed - combined Prescribed - separate Substitute Part VI Miscellaneous items									
24	0	•	uarial assumptions for the current p							
25	Has a method change	e been made for the current pla	in year? If "Yes," see instructions	regarding required attach	nment	X Yes No				
26	Is the plan required to	provide a Schedule of Active I	Participants? If "Yes," see instruct	tions regarding required a	attachment.	X Yes No				
27			ding rules, enter applicable code a		27					
_										
		•	m required contributions			0				
			ears		28	0				
29			unpaid minimum required contribu		29					
30	Remaining amount of	f unpaid minimum required cont	tributions (item 28 minus item 29).		30	0				
Ра	rt VIII Minimum	required contribution f	or current year							
31		•	uctions)		31	1523021				
32	Amortization installme	ents:		Outstanding Bala	nce	Installment				
	a Net shortfall amort	ization installment			0	0				
	b Waiver amortization	on installment			0	0				
33			er the date of the ruling letter gran) and the waived amount		33					
34			r/prefunding balances (item 31 + it		34	1523021				
			Carryover balance	Prefunding balar	ice	Total balance				
35	Balances used to offs	set funding requirement	0			0				
36	Additional cash requir	rement (item 34 minus item 35)			36	1523021				
37		•	ntribution for current year adjusted		37	7484839				
38	Interest-adjusted exce	ess contributions for current yes	ar (see instructions)		38	5961818				
39		-	ar (excess, if any, of item 36 over		39	0				
40					40	0				

SCHEDULE C	Service Provide	OMB No. 1210-0110			
	(Form 5500) Department of the Treasury This schedule is required to be filed under section 104 of the Employee				
Internal Revenue Service	Retirement Income Security		This Form is Open to Public Inspection.		
Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	File as an attachm	ent to Form 5500.			
For calendar plan year 2009 or fiscal plan	lan year beginning 01/01/2009	and ending 12/31			
A Name of plan KNOWLES ELECTRONICS LLC PEN		B Three-digit plan number (PN)	▶ 001		
C Plan sponsor's name as shown on I KNOWLES ELECTRONICS LLC	ine 2a of Form 5500	D Employer Identification 36-4316363	on Number (EIN)		
Part I Service Provider Inf	ormation (see instructions)				
plan during the plan year. If a perso answer line 1 but are not required to	money or anything else of monetary value) in on received only eligible indirect compensation or include that person when completing the re	ion for which the plan received the requermainder of this Part.			
a Check "Yes" or "No" to indicate when indirect compensation for which theb If you answered line 1a "Yes," enter	ecciving Only Eligible Indirect Co ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need	mainder of this Part because they receinstructions for definitions and conditions on providing the required disclosures for	ns) 🏼 Yes 🛛 No		
 a Check "Yes" or "No" to indicate when indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect compensation 	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers	mainder of this Part because they receinstructions for definitions and condition on providing the required disclosures for ded (see instructions).	ns) Yes X No		
 a Check "Yes" or "No" to indicate when indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect compensation 	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need	mainder of this Part because they receinstructions for definitions and condition on providing the required disclosures for ded (see instructions).	ns) Yes X No		
 a Check "Yes" or "No" to indicate when indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect competition (b) Enter national (b) Enter national	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need	mainder of this Part because they recein instructions for definitions and condition on providing the required disclosures for ded (see instructions). rided you disclosures on eligible indirect	ns) Yes No		
 a Check "Yes" or "No" to indicate when indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect competition (b) Enter national (b) Enter national (b) 	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need ame and EIN or address of person who prov	mainder of this Part because they recein instructions for definitions and condition on providing the required disclosures for ded (see instructions). rided you disclosures on eligible indirect	ns) Yes No or the service providers who t compensation		
 a Check "Yes" or "No" to indicate where indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect competitive (b) Enter national (b) Enter na	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need ame and EIN or address of person who prov	rided you disclosure on eligible indirect	ns)		
 a Check "Yes" or "No" to indicate where indirect compensation for which the b If you answered line 1a "Yes," enter received only eligible indirect competitive (b) Enter national (b) Enter na	ther you are excluding a person from the rer plan received the required disclosures (see r the name and EIN or address of each pers ensation. Complete as many entries as need ame and EIN or address of person who prov	rided you disclosure on eligible indirect	ns)		

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

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

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

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

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

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

CONTRACT ADMINISTRATOR

(b)	(c)	(d)	(e)	(f)	(g)	(h)				
Service Code(s)	Relationship to employer, employee	Enter direct	Did service provider receive indirect	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect	Did the service provider give you a formula instead of an amount or				
12		0	Yes 🗌 No 🔀	Yes No		Yes 🗌 No 🗌				
(a) Enter name and EIN or address (see instructions)										
WELLS FA	WELLS FARGO									

94-1347393

(b)	(c)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee organization, or person known to be a party-in-interest	Enter direct compensation paid by the plan. If none, enter -0	Did service provider receive indirect	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	Did the service provider give you a formula instead of an amount or
21 28		326072	Yes 🗌 No 🛛	Yes 🗌 No 🗌		Yes 🗌 No 🗌
		(a) Enter name and EIN or	address (see instructions)		

TOWERS PERRIN

23-1159630

(b)	(C)	(d)	(e)	(f)	(g)	(h)
Service Code(s)	Relationship to employer, employee organization, or person known to be a party-in-interest	by the plan. If none,	Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0	Did the service provider give you a formula instead of an amount or estimated amount?
11 70		69075	Yes 🗌 No 🛛	Yes 🗌 No 🗌		Yes 🗌 No 🗌

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

DYKEMA GOSSET

38-1446628

(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'
29		21723	Yes 🗌 No 🛛	Yes 🗌 No 🗌		Yes 🗌 No 🗌
MILLER CO	OOPER & CO.	(a) Enter name and EIN or	address (see instructions)		
36-2897372	2					
(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 formula instead c an amount or estimated amount
0		12900				

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

Yes No

Yes No X

Yes No

		(1)	()	(4)		(1)
(b)	(C)	(d)	(e)	(f)	(g)	(h)
Service	Relationship to	Enter direct	Did service provider	Did indirect compensation	Enter total indirect	Did the service
Code(s)	employer, employee		receive indirect	include eligible indirect	compensation received by	provider give you a
			compensation? (sources	compensation, for which the	service provider excluding	formula instead of
	person known to be	enter -0	other than plan or plan	plan received the required	eligible indirect	an amount or
	a party-in-interest		sponsor)	disclosures?	compensation for which you	estimated amount?
					answered "Yes" to element	
					(f). If none, enter -0	
			Yes 🗌 No 🗍			
			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	formula used to determine	compensation, including any the service provider's eligibility
	for or the amount of the	he indirect compensation.
(a) Enter service provider name as it appears on line 2	(b) Service Codes	(c) Enter amount of indirect
	(see instructions)	compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect of	compensation, including any
	formula used to determine	the service provider's eligibility he indirect compensation.
(a) Enter service provider name as it appears on line 2	(b) Service Codes	(C) Enter amount of indirect
	(see instructions)	compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect of	compensation, including any
	formula used to determine	the service provider's eligibility he indirect compensation.

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Page o-	1

Part II Service Providers Who Fail or Refuse to	Provide Inform	nation
4 Provide, to the extent possible, the following information for ea this Schedule.	ach service provide	r who failed or refused to provide the information necessary to complete
(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

Page	7-	1
i ugo	•	

Part III	Termination Information on Accountants and Enrolled (complete as many entries as needed)	d Actuaries (see instructions)
a Nam		b EIN:
C Posi	tion:	
d Add	ress:	e Telephone:
Explanat	ion:	
a Nam	¢.	b EIN:
C Posi		
d Add		e Telephone:
Explanat	ion:	
∟лріана		
a Nam	e:	b EIN:
C Posi	tion:	
d Add	ess:	e Telephone:
Explanat	ion:	
a Nam		b EIN;
C Posi		O Telephone:
d Addı	ess.	e Telephone:
Explanat	ion:	

а	Name:	b EIN;
С	Position:	
d	Address:	e Telephone:

Explanation:

SCHEDULE D	SCHEDULE D DFE/Participating Plan Information (Form 5500)				
Department of the Treasury Internal Revenue Service	This schedule is Retir	2009			
Department of Labor Employee Benefits Security Administration		File as an attachment to Form 5500.		This Form is Open to Public Inspection.	
For calendar plan year 2009 or fiscal	l plan year beginning	01/01/2009	and ending 12/3	31/2009	
A Name of plan KNOWLES ELECTRONICS LLC PENS	SION PLAN		B Three-digit plan numb		
C Plan or DFE sponsor's name as she KNOWLES ELECTRONICS LLC	own on line 2a of Form	n 5500	D Employer lo 36-431636	dentification Number (EIN)	
	entries as needed	CTs, PSAs, and 103-12 IEs (to be c I to report all interests in DFEs)	completed by pl	ans and DFEs)	
b Name of sponsor of entity listed in					
C EIN-PN 53-0257888-100	d Entity M	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru		0	
a Name of MTIA, CCT, PSA, or 103-	·12 IE:				
b Name of sponsor of entity listed in					
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru			
a Name of MTIA, CCT, PSA, or 103-	-12 IE:				
b Name of sponsor of entity listed in	(a):	-			
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru			
a Name of MTIA, CCT, PSA, or 103-	·12 IE:				
b Name of sponsor of entity listed in	(a):				
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru			
a Name of MTIA, CCT, PSA, or 103-	·12 IE:				
b Name of sponsor of entity listed in	(a):				
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru	, ,		
a Name of MTIA, CCT, PSA, or 103-	·12 IE:				
b Name of sponsor of entity listed in	(a):				
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru			
a Name of MTIA, CCT, PSA, or 103-	·12 IE:				
b Name of sponsor of entity listed in	(a):				
C EIN-PN	d Entity code	e Dollar value of interest in MTIA, CC 103-12 IE at end of year (see instru-		Schedule D (Form 5500) 2	

s, ons for Form 5500.

Schedule D (Form 5500)	2009	Page 2- 1					
a Name of MTIA, CCT, PSA, or 103-12 IE:							
b Name of sponsor of entity listed in (a):							
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-12 IE:							
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					
a Name of MTIA, CCT, PSA, or 103-	a Name of MTIA, CCT, PSA, or 103-12 IE:						
b Name of sponsor of entity listed in	(a):						
C EIN-PN	d Entity code	Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)					

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F	Part II	Information on Participating Plans (to be completed by DFEs) (Complete as many entries as needed to report all participating plans)		
а	Plan na			
b	Name o plan spo		С	EIN-PN
а	Plan na	ne		
b	Name o plan spo		С	EIN-PN
а	Plan na	ne		
b	Name o plan spo		С	EIN-PN
а	Plan na	ne		
b	Name o plan spo		С	EIN-PN
а	Plan na	ne		
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
а	Plan na	ne		
b	Name o plan spo		С	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		C	EIN-PN
	Plan na			
b	Name o plan spo		С	EIN-PN

SCHEDULE H	Financial Information					OMB No. 1210-0110			
(Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed u Retirement Income Security Act of 1974 Internal Revenue C File as an attachm		2009 This Form is Open to Public						
Pension Benefit Guaranty Corporation For calendar plan year 2009 or fiscal p	l Dan year beginning 01/01/2009		and	ending 12/31	/2009	Inspectio	n		
A Name of plan KNOWLES ELECTRONICS LLC PEN			and	B Three-diq plan num	git	•	001		
C Plan sponsor's name as shown on line 2a of Form 5500 KNOWLES ELECTRONICS LLC 36-431						er Identification Number (EIN) 363			
the value of the plan's interest in a lines 1c(9) through 1c(14). Do not benefit at a future date. Round off	Statement abilities at the beginning and end of the plan commingled fund containing the assets of m enter the value of that portion of an insurance amounts to the nearest dollar. MTIAs, Co Es also do not complete lines 1d and 1e. See	nore than one e contract wh CTs, PSAs, a	plan on a nich guarar nd 103-12	line-by-line basi itees, during this	s unless t s plan yea	he value is re r, to pay a spe	portable on ecific dollar		
A	ssets		(a) B	eginning of Yea	r	(b) End	of Year		
a Total noninterest-bearing cash		1a							
b Receivables (less allowance for do	pubtful accounts):								
(1) Employer contributions		1b(1)							
(2) Participant contributions		1b(2)							
(3) Other		1b(3)			1364		0		
	e money market accounts & certificates	1c(1)		402	26818		0		
(2) U.S. Government securities		1c(2)							
(3) Corporate debt instruments (other than employer securities):								
(A) Preferred		1c(3)(A)							
(B) All other		1c(3)(B)							
(4) Corporate stocks (other than	employer securities):								
(A) Preferred		1c(4)(A)							
(B) Common		1c(4)(B)							
(5) Partnership/joint venture inter	ests	1c(5)							
(6) Real estate (other than emplo	over real property)	1c(6)							
(7) Loans (other than to participa	nts)	1c(7)							
(8) Participant loans		1c(8)							
	collective trusts	1c(9)							
(10) Value of interest in pooled se	parate accounts	1c(10)							
(11) Value of interest in master tru	st investment accounts	1c(11)		6383	35579		0		
(13) Value of interest in registered	vestment entities investment companies (e.g., mutual	1c(12) 1c(13)							
	nce company general account (unallocated	1c(14)							
		10(14)							

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

1d	Employer-related investments:		(a) Beginning of Year	(b) End of Year
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
е	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	67863761	0
	Liabilities			
g	Benefit claims payable	1g	2927	0
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	2927	0
	Net Assets			
I	Net assets (subtract line 1k from line 1f)	11	67860834	0

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
а	Contributions:			
	(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	7800000	
	(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)		7800000
b	Earnings on investments:			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1137	
	(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)		1137
	(2) Dividends: (A) Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		

			(a) Amount	(b) Total
2b	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
	(6) Net investment gain (loss) from common/collective trusts	2b(6)		
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)		3872722
	(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)		
С	Other income	2c		
d	Total income. Add all income amounts in column (b) and enter total	2d		11673859
	Expenses			
е	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3775302	
	(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)		3775302
f	Corrective distributions (see instructions)	2f		
		2g		
	Interest expense	2h	·	
i	Administrative expenses: (1) Professional fees	2i(1)	121858	
	(2) Contract administrator fees	2i(2)		
	(3) Investment advisory and management fees	2i(3)	293270	
	(4) Other	2i(4)	53177	
	(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		468305
i	Total expenses. Add all expense amounts in column (b) and enter total	2j		4243607
,	Net Income and Reconciliation	-		
k	Net income (loss). Subtract line 2j from line 2d	2k		7430252
ī	Transfers of assets:		-	
•	(1) To this plan	2l(1)		
	(2) From this plan	21(2)		75291086
Ра	art III Accountant's Opinion			
	Complete lines 3a through 3c if the opinion of an independent qualified public ac attached.	countant is	attached to this Form 5500. Comp	olete line 3d if an opinion is not
a ⁻	The attached opinion of an independent qualified public accountant for this plan	is (see instr	ructions):	
	(1) Unqualified (2) Qualified (3) 🛛 Disclaimer (4)	Adverse		
b	Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8	8 and/or 10	3-12(d)?	X Yes No
C	Enter the name and EIN of the accountant (or accounting firm) below:			
	(1) Name: MILLER COOPER & CO. LTD		(2) EIN: 36-2897372	
d ⁻	The opinion of an independent qualified public accountant is not attached becaund (1) This form is filed for a CCT, PSA, or MTIA. (2) It will be attach		ext Form 5500 pursuant to 29 CFR	2520.104-50.

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Pa	rt IV Compliance Questions				
4	CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.	4f, 4g,	4h, 4k, 4ı	m, 4n, or 5.	
	During the plan year:		Yes	No	Amount
а	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		x	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		x	
С	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.)	40 40		x	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		×	
е	Was this plan covered by a fidelity bond?	4e	X		2000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		x	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	x		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k	Х		
Т	Has the plan failed to provide any benefit when due under the plan?	41		Х	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			
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) transferred. (See instructions.)	, identi	fy the pla	n(s) to which	assets or liabilities were
	5b(1) Name of plan(s)			5b(2) EIN(s)	5b(3) PN(s)

	SCH	EDULE R	R	etirement	Plan Inform	ation				OMB No.	12′	10-0110)	<u> </u>
(Form 5500) Department of the Treasury This schedule is required to be filed under section 104 and 4065 of the								e		20	00	9		
	Internal	Revenue Service			Security Act of 1974		ectio	on						
E	File as an attachment to Form 5500.									Form is Open to Public Inspection.				
For		it Guaranty Corporation an year 2009 or fiscal p	lan vear beginning	01/01/2009		and end	lina	12/31	/2009					
AN	lame of plar						3 1	Three-digi plan num						
						-		(PN)	•	0	01			
		's name as shown on li CTRONICS LLC	ine 2a of Form 550	0		C	DE	Employer 36-4316		ation Nu	mbe	er (EIN	I)	
		stributions to distributions relate	only to normante	of honofite duri	ng the plan year									
_						10 - 1 - 1 - 1								
1		e of distributions paid in s						1						
2		EIN(s) of payor(s) who p o paid the greatest dolla			participants or bene	ficiaries during	the	<u>-</u>	ore thar	n two, en	ter	EINs o	of the	two
	EIN(s):	41-6257133												
	Profit-sha	ring plans, ESOPs, an	nd stock bonus pl	ans, skip line 3.										
3		participants (living or d						3						5
Pa		Funding Informati		not subject to the i	minimum funding rec	uirements of s	ectio	on of 412	of the Ir	iternal R	eve	nue Co	ode o	r
4	Is the plan	administrator making an	election under Code	e section 412(d)(2)	or ERISA section 302	2(d)(2)?			Yes	Х	N	lo		N/A
	If the plan	is a defined benefit p	plan, go to line 8.											
5		of the minimum funding see instructions and en				Date: Month _			Day		Y	ear		
		npleted line 5, comple							schedu	le.				
6		he minimum required co												
		he amount contributed			-			6b						
		ct the amount in line 6b a minus sign to the left						····· 6c						
_	•	npleted line 6c, skip li												
7	Will the mi	nimum funding amount	t reported on line 60	c be met by the fu	nding deadline?			[Yes		N	lo		N/A
8	automatic	e in actuarial cost metho approval for the change ange?	e or a class ruling le	etter, does the pla	n sponsor or plan ad	ministrator agr	ree	[Yes	Γ	N	lo	×	N/A
Pa	art III 🛛 🖌	Amendments									-			
9	If this is a	defined benefit pension ncreased or decreased			U 1								_	
De	box(es). If	no, check the "No" box							rease		oth)	XN	No
Pa	rt IV	ESOPs (see instrustion skip this Part.	uctions). If this is no	ot a plan describe	a under Section 409	(a) or 4975(e)(/) of	ine Inter	nal Reve	enue Coo	Je,			
10	Were unal	located employer secur	rities or proceeds fr	rom the sale of un	allocated securities u	used to repay a	any e	exempt lo	an?			Yes		No
11	_	the ESOP hold any pre									Ш	Yes		No
		ESOP has an outstand instructions for definitio										Yes		No
12	Does the B	SOP hold any stock th	nat is not readily tra	dable on an estab	lished securities ma	rket?						Yes		No
For	Paperwork	Reduction Act Notice	e and OMB Contro	ol Numbers, see	the instructions for	Form 5500.			S	Schedule	R	(Form) 2009 2308.1

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۷	09	9	2	3	0	8	.'

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Pa	Part V Additional Information for Multiemployer Defined Benefit Pension Plans									
13			ollowing information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in							
·	aoi a		See instructions. Complete as many entries as needed to report all applicable employers.							
	b	EIN C Dollar amount contributed by employer								
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box							
	ŭ	and s	ee instructions regarding required attachment. Otherwise, enter the applicable date.) Month Day Year							
	е	<i>comp</i> (1)	ibution rate information (<i>If more than one rate applies, check this box</i> and see <i>instructions regarding required attachment. Otherwise,</i> <i>lete items 13e(1) and 13e(2).)</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):							
		()								
	а		e of contributing employer							
	b	EIN	C Dollar amount contributed by employer							
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box							
	e	<i>comp</i> (1)	ibution rate information (<i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>lete items 13e(1) and 13e(2).)</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):							
	а	Name	e of contributing employer							
	b	EIN	C Dollar amount contributed by employer							
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box							
	e	<i>comp</i> (1)	ibution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, lete items 13e(1) and 13e(2).) Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):							
	а	Name	e of contributing employer							
	b	EIN	C Dollar amount contributed by employer							
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box							
	e	Contri comp (1)	ibution rate information (<i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>Idete items 13e(1) and 13e(2).</i> Contribution rate (in dollars and cents) Base unit measure: Hourly Weekly Unit of production Other (specify):							
	а	Name	e of contributing employer							
	b	EIN	C Dollar amount contributed by employer							
	d		collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box							
	e	Contribution rate information (<i>If more than one rate applies, check this box</i> 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):								
	а	Name	e 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							
	e	Contri comp (1)	ibution rate information (<i>If more than one rate applies, check this box</i> and see instructions regarding required attachment. Otherwise, <i>Idete items 13e(1) and 13e(2).</i>) Contribution rate (in dollars and cents) 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:

		44-						
	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 ma employer contribution during the current plan year to:	ike an						
	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	16b						
	assessed against such withdrawn employers	001						
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, c supplemental information to be included as an attachment.							
Pa	art VI Additional Information for Single-Employer and Multiemployer Defined Benef	it Pens	ion 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: <u>49</u>% Investment-Grade Debt: <u>41</u>% High-Yield Debt: <u>0.0</u>% Real Estate: <u>10</u>% Other: <u>0.0</u>% 							
	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 18-18	21 years	21 years or more					
	C What duration measure was used to calculate item 19(b)?							

Knowles Electronics, LLC Pension Plan

Financial Statements and Independent Auditors' Report

December 31, 2009 and 2008

CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	3
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6 - 14



ACCOUNTANTS AND CONSULTANTS

INDEPENDENT AUDITORS' REPORT

Administrative Committee Knowles Electronics, LLC Pension Plan Itasca, Illinois

We were engaged to audit the accompanying statements of net assets available for benefits of the Knowles Electronics, LLC Pension Plan as of December 31, 2009 and 2008, and the statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's Administrator.

As permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the investments, investment transactions, and related income, which were certified by Wells Fargo Bank, N.A., the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained certifications from the trustee as of and for the years ended December 31, 2009 and 2008 that the information provided to the Plan Administrator by the trustee is complete and accurate.

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

As further discussed in Note H to the financial statements, the Board of Managers of Knowles Electronics, LLC, the Plan Sponsor, voted on December 27, 2009 to merge the Plan into the Dover Corporation Pension Plan. In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting from the ongoing plan basis used in presenting the 2008 financial statements to the liquidation basis used in presenting the 2009 financial statements.

MILLER, COOPER & CO., LTD.

Miller, Couper & Co., Ltd.

Certified Public Accountants

Deerfield, Illinois October 12, 2010



FINANCIAL STATEMENTS

Knowles Electronics, LLC Pension Plan STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS December 31, 2009 and 2008

ASSETS	 2009	_	2008
Investments, at fair value	\$ -	\$	67,863,761
LIABILITIES			
Benefits payable	 -	_	2,927
NET ASSETS AVAILABLE FOR BENEFITS, AT FAIR VALUE	\$ -	\$_	67,860,834

The accompanying notes are an integral part of these statements.

Knowles Electronics, LLC Pension Plan STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years ended December 31, 2009 and 2008

	_	2009	2008
Additions to net assets attributed to: Net appreciation in value of investments Interest and dividends Employer contributions	\$	1,821,811 2,052,048 7,800,000	\$ 2,124,587 4,000,000
Total additions	_	11,673,859	6,124,587
Deductions from net assets attributed to: Net depreciation in value of investments Benefits paid to participants Administrative expenses Transfer of net assets to another qualified plan (Note H)	_	3,775,302 468,305 75,291,086	13,029,189 3,720,925 520,690
Total deductions	_	79,534,693	17,270,804
NET DECREASE		(67,860,834)	(11,146,217)
Net assets available for benefits, beginning of year	_	67,860,834	79,007,051
Net assets available for benefits, end of year	\$	_	\$ 67,860,834

The accompanying notes are an integral part of these statements.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Knowles Electronics, LLC Pension Plan (the Plan) provides only general information. Interested parties should refer to the plan document for a more complete description of the Plan's provisions.

1. General

The Plan was a noncontributory, defined benefit pension plan established to provide retirement benefits for eligible employees of Knowles Electronics, LLC and its subsidiaries, past and present (the Company). On August 22, 2005, the Company was acquired by Dover Corporation (Dover). After the acquisition, the Plan remained a single employer plan for eligible employees of Knowles Electronics, LLC. Employees were eligible to participate in the Plan as of the date the employee completed one year of continuous service. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). As discussed further in Note H, the Plan's net assets were merged into the Dover Corporation Pension Plan effective December 31, 2009.

Effective January 1, 2002, the Plan was converted to a cash balance plan for active participants who were under the age of 40 on May 1, 2002 and for all new participants after that date, regardless of age. As of December 31, 2001, credited service was frozen, and cash balance credits began to accumulate, as of January 1, 2002, for these participants. For participants who were over the age of 40 on May 1, 2002, benefits continued to accrue according to the final average pay formula.

The cash balance plan reports accrued benefits to participants in the form of record keeping accounts that track the participant's cash balance benefit and is not a separately funded or segregated account. Account balances were increased annually by a percentage of the employee's compensation plus an investment interest credit.

2. Pension Benefits

The normal retirement date of a participant was the first day of the month on or immediately after the date the participant attained age 65, as long as the participant was vested.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

2. Pension Benefits (Continued)

Upon retirement, various benefit options were available under the final average pay and cash balance formulas. Upon termination, retirement, death, or disability, participants with a vested benefit between \$1,000 and \$10,000 could elect to receive a lump-sum distribution. If the vested benefit was less than \$1,000, the Administrative Committee, at its discretion, could elect to distribute the accrued benefit to the participant in a lump sum. Vested accrued benefits under the cash balance formula could be distributed in a lump sum to the terminated participant or deferred until retirement.

A participant was eligible for an early retirement pension if the employee was terminated on or after completion of at least five years of service and had attained 55 years of age. The monthly pension was the participant's accrued benefit beginning at the normal retirement date. Pension payments commencing prior to age 65 were reduced on an actuarially equivalent basis. A participant was eligible for a deferred, vested retirement pension if his/her employment was terminated after he/she has completed at least three years of vesting service. The monthly pension was the participant's accrued benefit, but payments are deferred until the normal retirement date.

3. <u>Vesting</u>

As of January 1, 2008, participants with service subsequent to December 31, 2007 became 100% vested after three years of service. Prior to this date, participants terminated prior to January 1, 2008 became 100% vested after five years of service.

4. Administrative Expenses

Administrative expenses were paid by the Plan. No administrative expenses were paid by the Company during 2009 or 2008.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

1. Basis of Accounting

Associated with the Plan's merger, as further discussed in Note H, the Plan has changed its basis of accounting from the ongoing plan basis used in presenting the 2008 financial statements, to the liquidation basis used in presenting the 2009 financial statements.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

2. Fair Value Measurements

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820 (formerly known as FASB Statement No. 157), *Fair Value Measurements and Disclosures*, 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 unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

Level 1	Inputs to the valuation methodology are unadjusted quoted market 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 the following: * 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.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

2. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for the Plan's investments measured at fair value at December 31, 2009 and 2008.

Net cash equivalents, equity funds, and fixed income funds: Valued at the net asset value (NAV) of shares held by the plan at year-end.

Common stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

Other financial instruments: The carrying amounts of other financial instruments, including benefits payable, approximate fair value due to the short maturity of these instruments.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's investments in the underlying master trust assets as of December 31, 2008:

		Plan Assets at Fair Value as of December 31, 2008						
		Level 1		Level 2		Level 3		Total
Net cash equivalents	\$	512,206	\$	-	\$	-	\$	512,206
Equity funds		37,227,777		-		-		37,227,777
Common stock		2,544,045		-		-		2,544,045
Fixed income funds	_	27,579,733		-		-	_	27,579,733
Total assets at fair value	\$	67,863,761	\$	-	\$	-	\$	67,863,761

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

3. Use of Estimates

In preparing the Plan's financial statements, management is required to make estimates and assumptions that affect the reported amounts of net assets, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates. The Plan used an independent actuary to determine the actuarial present value of accumulated plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value reported in the accompanying financial statements.

4. Payment of Benefits

Benefits were recorded when paid.

5. <u>New Accounting Pronouncements</u>

a. <u>Generally Accepted Accounting Principles</u>

In June 2009, the FASB issued ASC 105, *Generally Accepted Accounting Principles*, which establishes the FASB ASC as the sole source of authoritative generally accepted accounting principles ("GAAP"). Pursuant to the provisions of FASB ASC 105, the Plan has updated references to GAAP in its financial statements issued for the year ended December 31, 2009. The adoption of FASB ASC 105 did not impact the Plan's financial position or results of operations.

b. Accounting for Uncertainty in Income Taxes

The FASB issued ASC 740 (formerly known as FASB Interpretation No. 48), *Income Taxes*. The Plan adopted this new guidance for the year ended December 31, 2009. Plan management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

NOTE C - FUNDING POLICY

The Company's funding policy was to make contributions to the Plan in amounts necessary to provide for employees' retirement benefits. The Company made contributions of \$7,800,000 for the year ended December 31, 2009 and contributions of \$4,000,000 for the year ended December 31, 2008. Participant deferrals were not allowed by the Plan.

NOTE D - ACCUMULATED PLAN BENEFITS

Accumulated plan benefits were those future periodic payments, including lump-sum distributions, that were attributable under the Plan's provisions to the service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries and (2) present employees or their beneficiaries. The actuarial present value of accumulated plan benefits was determined by an independent actuary and was that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The actuarial present value of accumulated benefits as of January 1, 2009 and 2008 was as follows:

	_	2009		2008
Vested benefits				
Participants and/or beneficiaries currently receiving benefits	\$	32,726,804	\$	30,478,711
Other participants		23,443,412		22,363,542
	-		-	
		56,170,216		52,842,253
Nonvested benefits	_	1,517,017	_	1,470,699
	_			
Total actuarial present value of accumulated plan benefits	\$	57,687,233	\$	54,312,952

NOTE D - ACCUMULATED PLAN BENEFITS (Continued)

The changes in the actuarial present value of the Plan's accumulated plan benefits for 2008 were as follows:

Actuarial present value of accumulated plan benefits at January 1, 2008	\$ 54,312,952
Increase (decrease) during the year attributable to:	
Benefits accumulated and net gains	1,375,664
Interest due to decrease in the discount period	4,199,062
Assumption changes	1,520,480
Benefits paid	 (3,720,925)
Actuarial present value of accumulated plan benefits at January 1, 2009	\$ 57,687,233

The significant assumptions used in the January 1, 2009 and 2008 valuations were:

- a. Mortality: RP 2000 with generational projection.
- b. Retirement Age: Average retirement age of 64.
- c. Investment return: 7.75% per annum for 2009 and 8.0% per annum for 2008.

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.

NOTE E - INVESTMENT IN MASTER TRUST

In 2006, the Plan purchased an investment in the Dover Master Trust which was established for the investment of assets of the Plan and other Dover-sponsored retirement plans. Each participating retirement plan has an undivided interest in the assets of the Master Trust. The assets of the Master Trust are held by Wells Fargo Bank, N.A., the trustee. Investment income and administrative expenses relating to the Master Trust are allocated to the individual plans based upon average monthly balances invested by each plan. As discussed in Note H, the Plan merged with the Dover Corporation Pension Plan, whose sole investment was also the Dover Master Trust as of December 31, 2009. As such, the Plan did not have an allocation of the Dover Master Trust as of December 31, 2009.

NOTE F - INVESTMENTS

All investment information, including investments held at December 31, 2009 and 2008, net appreciation (depreciation) in the fair value of investments, and interest and dividends for the years then ended, was obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by Wells Fargo Bank, N.A., the trustee. Accordingly, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the investment information certified by the trustee.

The following table presents the fair value of the investments in the Plan. Individual investments representing more than 5% of the Plan's net assets as of December 31, 2009 and/or 2008 are separately identified.

 2009		2008
\$ -	\$	67,863,761
\$ -	\$	67,863,761
\$ \$	¢	\$\$_

NOTE G - INCOME TAX STATUS

The Plan obtained its latest determination letter on July 11, 2003, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable provisions of the Internal Revenue Code.

NOTE H - MERGER

Effective December 31, 2009, the Plan was merged into the Dover Corporation Pension Plan, which has similar attributes and is sponsored by Dover Corporation, the Company's parent. The plan merger was performed in compliance with Section 414(1) of the Internal Revenue Code. Effective December 31, 2009, all participants became participants in the Dover Corporation Pension Plan and the Plan ceased to exist. All future eligible employees of the Company will participate in the Dover Corporation Pension Plan. As both plans' sole investment was the Dover Master Trust, the Plan's interest in the Dover Master Trust, totaling \$75,291,086 at December 31, 2009, was allocated to the Dover Corporation Pension Plan. Interested parties should refer to the related plan merger agreement and the plan document of the new plan.

NOTE I - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events through October 12, 2010, the date that these financial statements were available to be issued. Plan management has determined that no events or transactions have occurred subsequent to the statement of net assets available for benefits date that require disclosure in the financial statements.

▶ For Privacy Act and Paperwork Reduction Act Notice, see instructions on page 3.

File With IRS Only

Part I Identification

Name of filer, plan administrator, or plan sponsor (see instructions)		B Filer's identifying number (see instructions). Image: Description of the second secon							
Number, street, and room or suite no. (If a P.O. box, see instructions)									
City or town, state, and ZIP code	Social securit	y number (SSN)							
Plan name	Plan	Plan year ending—							
	number	MM	DD	ΥΥΥΥ					
1									
2									
3									
	Number, street, and room or suite no. (If a P.O. box, see instructions)	Number, street, and room or suite no. (If a P.O. box, see instructions)	Number, street, and room or suite no. (If a P.O. box, see instructions) Employer identification number Social security number (SSN) Plan name Plan number MM Plan name Image: Note that the security of the security number (SSN) Image: Note that the security number (SSN) Image: Note the security of the security number (SSN) 1 Image: Note the security of the security	Number, street, and room or suite no. (If a P.O. box, see instructions) Employer identification number (EIN). Social security number (SSN) Plan name Plan mame MMM DD Image: Image: Image:					

Part II Extension of Time to File Form 5500 or Form 5500-EZ (see instructions)

1 I request an extension of time until _____/ to file Form 5500 or Form 5500-EZ.

The application **is automatically approved** to the date shown on line 1 (above) if: (a) the Form 5558 is filed on or before the normal due date of Form 5500 or 5500-EZ for which this extension is requested, and (b) the date on line 1 is no more than $2\frac{1}{2}$ months after the normal due date.

You must attach a copy of this Form 5558 to each Form 5500 and 5500-EZ filed after the due date for the plans listed in C above.

Note. A signature is not required if you are requesting an extension to file Form 5500 or Form 5500-EZ.

Part III Extension of Time to File Form 5330 (see instructions)

2	I request an extension of time until/ / to file Form 5330. You may be approved for up to a six (6) month extension to file Form 5330, after the normal due date of Form 5330.
а	Enter the Code section(s) imposing the tax
b	Enter the payment amount attached
с 3	For excise taxes under section 4980 or 4980F of the Code, enter the reversion/amendment date

Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made on this form are true, correct, and complete, and that I am authorized to prepare this application.

Date >

General Instructions Purpose of Form

Use Form 5558 to apply for a one-time extension of time to file Form 5500, Annual Return/Report of Employee Benefit Plan; Form 5500-EZ, Annual Return of One-Participant (Owners and Their Spouses) Retirement Plan; or Form 5330, Return of Excise Taxes Related to Employee Benefit Plans.



An extension of time to file does not extend the time to pay the tax due. Any tax CAUTION due must be paid with this

application. Additionally, interest is charged on taxes not paid by the due date even if an extension of time to file is aranted.

Where To File

File Form 5558 with the Internal Revenue Service Center, Ogden, UT 84201-0027.

Private Delivery Services. You can use certain private delivery services designated by the IRS to meet the "timely mailing treated as timely filing/paying" rule for tax returns and payments. If you use a private delivery service designated by the IRS (rather than the U.S. Postal Service) to send your return, the postmark date generally is the date the private delivery service records in its database or marks on the mailing label. The private delivery service can tell you how to get written proof of this date.

The following are designated private delivery services:

• DHL Express (DHL): DHL Same Day Service, DHL Next Day 10:30 am, DHL Next Day 12:00 pm, DHL Next Day 3:00 pm, and DHL 2nd Day Service.

• Federal Express (FedEx): FedEx Priority Overnight, FedEx Standard Overnight, FedEx 2 Day, FedEx International Priority, and FedEx International First.

 United Parcel Service (UPS): UPS Next Day Air, UPS Next Day Air Saver, UPS 2nd Day Air, UPS 2nd Day Air A.M., UPS Worldwide Express Plus, and UPS Worldwide Express.

Specific Instructions Part I. Identification

A. Name and Address

Enter your name and address in the heading if you are a single employer requesting an extension of time to file the Form 5500, Form 5500-EZ or

the Form 5500, Form 5500-EZ or Form 5330. If you are filing for other than a single employer, enter the plan administrator's or plan sponsor's name and address on the application. The plan sponsor listed on this application should be the same as the plan sponsor listed on the annual return/report filed for the plan.

Include the suite, room, or other unit number after the street address. If the Post Office does not deliver mail to the street address and you have a P.O. box. show the box number instead of the street address.

B. Filer's Identifying Number

Employer Identification Number (EIN). Enter the nine-digit EIN assigned to the employer for all applications filed for Form 5500 or Form 5500-EZ. Also enter the EIN for applications filed for Form 5330 (see Social Security Number (SSN) below for exceptions).

If the employer does not have an EIN, the employer must apply for one. An EIN can be applied for:

 Online by clicking the Online EIN Application link at www.irs.gov. The EIN is issued immediately once the application information is validated.

By telephone at 1-800-829-4933.

• By fax using the FAX-TIN numbers for your state listed on page 2 of the Instructions for Form SS-4.

 Employers who do not have an EIN may apply for one by attaching a completed Form SS-4, Application for Employer Identification Number, to this form

The online application process is not yet available for corporations with addresses in foreign countries or Puerto Rico.

Social Security Number (SSN). If you made excess contributions to a Code section 403(b)(7)(A) custodial account or you are a disqualified person other than an employer, enter your SSN.

C. Plan Information

Complete the entire table (plan name, plan number, and plan year ending) for all plans included on this Form 5558.

Part II. Extension of Time to File Form 5500 or Form 5500-EZ

Use Form 5558 to apply for a one-time extension of time to file Form 5500 or Form 5500-EZ.

Exception: Form 5500 and Form 5500-EZ filers are automatically granted extensions of time to file until the extended due date of the federal income tax return of the employer (and are not required to file Form 5558) if all the following conditions are met: (1) the plan year and the employer's tax year are the same; (2) the employer has been granted an extension of time to file its federal income tax return to a date later than the normal due date for filing the Form 5500 or Form 5500-EZ; and (3) a photocopy of the IRS extension of time to file the federal income tax return is attached to the Form 5500 or Form 5500-EZ. An extension granted under this exception cannot be extended further by filing a Form 5558 after the normal due date of the Form 5500 or Form 5500-EZ.

An extension of time to file a Form 5500 or Form 5500-EZ does not operate as an extension of time to file the PBGC Form 1.

How to file. In general, a separate Form 5558 is used for each return for which you are requesting an extension. However, if you are a single employer and all your plan years end on the same date, file only one Form 5558 to request an extension of time to file more than one Form 5500 or Form 5500-EZ. Attach a photocopy of the completed extension request to your Form 5500 or Form 5500-EZ.

When to file. To request an extension of time to file Form 5500 or Form 5500-EZ, file Form 5558 on or before the return's normal due date. The normal due date is the date the Form 5500 or Form 5500-EZ would otherwise be due, without extension.

Applications for extension of time to file Form 5500 and Form 5500-EZ that are filed on or before the return/report's normal due date on a properly completed Form 5558 will be automatically approved to the date that is not more than $2\frac{1}{2}$ months after the return/report's normal due date.

Approved copies of Form 5558. requesting an extension to file Form 5500 or Form 5500-EZ, will not be returned to the filer from the IRS.

Line 1. Enter on line 1 the due date for which you are requesting to file Form 5500 or Form 5500-EZ. This date should not be more than 21/2 months after the normal due date of the return.

When using Form 5558 to request an extension of time to file Form 5500 or Form 5500-EZ plan sponsors or plan administrators are not required to sign the form. If Form 5558 is timely filed and complete, you will be granted an additional 21/2 months to file Form 5500 or Form 5500-EZ.

Part III. Extension of Time to File Form 5330

File one Form 5558 to request an extension of time to file Form 5330 for excise taxes with the same filing due date. For specific information on excise tax due dates, see the Instructions for Form 5330.

Note: Effective January 1, 2008, the IRS will no longer return stamped copies of the Form 5558 to filers who request an extension of time to file a Form 5330. Instead you will receive a computer generated notice to inform you if your extension is approved or denied. Because of this change, we ask you to attach a photocopy of this notice to your Form 5330.

When to file. To request an extension of time to file Form 5330, file Form 5558 in sufficient time for the Internal Revenue Service to consider and act on it before the return's normal due date.

The normal due date is the date the Form 5330 would otherwise be due. without extension.

Line 2. On line 2, enter the requested due date. If your application for extension of time to file Form 5330 is approved, you may be granted an extension of up to 6 months after the normal due date of Form 5330.

Line 2a. Indicate the Code section(s) for the excise tax you are requesting an extension.

Line 2b. Enter the amount of tax estimated to be due with Form 5330 and attach your payment to this form.

Make your check or money order payable to the "United States Treasury." Do not send cash. On all checks or money orders, write your name, Filer's identifying number (EIN or SSN), Plan number, Form 5330 Section number, and the tax year to which the payment applies.

If you changed your mailing address after you filed your last return, use Form 8822, Change of Address, to notify the IRS of the change. You can get Form 8822 by calling 1-800-829-3676 or you can access the IRS website at www.irs.gov 24 hours a day, 7 days a week.

Line 3. The IRS will grant a reasonable extension of time (not to exceed 6 months) for filing Form 5330 if you file a timely application showing that you are unable to file Form 5330 because of circumstances beyond your control. Clearly describe these circumstances. Generally, an application will be considered on the basis of your own efforts to fulfill this filing responsibility, rather than the convenience of anyone providing help in preparing the return. However, consideration will be given to any circumstances that prevent your practitioner, for reasons beyond his or her control, from filing the return by the normal due date, and to circumstances in which you are unable to get needed professional help in spite of timely efforts to do so.



If we grant you an extension of time to file Form 5330 and later find CAUTION that the statements made

on this form are false or misleading, the extension will be null and void. A late filing penalty associated with the form for which you filed this extension will be charged.

Signature. If you are filing Form 5558 for an extension to file Form 5330, the form must be signed. The person who signs this form may be an employer, plan sponsor, plan administrator, a disqualified person required to file Form 5330, an attorney or certified public accountant qualified to practice before the IRS, a person enrolled to practice before the IRS, or a person holding a power of attorney.

Privacy Act and Paperwork Reduction Act Notice

We ask for the information on this form to carry out the Internal Revenue laws of the United States. We need it to determine if you are entitled to an extension of time to file Form 5500,

5500-EZ, or 5330. If you want an extension, you are required to give us the information. Section 6109 requires you to provide your taxpayer identification number (SSN or EIN). If you fail to provide this information in a timely manner, you may be liable for penalties and interest.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential as required by Code section 6103.

However, section 6103 allows or requires the Internal Revenue Service to disclose or give the information shown on your tax return to others as described in the Code. For example, we may disclose your tax information to the Department of Justice to enforce the tax laws, both civil and criminal, and to cities, states, the District of Columbia, U.S. commonwealths or possessions, and certain foreign governments to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal law, or to federal law enforcement and intelligence agencies to combat terrorism.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time: 24 minutes.

If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Products Coordinating Committee, SE:W:CAR:MP:T:T:SP, 1111 Constitution Ave., NW, IR-6526, Washington, DC 20224. Do not send the tax form to this address. Instead. see Where To File on page 2.

Knowles Electronics, LLC Pension Plan

Financial Statements and Independent Auditors' Report

December 31, 2009 and 2008

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ACCOUNTANTS AND CONSULTANTS

INDEPENDENT AUDITORS' REPORT

Administrative Committee Knowles Electronics, LLC Pension Plan Itasca, Illinois

We were engaged to audit the accompanying statements of net assets available for benefits of the Knowles Electronics, LLC Pension Plan as of December 31, 2009 and 2008, and the statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's Administrator.

As permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the investments, investment transactions, and related income, which were certified by Wells Fargo Bank, N.A., the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained certifications from the trustee as of and for the years ended December 31, 2009 and 2008 that the information provided to the Plan Administrator by the trustee is complete and accurate.

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

As further discussed in Note H to the financial statements, the Board of Managers of Knowles Electronics, LLC, the Plan Sponsor, voted on December 27, 2009 to merge the Plan into the Dover Corporation Pension Plan. In accordance with accounting principles generally accepted in the United States of America, the Plan has changed its basis of accounting from the ongoing plan basis used in presenting the 2008 financial statements to the liquidation basis used in presenting the 2009 financial statements.

MILLER, COOPER & CO., LTD.

Miller, Couper & Co., Ltd.

Certified Public Accountants

Deerfield, Illinois October 12, 2010



FINANCIAL STATEMENTS

Knowles Electronics, LLC Pension Plan STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS December 31, 2009 and 2008

ASSETS	 2009	_	2008
Investments, at fair value	\$ -	\$	67,863,761
LIABILITIES			
Benefits payable	 -	_	2,927
NET ASSETS AVAILABLE FOR BENEFITS, AT FAIR VALUE	\$ -	\$_	67,860,834

The accompanying notes are an integral part of these statements.

Knowles Electronics, LLC Pension Plan STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years ended December 31, 2009 and 2008

	_	2009	2008
Additions to net assets attributed to: Net appreciation in value of investments Interest and dividends Employer contributions	\$	1,821,811 2,052,048 7,800,000	\$ 2,124,587 4,000,000
Total additions	_	11,673,859	6,124,587
Deductions from net assets attributed to: Net depreciation in value of investments Benefits paid to participants Administrative expenses Transfer of net assets to another qualified plan (Note H)	_	3,775,302 468,305 75,291,086	13,029,189 3,720,925 520,690
Total deductions	_	79,534,693	17,270,804
NET DECREASE		(67,860,834)	(11,146,217)
Net assets available for benefits, beginning of year	_	67,860,834	79,007,051
Net assets available for benefits, end of year	\$	_	\$ 67,860,834

The accompanying notes are an integral part of these statements.

NOTE A - DESCRIPTION OF THE PLAN

The following description of the Knowles Electronics, LLC Pension Plan (the Plan) provides only general information. Interested parties should refer to the plan document for a more complete description of the Plan's provisions.

1. General

The Plan was a noncontributory, defined benefit pension plan established to provide retirement benefits for eligible employees of Knowles Electronics, LLC and its subsidiaries, past and present (the Company). On August 22, 2005, the Company was acquired by Dover Corporation (Dover). After the acquisition, the Plan remained a single employer plan for eligible employees of Knowles Electronics, LLC. Employees were eligible to participate in the Plan as of the date the employee completed one year of continuous service. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). As discussed further in Note H, the Plan's net assets were merged into the Dover Corporation Pension Plan effective December 31, 2009.

Effective January 1, 2002, the Plan was converted to a cash balance plan for active participants who were under the age of 40 on May 1, 2002 and for all new participants after that date, regardless of age. As of December 31, 2001, credited service was frozen, and cash balance credits began to accumulate, as of January 1, 2002, for these participants. For participants who were over the age of 40 on May 1, 2002, benefits continued to accrue according to the final average pay formula.

The cash balance plan reports accrued benefits to participants in the form of record keeping accounts that track the participant's cash balance benefit and is not a separately funded or segregated account. Account balances were increased annually by a percentage of the employee's compensation plus an investment interest credit.

2. Pension Benefits

The normal retirement date of a participant was the first day of the month on or immediately after the date the participant attained age 65, as long as the participant was vested.

NOTE A - DESCRIPTION OF THE PLAN (Continued)

2. Pension Benefits (Continued)

Upon retirement, various benefit options were available under the final average pay and cash balance formulas. Upon termination, retirement, death, or disability, participants with a vested benefit between \$1,000 and \$10,000 could elect to receive a lump-sum distribution. If the vested benefit was less than \$1,000, the Administrative Committee, at its discretion, could elect to distribute the accrued benefit to the participant in a lump sum. Vested accrued benefits under the cash balance formula could be distributed in a lump sum to the terminated participant or deferred until retirement.

A participant was eligible for an early retirement pension if the employee was terminated on or after completion of at least five years of service and had attained 55 years of age. The monthly pension was the participant's accrued benefit beginning at the normal retirement date. Pension payments commencing prior to age 65 were reduced on an actuarially equivalent basis. A participant was eligible for a deferred, vested retirement pension if his/her employment was terminated after he/she has completed at least three years of vesting service. The monthly pension was the participant's accrued benefit, but payments are deferred until the normal retirement date.

3. <u>Vesting</u>

As of January 1, 2008, participants with service subsequent to December 31, 2007 became 100% vested after three years of service. Prior to this date, participants terminated prior to January 1, 2008 became 100% vested after five years of service.

4. Administrative Expenses

Administrative expenses were paid by the Plan. No administrative expenses were paid by the Company during 2009 or 2008.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

1. Basis of Accounting

Associated with the Plan's merger, as further discussed in Note H, the Plan has changed its basis of accounting from the ongoing plan basis used in presenting the 2008 financial statements, to the liquidation basis used in presenting the 2009 financial statements.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

2. Fair Value Measurements

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820 (formerly known as FASB Statement No. 157), *Fair Value Measurements and Disclosures*, 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 unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

Level 1	Inputs to the valuation methodology are unadjusted quoted market 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 the following: * 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.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

2. Fair Value Measurements (Continued)

The following is a description of the valuation methodologies used for the Plan's investments measured at fair value at December 31, 2009 and 2008.

Net cash equivalents, equity funds, and fixed income funds: Valued at the net asset value (NAV) of shares held by the plan at year-end.

Common stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

Other financial instruments: The carrying amounts of other financial instruments, including benefits payable, approximate fair value due to the short maturity of these instruments.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's investments in the underlying master trust assets as of December 31, 2008:

		Plan Assets at Fair Value as of December 31, 2008							
		Level 1		Level 2		Level 3		Total	
Net cash equivalents	\$	512,206	\$	-	\$	-	\$	512,206	
Equity funds		37,227,777		-		-		37,227,777	
Common stock		2,544,045		-		-		2,544,045	
Fixed income funds	_	27,579,733		-	_	-	_	27,579,733	
Total assets at fair value	\$	67,863,761	\$	-	\$	-	\$	67,863,761	

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

3. Use of Estimates

In preparing the Plan's financial statements, management is required to make estimates and assumptions that affect the reported amounts of net assets, the disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates. The Plan used an independent actuary to determine the actuarial present value of accumulated plan benefits. A change in the actuarial assumptions used could significantly change the amount of the actuarial present value reported in the accompanying financial statements.

4. Payment of Benefits

Benefits were recorded when paid.

5. <u>New Accounting Pronouncements</u>

a. <u>Generally Accepted Accounting Principles</u>

In June 2009, the FASB issued ASC 105, *Generally Accepted Accounting Principles*, which establishes the FASB ASC as the sole source of authoritative generally accepted accounting principles ("GAAP"). Pursuant to the provisions of FASB ASC 105, the Plan has updated references to GAAP in its financial statements issued for the year ended December 31, 2009. The adoption of FASB ASC 105 did not impact the Plan's financial position or results of operations.

b. Accounting for Uncertainty in Income Taxes

The FASB issued ASC 740 (formerly known as FASB Interpretation No. 48), *Income Taxes*. The Plan adopted this new guidance for the year ended December 31, 2009. Plan management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

NOTE C - FUNDING POLICY

The Company's funding policy was to make contributions to the Plan in amounts necessary to provide for employees' retirement benefits. The Company made contributions of \$7,800,000 for the year ended December 31, 2009 and contributions of \$4,000,000 for the year ended December 31, 2008. Participant deferrals were not allowed by the Plan.

NOTE D - ACCUMULATED PLAN BENEFITS

Accumulated plan benefits were those future periodic payments, including lump-sum distributions, that were attributable under the Plan's provisions to the service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries and (2) present employees or their beneficiaries. The actuarial present value of accumulated plan benefits was determined by an independent actuary and was that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The actuarial present value of accumulated benefits as of January 1, 2009 and 2008 was as follows:

	_	2009		2008
Vested benefits				
Participants and/or beneficiaries currently receiving benefits	\$	32,726,804	\$	30,478,711
Other participants		23,443,412		22,363,542
	-		-	
		56,170,216		52,842,253
Nonvested benefits	_	1,517,017	_	1,470,699
	_			
Total actuarial present value of accumulated plan benefits	\$	57,687,233	\$	54,312,952

NOTE D - ACCUMULATED PLAN BENEFITS (Continued)

The changes in the actuarial present value of the Plan's accumulated plan benefits for 2008 were as follows:

Actuarial present value of accumulated plan benefits at January 1, 2008	\$ 54,312,952
Increase (decrease) during the year attributable to:	
Benefits accumulated and net gains	1,375,664
Interest due to decrease in the discount period	4,199,062
Assumption changes	1,520,480
Benefits paid	 (3,720,925)
Actuarial present value of accumulated plan benefits at January 1, 2009	\$ 57,687,233

The significant assumptions used in the January 1, 2009 and 2008 valuations were:

- a. Mortality: RP 2000 with generational projection.
- b. Retirement Age: Average retirement age of 64.
- c. Investment return: 7.75% per annum for 2009 and 8.0% per annum for 2008.

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.

NOTE E - INVESTMENT IN MASTER TRUST

In 2006, the Plan purchased an investment in the Dover Master Trust which was established for the investment of assets of the Plan and other Dover-sponsored retirement plans. Each participating retirement plan has an undivided interest in the assets of the Master Trust. The assets of the Master Trust are held by Wells Fargo Bank, N.A., the trustee. Investment income and administrative expenses relating to the Master Trust are allocated to the individual plans based upon average monthly balances invested by each plan. As discussed in Note H, the Plan merged with the Dover Corporation Pension Plan, whose sole investment was also the Dover Master Trust as of December 31, 2009. As such, the Plan did not have an allocation of the Dover Master Trust as of December 31, 2009.

NOTE F - INVESTMENTS

All investment information, including investments held at December 31, 2009 and 2008, net appreciation (depreciation) in the fair value of investments, and interest and dividends for the years then ended, was obtained or derived from information supplied to the Plan Administrator and certified as complete and accurate by Wells Fargo Bank, N.A., the trustee. Accordingly, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the investment information certified by the trustee.

The following table presents the fair value of the investments in the Plan. Individual investments representing more than 5% of the Plan's net assets as of December 31, 2009 and/or 2008 are separately identified.

 2009		2008	
\$ -	\$	67,863,761	
\$ -	\$	67,863,761	
\$ \$	\$	\$\$_	

NOTE G - INCOME TAX STATUS

The Plan obtained its latest determination letter on July 11, 2003, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable provisions of the Internal Revenue Code.

NOTE H - MERGER

Effective December 31, 2009, the Plan was merged into the Dover Corporation Pension Plan, which has similar attributes and is sponsored by Dover Corporation, the Company's parent. The plan merger was performed in compliance with Section 414(1) of the Internal Revenue Code. Effective December 31, 2009, all participants became participants in the Dover Corporation Pension Plan and the Plan ceased to exist. All future eligible employees of the Company will participate in the Dover Corporation Pension Plan. As both plans' sole investment was the Dover Master Trust, the Plan's interest in the Dover Master Trust, totaling \$75,291,086 at December 31, 2009, was allocated to the Dover Corporation Pension Plan. Interested parties should refer to the related plan merger agreement and the plan document of the new plan.

NOTE I - SUBSEQUENT EVENTS

Plan management has evaluated subsequent events through October 12, 2010, the date that these financial statements were available to be issued. Plan management has determined that no events or transactions have occurred subsequent to the statement of net assets available for benefits date that require disclosure in the financial statements.

SCHEDULE SB	Single-Employer	- Dofino	d Ron	ofit Plan		OMB	No. 1210-0110		
(Form 5500)	Actuaria	-	2009						
	Actuaria								
Department of the Treasury Internal Revenue Service	This schedule is required to be	filed under s	ection 104	4 of the Employee					
Department of Labor Employee Benefits Security Administration	Retirement Income Security Act			section 6059 of th	ne		is Open to Public		
Pension Benefit Guaranty Corporation		Internal Revenue Code (the Code). File as an attachment to Form 5500 or 5500-SF.							
For calendar plan year 2009 or fiscal p		01/2009	5500 or	and endir	l	12/3	31/2009		
Round off amounts to nearest do		01,000							
Caution: A penalty of \$1,000 will be		t unless reas	onable ca	use is establishe	d.				
A Name of plan	······			B Three-digi	t				
				plan numb	er (PN)	•	001		
KNOWLES ELECTRONICS, LI	C PENSION PLAN				h biggi,				
C Plan sponsor's name as shown on li	· · · · · · · · · · · · · · · · · · ·			D Employer Id	lentificat	tion Number (FIN)		
KNOWLES ELECTRONICS, LI				36-43163	363				
E Type of plan: X Single Multiple	e-A 🗍 Multiple-B 🛛 🖌 🖡	Prior year pla	an size: 🛛	100 or fewer	101-5	00 🛛 Moret	han 500		
Part I Basic Information	Pr∮ n. je transmiski (n. je						· · · · ·		
1 Enter the valuation date:	Month 1 Day 1	Year	2009						
2 Assets:									
					2a		67,863,763		
b Actuarial value					2b		67,863,763		
3 Funding target/participant count b	ureakdown		(1) N	lumber of particip	ants	(2)	Funding Target		
	peneficiaries receiving payment	3a	· · · · · · · · · · · · · · · · · · ·	·····	456		34,529,525		
b For terminated vested partic	ipants	3b			444		17,940,86		
c For active participants:									
(1) Non-vested benefits		3c(1)					458,749		
(2) Vested benefits		3c(2)					10,708,21		
(3) Total active		3c(3)			185		11,166,960		
d Total		3d			1 , 085		63,637,34		
4 If the plan is at-risk, check the box	x and complete items (a) and (b)	••••••							
a Funding target disregarding p	prescribed at-risk assumptions				4 a				
* * *	isk assumptions, but disregarding trar		•		4b				
P	nsecutive years and disregarding load	<u> </u>					6.84 %		
A _					. 5 6				
Statement by Enrolled Actuary					. •		1,523,023		
To the best of my knowledge, the information s	upplied in this schedule and accompanying sched b. In my opinion, each other assumption is reasonated ted experience under the plan.								
SIGN JIM DER	ENGOWSKI 9 ND				10/4	10			
s	Signature of actuary					Date			
James M. Derengowski, A	.S.A., E.A.					08-065	55		
Туре	or print name of actuary				Most r	ecent enrolim	ent number		
Towers Watson Pennsylvar	nia, Inc.	• • • • • • • • • • • • • • • • • • • •			(312) 525-	-2500		
191 N. Wacker Drive	Firm name			Tel	ephone	number (inclu	uding area code)		
Chicago		0606-463	7	_					
	Address of the firm								
If the actuary has not fully reflected any instructions	regulation or ruling promulgated unde	er the statute	in comple	eting this schedul	e, check	the box and	see		
Instructions For Paperwork Reduction Act Notice	and OMB Control Numbers see th	e instruction	is for For	rm 5500 or 5500.	SF	Schedu	le SB (Form 5500) 200		
For Paperwork Reduction Act Notice	and OMB Control Numbers, see the	e instructior	ns for Foi	rm 5500 or 5500-	SF.	Schedu	ile SB (Form 5500) 20 v.09230		

Pa	art II	Begir	nning of year o	arryove	er and prefunding bal	ances							
							(a) (Carryover balance		(b)	Prefund	ing balance	
7		•			cable adjustments (Item 13 f			19,743,	060				0
8	Portion	used to	offset prior year's f	unding red	quirement (Item 35 from prior	year)		706,	739				0
9	Amoun	t remaini	ng (Item 7 minus it	em 8)				19,036,	321				0
10	Interest	t on item	9 using prior year's	s actual re	turn of (14.79)%			(2,815,4	172)				
11	Prior ye	ear's exce	ess contributions to	be added	to prefunding balance:								
	a Exc	ess cont	ributions (Item 38 f	rom prior	year)								0
	b Inte	rest on (a	a) using prior year's	s effective	rate of <u>6.30</u> %								0
C Total available at beginning of current plan year to add to prefunding balance										0			
d Portion of (c) to be added to prefunding balance										0			
12 Reduction in balances due to elections or deemed elections													
13	Balance	e at begi	nning of current ye	ar (item 9	+ item 10 + item 11d - item 1	2)		16,220,	849				0
Р	art III	Fun	ding percenta	aes									
				-							14	81.15	%
					je						15	106.64	
	Prior ye	ear's func	ding percentage for	· purposes	of determining whether carr	yover/prefu	unding bala				16	119.95	
17		5	<u> </u>		s less than 70 percent of the						17		%
	art IV		tributions and				igot, ontor .	such percentage					
				•	ear by employer(s) and emp	00005							
10	(a) Dat		(b) Amount pa		(c) Amount paid by	(a) [Date	(b) Amount pai	d by	(c) Amou	unt paid by	
(N	IM-DD-Y	YYY)	employer(s)	employees	(MM-DE		employer(s				loyees	
	1/15/2			00,000									
	7/01/2			00,000									
)/15/2			00,000									
12	2/21/2	2009	1,80	00,000									
						Totals ►	18(b)	7,80	0,000	18(c)			0
19	Discour	nted emp	oloyer contributions	- see ins	tructions for small plan with a	valuation	date after ti	he beginning of the	year:				
		-	-		mum required contribution fr			-	19a				
	-				djusted to valuation date				19b				
C Contributions allocated toward minimum required contribution for current year adjusted to valuation date										7,484,	839		
20			outions and liquidity										
		1		,	 he prior year?							X Yes	No
			-		tallments for the current year								No
					ete the following table as ap								
	200		, 200		Liquidity shortfall as of en		er of this pla	an year					
		(1) 1	st		(2) 2nd		(3)	3rd			(4) 4t	h	
			0			0		C					0

Ра	rt V Assumptions u	ised to determine fi	unding target and target n	ormal cost		
21	Discount rate:					
	a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %		X N/A, full yield curve used
	b Applicable month (enter	r code)			21b	1
22	Weighted average retireme	ent age			22	64
23	Mortality table(s) (see instr	ructions) Pres	scribed - combined X Pres	cribed - separate	Substitute)
Pa	rt VI Miscellaneous	items		E	_	
		in the non-prescribed actu	uarial assumptions for the current p			
25	Has a method change beer	n made for the current pla	in year? If "Yes," see instructions	regarding required attacl	nment	X Yes No
26	Is the plan required to provi	ide a Schedule of Active I	Participants? If "Yes," see instruct	ions regarding required	attachment	X Yes No
27	, <u> </u>		ding rules, enter applicable code a		27	
Ра	rt VII Reconciliation	n of unpaid minimu	m required contributions	for prior years		
28	Unpaid minimum required of	contribution for all prior ye	ears		28	0
29			unpaid minimum required contribu	1 5	29	
30	Remaining amount of unpa	id minimum required cont	tributions (item 28 minus item 29).		30	0
Ра	rt VIII Minimum requ	uired contribution f	or current year			
31	•		uctions)		31	1,523,021
32	Amortization installments:			Outstanding Bala	nce	Installment
	a Net shortfall amortization	n installment			0	0
	b Waiver amortization inst	allment			0	0
33			er the date of the ruling letter gran) and the waived amount		33	
34			r/prefunding balances (item 31 + it		34	1,523,021
			Carryover balance	Prefunding balar	nce	Total balance
35	Balances used to offset fun	nding requirement	0			0
36	Additional cash requiremen	nt (item 34 minus item 35)			36	1,523,021
37	7 Contributions allocated toward minimum required contribution for current year adjusted to valuation date 37					7,484,839
38			ar (see instructions)		38	5,961,818
39	······································		ar (excess, if any, of item 36 over i		39	0
40					40	0

Knowles Electronics, LLC Pension Plan

EIN: 36-4316363

Plan Number: 001

Attachments to 2009 Schedule SB (Form 5500)

Line 22 — Description of Weighted Average Retirement Age

Line 25 — Change in Method

Line 26 — Schedule of Active Participant Data

Part V — Statement of Actuarial Assumptions and Methods

Part V — Summary of Plan Provisions

Appendix — Optional Forms of Benefit Conversion Bases

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan

Attachment to 2009 Schedule SB of Form 5500

Schedule SB, Line 22 - Description of Weighted Average Retirement Age

	(1)	(2)	(3)	(4)
	Retirement		Cumulative	
AGE	qx	рх	рх	(1)*(3)*AGE
55	0.010	0.990	1.0000	0.5500
56	0.010	0.990	0.9900	0.5544
57	0.010	0.990	0.9801	0.5587
58	0.010	0.990	0.9703	0.5628
59	0.010	0.990	0.9606	0.5668
60	0.010	0.990	0.9510	0.5706
61	0.010	0.990	0.9415	0.5743
62	0.150	0.850	0.9321	8.6685
63	0.050	0.950	0.7923	2.4957
64	0.050	0.950	0.7527	2.4086
65	1.000	0.000	0.7151	46.4815

Calculation of Weighted Average Retirement Age

Weighted Average Retirement Age:

64

SCHEDULE SB, LINE 25 – Change in Method

Knowles Electronics, LLC Pension Plan

EIN: 36-4316363

Plan Number: 001

Assumed plan-related expenses of \$155,000 were added to the target normal cost.

The valuation software used to produce the actuarial information submitted on the schedule has been refined to reflect evolving understanding of PPA requirements, and such modifications may be considered to be a method change. The percentage changes in funding target, target normal cost and plan assets due to the refinements in the software are each less than 2% (disregarding the effects of any changes that are automatically approved under final IRC 430 regulations), and the modifications to the software were designed to produce results no less accurate than the results produced by the software prior to the change. Therefore the change in funding method due to a change in valuation software receives automatic approval under IRS Announcement 2010-3.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan

EIN: 36-4316363 Plan: 001

Attachment to 2009 Schedule SB of Form 5500

Schedule SB, Line 26–Schedule of Active Participant Data

	-			Years of Ser	vice				
Age Last Birthday	_	0-4	5-9	10-14	15-19	20-24	25-29	30-34	Over 34
0-24	Number Avg PAY Avg CB	2	0	0	0	0	0	0	0
25-29	Number Avg PAY Avg CB	7	1	0	0	0	0	0	0
30-34	Number Avg PAY Avg CB	9	4	1	0	0	0	0	0
35-39	Number Avg PAY Avg CB	16	9	6	0	0	0	0	0
40-44	Number Avg PAY Avg CB	9	13	6	3	3	0	0	0
45-49	Number Avg PAY Avg CB	6	11	4	7	6	4	0	0
50-54	Number Avg PAY Avg CB	7	8	4	3	4	5	1	1
55-59	Number Avg PAY Avg CB	2	5	2	1	1	2	2	1
60-64	Number Avg PAY Avg CB	1	2	0	3	0	0	0	3
65-69	Number Avg PAY Avg CB	0	0	0	0	0	0	0	0
70 & up	Number Avg PAY Avg CB	0	0	0	0	0	0	0	0
	-	•				o '			

Average Age = 45.4

Average Service = 11.0

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V – Statement of Actuarial Assumptions / Methods

Demographic Assumptions

Mortality for contributions:

 Healthy and Disabled 	Single combined table of rates for non-annuitants (based on RP- 2000 "Employees" table without collar or amount adjustments, with generational projection) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, with generational projection)		
Termination	Rates varying	by age and service	
	Sample rates:		
	Age	Male and Female	
	25	0.1899	
	40	0.0350	
	55	0.0015	
Disability	1965-1969 Inte	er-Company Table	
Retirement	Rates varying	by age	
	Sample rates:		
	Age	Rate	
	55-61	.01	
	62	.15	
	63-64	.05	
	65	1	
	The weighted	d average retirement age is 64.	
Form of payment		pay benefit: Life annuity benefit: Lump Sum	
Percent married	80% of males;	; 65% of females	
Spouse age	Wife five years	s younger than husband	
Methods			
Valuation date	First day of pla	an year	
Funding target and target normal cost	Present value of accrued benefits		
Actuarial value of assets	Fair market value of assets on the valuation date		

Knowles Electronics, LLC		EIN: 36-4316363
Knowles Electronics, LLC Pensio	n Plan	Plan: 001
Schedule SB, Part V – Statement	of Actuarial Assumptions / Methods	
Benefits Not ValuedAll benefits described in the Plan Provisions section of this rep were valued. Towers Watson has reviewed the plan provisions Knowles and, based on that review, is not aware of any signific benefits required to be valued that were not.Change in Assumptions and Methods Since Prior Valuation		ved the plan provisions with ot aware of any significant
Contributions	The funded interest rate was changed from yield curve as of January 2008 to the full as of January 2009, as provided under the 2006 (PPA).	l corporate bond yield curve
	The required mortality table used to calc target normal cost was updated to includ projected mortality improvements.	

Data Sources

Towers Watson used asset data supplied by the Knowles. Data was reviewed for reasonableness and consistency, but no audit was performed.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Plan Provisions

Effective January 1, 2002, a "cash balance" benefit structure was added to the Knowles Electronics, LLC Pension Plan.

- Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002 will remain covered under the prior version of the plan, which is a traditional "final average earnings" benefit structure.
- Employees who are hired after May 1, 2002 are covered under the cash balance benefit structure.
- Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002 are covered under the final average earnings benefit structure for service prior to January 1, 2002 and under the cash balance benefit structure for service after December 31, 2001.
 - The final average earnings benefit, for service prior to January 1, 2002, is indexed to reflect the individual's final average earnings at termination or retirement.
 - The cash balance account on January 1, 2002 is \$0 and will accumulate with pay credits and interest credits for service after December 31, 2001.
 - The total accrued benefit at termination or retirement cannot be less than the accrued benefit the individual would have earned under the final average earnings formula as of the cash balance amendment adoption date.

Actuarial Assumptions and Methods

Economic Assumptions

Discount rate*		7.75%
Funding interest rate basis:Applicable month	December publisł Ja	
 Yield curve basis 	Full yield	curve
 Transition from current liability rates 		No
Funding interest rates:		
► 10-year rate		7.20%
► 20-year rate		6.94%
► 30-year rate		6.49%
 Effective interest rate 		6.84%
Annual rates of increase		
 Salaries: (rates varying by age) 	У	ears of Service
	Age	Male and Female
	25	6.70%
	40	5.20%
	55	4.20%
	The annua	al rate of salary increased the

The annual rate of salary increased that is equivalent to the rates used is 5.20%

►	Future Social Security wage bases	4.50%
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Interest credit on cash balance accounts

5.25%

EIN: 36-4316363 Plan: 001

Final Average Pay Plan Provisions

Effective date	Amended and restated effective January 1, 2002.
Covered employees	Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002: for all service.
	Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002: for service prior to January 1, 2002
Plan participation	All employees who were participants under the prior provisions of the plan continue to be participants.
Definitions	
Continuous service	Elapsed time since last date of hire. If a break in service of less than 12 months occurs, the severance period and the prior service period will be included in the participant's continuous service. If a break in service exceeds 12 months but does not exceed the prior period of service, the prior period of service will be included.
Vesting service	Same as Continuous Service.
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.
	Periods of severance are not included, even if considered as Continuous Service.
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Section 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.
	Compensation is limited by the pay cap provided in Code Section 401(a)(17).
Average monthly earnings	Monthly average of the participant's compensation, limited to the Social Security Wage Base, during that period of three consecutive years ending with or within the year of determination.
Final average monthly earnings	Monthly average of the participant's compensation during that period of five consecutive years during which the participant received his highest compensation within the ten-year period ending on the date of termination.
Covered compensation	The 35-year average of the Social Security Wage bases ending in the year a participant attains Social Security normal retirement age.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Social Security offset allowance	.65% multiplied by years of Credited Service (not to exceed 25 years) multiplied by the Average Monthly Earnings or 1/12th of Covered Compensation.
Monthly pension benefit	2% of Final Average Monthly Earnings multiplied by years of Credited Service (not to exceed 25 years), reduced by the participant's Social Security Offset Allowance.
Benefit eligibility	
Normal retirement	Age 65 with five years of Vesting Service.
Early retirement	Age 55 with five years of Vesting Service.
Deferred vested	Five years of Vesting Service.
Pre-retirement death benefit	Death of a married participant while eligible for retirement or deferred vested benefit.
Disability retirement	Total and permanent disability after 5 years of Vesting Service.
Benefits payable	
Normal retirement	Monthly Pension Benefit

Normal retirement	Monthly Pension Benefit.
Early retirement	Monthly Pension Benefit reduced by 8% per year early for ages 62 to 65 and by 4% per year for ages 55 to 62.
Termination with deferred vested benefit	Monthly Pension Benefit, payable at age 65. Payments may commence as early as age 55, and are then reduced as for early retirement above.
Pre-retirement death benefit	Immediate annuity payable to the surviving spouse, determined as if the participant had retired immediately prior to death and elected the 50% surviving spouse annuity option. There is no reduction for commencement of benefits prior to age 65.
Disability retirement	Monthly Pension Benefit, commencing at Total and Permanent Disability.
Form of payment	Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value.

Cash Balance Plan Provisions

Effective date	January 1, 2002.		
Covered employees	Employees who were hired after May 1, 2002: All service.		
	Employees who were hired prior to May 1, age forty on May 1, 2002: Service after De		
Plan participation	Anniversary date following the completion Service.	of one year of Continuous	
Definitions			
Continuous service	Elapsed time since last date of hire. If a bre 12 months occurs, the severance period ar will be included in the participant's continue service exceeds 12 months but does not ex service, the prior period of service will be in	nd the prior service period ous service. If a break in xceed the prior period of	
Vesting service	Same as Continuous Service.		
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.		
	Periods of severance are not included, even Continuous Service.	n if considered as	
Compensation	Total cash compensation, before withhold overtime, bonuses, commissions, elective 401(k) and Section 125 plans, and excludir contributions to a deferred compensation p	contributions under Section ng any employer	
	Compensation is limited by the pay cap pro (a)(17).	ovided in Code Section 401	
Opening cash balance account	The opening cash balance account has a zero balance until the first Pay Credit is allocated.		
Cash balance account	A hypothetical account maintained for each participant consisting of the accumulation of Pay Credits and Interest Credits.		
Pay credit	is allocated a Pay Credit equal to the perce	t the end of each plan year, the participant's Cash Balance Account allocated a Pay Credit equal to the percentage from the table below, ultiplied by his Compensation for that plan year.	
	Sum of Attained Age	Annual	

Knowles Electronics, LLC EIN: 36-4316363				
Knowles Electronics, LLC P	Plan: 001			
Schedule SB, Part V - Summ	ary Plan Provisions			
	And Credited Service	Pay Credit		
	Less than 40	3.0%		
	40 to 49	3.5%		
	50 to 59	4.5%		
	60 to 69	6.0%		
	70 or more	7.5%		
Interest credit At the end of each plan year that the participant has a Cash Balan Account, the Cash Balance Account is allocated an interest credit equal to the value of the Cash Balance Account as of the end of the preceding plan year, multiplied by the Interest Crediting Rate for the current plan year.		unt is allocated an interest credit lance Account as of the end of the		
Interest crediting rate Annual yield on the 10-year Treasury Constant Maturity that is for the September 30th of the preceding plan year, but no less 4.50%.				
Monthly pension benefit	Single life annuity that is actuarially equivalent to the participant's Cash Balance Account, based on the participant's age at commencement.			
Benefit eligibility				
Termination or retirement	Three years of Vesting Service.			
Pre-retirement death benefit	Three years of Vesting Service.			
Disability retirement	Total and permanent disability aft	er 5 years of Vesting Service.		
Benefits payable				
Termination or retirement	Monthly Pension Benefit.			
Pre-retirement death benefit Lump sum payment of the Cash Balance Account. If the participant is married on the date of death, the surviving spouse may choose between an actuarially equivalent single life annuity or a lump sum payment		surviving spouse may choose		
Disability retirement Monthly Pension Benefit, after a 12-month elimination period, assuming that Credited Service and Vesting Service continue accrue during the elimination period and that Compensation co during the elimination period at the level the participant was re at the time of his disability.		nd Vesting Service continue to od and that Compensation continues		

Knowles Electronics, LLC

EIN: 36-4316363

Knowles Electronics, LLC Pension Plan

Schedule B, Part V - Summary Plan Provisions

Form of payment

Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value, including a lump sum payment of the Cash Balance Account.

Changes from the prior year

The benefits valued for those active as of January 1, 2009 reflect the change in the IRC Section 401(a)(17) pay limit to \$245,000. The increase in the IRC Section 415(b) maximum benefit limit to \$195,000 has been reflected for participants commencing benefits on or after January 1, 2009.

Plan: 001

Knowles Electronics, LLC. Pension Plan Optional Forms of Benefit Conversion Bases

Plan	Conversion Basis
Final Average Pay Plan	Appendix I
Cash Balance Plan	Appendix II

Appendix I – Final Average Pay Plan

Annuity Conversion Basis: N/A (the benefit is defined as an annuity)

Alternate Form Annuity Conversion Basis:

- (A) <u>Mortality</u> Participant – UP 1984 Mortality (Unisex) with 2 year setback. Spouse – UP 1984 Mortality (Unisex) with 1 year setback.
- (B) Interest 8.0% per annum

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65 60/60	.9191 .9327	.8834 .9023	.8503 .8738
55/55	.9450	.9197	.8958

Sample Factors for Joint and Last Survivor (J&LS) annuity:

Participant Age/ Spouse Age	50% J&LS
65/65	1.0113
60/60	1.0090
55/55	1.0071

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	.9781	.9266
60	.9873	.9556
55	.9925	.9731

Lump Sum Conversion Basis (available if under \$10,000):

For any lump sum option, the conversion factor is calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

Appendix II – Cash Balance Plan

Annuity and Alternate Form Conversion Basis:

- (A) <u>Mortality</u> Applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3).
- (B) <u>Interest</u> 10 Year Constant Treasury rate in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made, but not less than 4.50% per annum.

Sample Factors for Single Life (SLA) annuity:

Participant Age	SLA
65	1/(12.5355)
60	1/(14.1713)
55	1/(15.6540)

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	1/(13.6371)	1/(14.1879)	1/(14.7387)
60/60	1/(15.1858)	1/(15.6931)	1/(16.2003)
55/55	1/(16.5476)	1/(16.9945)	1/(17.4413)

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	1/(12.6501)	1/(13.0061)
60	1/(14.2313)	1/(14.4365)
55	1/(15.6837)	1/(15.7895)

Minimum Lump Sum Conversion Basis:

Minimum lump sum is the greater of

- (i) Cash Balance Account Balance
- (ii) Lump sum calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

SCHEDULE SB	Single Employer	- Dofino	d Ron	ofit Plan		OMB	No. 1210-0110	
(Form 5500)	Single-Employer Defined Benefit Plan							
	Actuarial information 2009							
Department of the Treasury Internal Revenue Service	This schedule is required to be filed under section 104 of the Employee							
Department of Labor Employee Benefits Security Administration	Retirement Income Security Act Internal Reve			section 6059 of th	ne		is Open to Public	
Pension Benefit Guaranty Corporation		•	•	5500 BF		11	nspection	
For calendar plan year 2009 or fiscal p	File as an attachm	01/2009	5500 or	and endir	l	12/3	31/2009	
Round off amounts to nearest do		01,000			3			
Caution: A penalty of \$1,000 will be		t unless reas	onable ca	use is establishe	d.			
A Name of plan	······			B Three-digi	t			
				plan numb	er (PN)	•	001	
KNOWLES ELECTRONICS, LI	C PENSION PLAN				h bişi,			
C Plan sponsor's name as shown on li	· · · · · · · · · · · · · · · · · · ·			D Employer lo	lentificat	tion Number (FIN)	
KNOWLES ELECTRONICS, LI				36-43163	363			
E Type of plan: X Single Multiple	e-A 🗍 Multiple-B 🛛 🖌 🖡	Prior year pla	an size: 🛛	100 or fewer	101-5	00 🛛 Moret	han 500	
Part I Basic Information	Pr∮ n. je transmiski (n. je						· · · · ·	
1 Enter the valuation date:	Month 1 Day 1	Year	2009					
2 Assets:								
					2a		67,863,763	
b Actuarial value					2b		67,863,763	
3 Funding target/participant count b	ureakdown		(1) N	lumber of particip	ants	(2)	Funding Target	
	peneficiaries receiving payment	3a	· · · · · · · · · · · · · · · · · · ·	·····	456		34,529,525	
b For terminated vested partic	ipants	3b			444		17,940,86	
c For active participants:								
(1) Non-vested benefits		3c(1)					458,749	
(2) Vested benefits		3c(2)					10,708,21	
(3) Total active		3c(3)			185		11,166,960	
d Total		3d			1 , 085		63,637,34	
4 If the plan is at-risk, check the box	x and complete items (a) and (b)	••••••						
a Funding target disregarding p	prescribed at-risk assumptions				4 a			
* * *	isk assumptions, but disregarding trar		•		4b			
P	nsecutive years and disregarding load	<u> </u>					6.84 %	
A _					. 5 6			
Statement by Enrolled Actuary					. •		1,523,02	
To the best of my knowledge, the information s	upplied in this schedule and accompanying sched b. In my opinion, each other assumption is reasonated ted experience under the plan.							
SIGN JIM DER	ENGOWSKI 9 ND				10/4	10		
s	Signature of actuary					Date		
James M. Derengowski, A.S.A., E.A. 08-06555							55	
Type or print name of actuary Most recent enrollment number							ent number	
Towers Watson Pennsylvar	nia, Inc.	• • • • • • • • • • • • • • • • • • • •			(312) 525-	-2500	
191 N. Wacker Drive	Firm name			Tel	ephone	number (inclu	uding area code)	
Chicago		0606-463	7	_				
	Address of the firm							
If the actuary has not fully reflected any instructions	regulation or ruling promulgated unde	er the statute	in comple	eting this schedul	e, check	the box and	see	
Instructions For Paperwork Reduction Act Notice	and OMB Control Numbers see th	e instruction	is for For	rm 5500 or 5500.	SF	Schedu	le SB (Form 5500) 200	
For Paperwork Reduction Act Notice	and OMB Control Numbers, see the	e instructior	ns for Foi	rm 5500 or 5500-	SF.	Schedu	ile SB (Form 5500) 20 v.09230	

Pa	art II	Begir	nning of year o	arryove	er and prefunding bal	ances							
							(a) (Carryover balance		(b)	Prefund	ing balance	
7								19,743,	060				0
8	B Portion used to offset prior year's funding requirement (Item 35 from prior year) 706, 739 0												
9	Amoun	t remaini	ng (Item 7 minus it	em 8)				19,036,	321				0
10	Interest	t on item	9 using prior year's	s actual re	turn of (14.79)%			(2,815,4	172)				
11	Prior ye	ear's exce	ess contributions to	be added	to prefunding balance:								
	a Exc	ess cont	ributions (Item 38 f	rom prior	year)								0
	b Inte	rest on (a	a) using prior year's	s effective	rate of <u>6.30</u> %								0
	C Tota	al availab	le at beginning of cu	irrent plan	year to add to prefunding bala	nce							0
	d Por	tion of (c) to be added to pr	efunding b	alance								0
12	Reduct	ion in ba	lances due to elect	ions or de	emed elections								
13	Balance	e at begi	nning of current ye	ar (item 9	+ item 10 + item 11d - item 1	2)		16,220,	849				0
Р	art III	Fun	ding percenta	aes									
				-							14	81.15	%
					je						15	106.64	
	Prior ye	ear's func	ding percentage for	· purposes	of determining whether carr	yover/prefu	unding bala				16	119.95	
17		5	<u> </u>		s less than 70 percent of the						17	117.75	%
	art IV		tributions and				igot, ontor .	such percentage					
				•	ear by employer(s) and emp	00005							
10	(a) Dat		(b) Amount pa		(c) Amount paid by	(a) [Date	(b) Amount pai	d by	(c) Amou	unt paid by	
(N	IM-DD-Y	YYY)	employer(s)	employees	(MM-DE		employer(s				loyees	
	1/15/2			00,000									
	7/01/2			00,000									
)/15/2			00,000									
12	2/21/2	2009	1,80	00,000									
						Totals ►	18(b)	7,80	0,000	18(c)			0
19	Discour	nted emp	oloyer contributions	- see ins	tructions for small plan with a	valuation	date after ti	he beginning of the	year:				
		-	-		mum required contribution fr			-	19a				
	-				djusted to valuation date				19b				
	C Contributions allocated toward minimum required contribution for current year adjusted to valuation date							839					
20													
	a Did the plan have a "funding shortfall" for the prior year?												
	b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?												
	C If 20a is "Yes," see instructions and complete the following table as applicable:												
	200		, 200		Liquidity shortfall as of en		er of this pla	an year					
		(1) 1	st		(2) 2nd		(3)	3rd			(4) 4t	h	
			0			0		C					0

Ра	rt V Assumptions u	ised to determine fi	unding target and target n	ormal cost		
21	Discount rate:					
	a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %		X N/A, full yield curve used
	b Applicable month (enter	r code)	· · · · · · · · · · · · · · · · · · ·		21b	1
22	Weighted average retireme	ent age			22	64
23	Mortality table(s) (see instr	ructions) Pres	scribed - combined X Pres	cribed - separate	Substitute)
Pa	rt VI Miscellaneous	items		E	_	
		in the non-prescribed actu	uarial assumptions for the current p			
25	Has a method change beer	n made for the current pla	in year? If "Yes," see instructions	regarding required attacl	nment	X Yes No
26	Is the plan required to provi	ide a Schedule of Active I	Participants? If "Yes," see instruct	ions regarding required	attachment	X Yes No
27	, <u> </u>		ding rules, enter applicable code a		27	
Ра	rt VII Reconciliation	n of unpaid minimu	m required contributions	for prior years		
28	Unpaid minimum required of	contribution for all prior ye	ears		28	0
29			unpaid minimum required contribu	1 5	29	
30	Remaining amount of unpa	id minimum required cont	tributions (item 28 minus item 29).		30	0
Ра	rt VIII Minimum requ	uired contribution f	or current year			
31	•		uctions)		31	1,523,021
32	Amortization installments:			Outstanding Bala	nce	Installment
	a Net shortfall amortization	n installment			0	0
	b Waiver amortization inst	allment			0	0
33			er the date of the ruling letter gran) and the waived amount		33	
34			r/prefunding balances (item 31 + it		34	1,523,021
			Carryover balance	Prefunding balar	nce	Total balance
35	Balances used to offset fun	nding requirement	0			0
36	Additional cash requiremen	nt (item 34 minus item 35)			36	1,523,021
37	Contributions allocated tow	ard minimum required co	ntribution for current year adjusted	to valuation date	37	7,484,839
38			ar (see instructions)		38	5,961,818
39	······································		ar (excess, if any, of item 36 over i		39	0,001,010
40					40	0

Knowles Electronics, LLC Pension Plan

EIN: 36-4316363

Plan Number: 001

Attachments to 2009 Schedule SB (Form 5500)

Line 22 — Description of Weighted Average Retirement Age

Line 25 — Change in Method

Line 26 — Schedule of Active Participant Data

Part V — Statement of Actuarial Assumptions and Methods

Part V — Summary of Plan Provisions

Appendix — Optional Forms of Benefit Conversion Bases

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan

Attachment to 2009 Schedule SB of Form 5500

Schedule SB, Line 22 - Description of Weighted Average Retirement Age

	(1)	(2)	(3)	(4)
	Retirement		Cumulative	
AGE	qx	рх	рх	(1)*(3)*AGE
55	0.010	0.990	1.0000	0.5500
56	0.010	0.990	0.9900	0.5544
57	0.010	0.990	0.9801	0.5587
58	0.010	0.990	0.9703	0.5628
59	0.010	0.990	0.9606	0.5668
60	0.010	0.990	0.9510	0.5706
61	0.010	0.990	0.9415	0.5743
62	0.150	0.850	0.9321	8.6685
63	0.050	0.950	0.7923	2.4957
64	0.050	0.950	0.7527	2.4086
65	1.000	0.000	0.7151	46.4815

Calculation of Weighted Average Retirement Age

Weighted Average Retirement Age:

64

SCHEDULE SB, LINE 25 – Change in Method

Knowles Electronics, LLC Pension Plan

EIN: 36-4316363

Plan Number: 001

Assumed plan-related expenses of \$155,000 were added to the target normal cost.

The valuation software used to produce the actuarial information submitted on the schedule has been refined to reflect evolving understanding of PPA requirements, and such modifications may be considered to be a method change. The percentage changes in funding target, target normal cost and plan assets due to the refinements in the software are each less than 2% (disregarding the effects of any changes that are automatically approved under final IRC 430 regulations), and the modifications to the software were designed to produce results no less accurate than the results produced by the software prior to the change. Therefore the change in funding method due to a change in valuation software receives automatic approval under IRS Announcement 2010-3.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan

EIN: 36-4316363 Plan: 001

Attachment to 2009 Schedule SB of Form 5500

Schedule SB, Line 26–Schedule of Active Participant Data

	Years of ServiceYears of Service								
Age Last Birthday	_	0-4	5-9	10-14	15-19	20-24	25-29	30-34	Over 34
0-24	Number Avg PAY Avg CB	2	0	0	0	0	0	0	0
25-29	Number Avg PAY Avg CB	7	1	0	0	0	0	0	0
30-34	Number Avg PAY Avg CB	9	4	1	0	0	0	0	0
35-39	Number Avg PAY Avg CB	16	9	6	0	0	0	0	0
40-44	Number Avg PAY Avg CB	9	13	6	3	3	0	0	0
45-49	Number Avg PAY Avg CB	6	11	4	7	6	4	0	0
50-54	Number Avg PAY Avg CB	7	8	4	3	4	5	1	1
55-59	Number Avg PAY Avg CB	2	5	2	1	1	2	2	1
60-64	Number Avg PAY Avg CB	1	2	0	3	0	0	0	3
65-69	Number Avg PAY Avg CB	0	0	0	0	0	0	0	0
70 & up	Number Avg PAY Avg CB	0	0	0	0	0	0	0	0
	-	•				o .			

Average Age = 45.4

Average Service = 11.0

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V – Statement of Actuarial Assumptions / Methods

Demographic Assumptions

Mortality for contributions:

 Healthy and Disabled 	Single combined table of rates for non-annuitants (based on RP- 2000 "Employees" table without collar or amount adjustments, with generational projection) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, with generational projection)				
Termination	Rates varying	by age and service			
	Sample rates:				
	Age	Male and Female			
	25	0.1899			
	40	0.0350			
	55	0.0015			
Disability	1965-1969 Inte	er-Company Table			
Retirement	Rates varying	by age			
	Sample rates:				
	Age	Rate			
	55-61	.01			
	62	.15			
	63-64	.05			
	65	1			
	The weighted	d average retirement age is 64.			
Form of payment		pay benefit: Life annuity benefit: Lump Sum			
Percent married	80% of males;	; 65% of females			
Spouse age	Wife five years	s younger than husband			
Methods					
Valuation date	First day of pla	an year			
Funding target and target normal cost	Present value	of accrued benefits			
Actuarial value of assets	Fair market va	alue of assets on the valuation date			

Knowles Electronics, LLC		EIN: 36-4316363
Knowles Electronics, LLC Pensio	n Plan	Plan: 001
Schedule SB, Part V – Statement	of Actuarial Assumptions / Methods	
Benefits Not Valued Change in Assumptions and N	All benefits described in the Plan Provisi were valued. Towers Watson has review Knowles and, based on that review, is no benefits required to be valued that were Methods Since Prior Valuation	ved the plan provisions with ot aware of any significant
Contributions	The funded interest rate was changed from yield curve as of January 2008 to the full as of January 2009, as provided under the 2006 (PPA).	l corporate bond yield curve
	The required mortality table used to calc target normal cost was updated to includ projected mortality improvements.	

Data Sources

Towers Watson used asset data supplied by the Knowles. Data was reviewed for reasonableness and consistency, but no audit was performed.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Plan Provisions

Effective January 1, 2002, a "cash balance" benefit structure was added to the Knowles Electronics, LLC Pension Plan.

- Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002 will remain covered under the prior version of the plan, which is a traditional "final average earnings" benefit structure.
- Employees who are hired after May 1, 2002 are covered under the cash balance benefit structure.
- Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002 are covered under the final average earnings benefit structure for service prior to January 1, 2002 and under the cash balance benefit structure for service after December 31, 2001.
 - The final average earnings benefit, for service prior to January 1, 2002, is indexed to reflect the individual's final average earnings at termination or retirement.
 - The cash balance account on January 1, 2002 is \$0 and will accumulate with pay credits and interest credits for service after December 31, 2001.
 - The total accrued benefit at termination or retirement cannot be less than the accrued benefit the individual would have earned under the final average earnings formula as of the cash balance amendment adoption date.

Actuarial Assumptions and Methods

Economic Assumptions

Discount rate*		7.75%
Funding interest rate basis:Applicable month	December rates published in January	
 Yield curve basis 	Full yield	curve
 Transition from current liability rates 	No	
Funding interest rates:		
► 10-year rate		7.20%
► 20-year rate	6.94%	
► 30-year rate	6.49%	
 Effective interest rate 	6.84%	
Annual rates of increase		
 Salaries: (rates varying by age) 	У	ears of Service
	Age	Male and Female
	25	6.70%
	40	5.20%
	55	4.20%
	The annua	al rate of salary increased the

The annual rate of salary increased that is equivalent to the rates used is 5.20%

►	Future Social Security wage bases	4.50%
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Interest credit on cash balance accounts

5.25%

EIN: 36-4316363 Plan: 001

Final Average Pay Plan Provisions

Effective date	Amended and restated effective January 1, 2002.
Covered employees	Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002: for all service.
	Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002: for service prior to January 1, 2002
Plan participation	All employees who were participants under the prior provisions of the plan continue to be participants.
Definitions	
Continuous service	Elapsed time since last date of hire. If a break in service of less than 12 months occurs, the severance period and the prior service period will be included in the participant's continuous service. If a break in service exceeds 12 months but does not exceed the prior period of service, the prior period of service will be included.
Vesting service	Same as Continuous Service.
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.
	Periods of severance are not included, even if considered as Continuous Service.
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Section 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.
	Compensation is limited by the pay cap provided in Code Section 401(a)(17).
Average monthly earnings	Monthly average of the participant's compensation, limited to the Social Security Wage Base, during that period of three consecutive years ending with or within the year of determination.
Final average monthly earnings	Monthly average of the participant's compensation during that period of five consecutive years during which the participant received his highest compensation within the ten-year period ending on the date of termination.
Covered compensation	The 35-year average of the Social Security Wage bases ending in the year a participant attains Social Security normal retirement age.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Social Security offset allowance	.65% multiplied by years of Credited Service (not to exceed 25 years) multiplied by the Average Monthly Earnings or 1/12th of Covered Compensation.
Monthly pension benefit	2% of Final Average Monthly Earnings multiplied by years of Credited Service (not to exceed 25 years), reduced by the participant's Social Security Offset Allowance.
Benefit eligibility	
Normal retirement	Age 65 with five years of Vesting Service.
Early retirement	Age 55 with five years of Vesting Service.
Deferred vested	Five years of Vesting Service.
Pre-retirement death benefit	Death of a married participant while eligible for retirement or deferred vested benefit.
Disability retirement	Total and permanent disability after 5 years of Vesting Service.
Benefits payable	
Normal retirement	Monthly Pension Benefit

Normal retirement	Monthly Pension Benefit.
Early retirement	Monthly Pension Benefit reduced by 8% per year early for ages 62 to 65 and by 4% per year for ages 55 to 62.
Termination with deferred vested benefit	Monthly Pension Benefit, payable at age 65. Payments may commence as early as age 55, and are then reduced as for early retirement above.
Pre-retirement death benefit	Immediate annuity payable to the surviving spouse, determined as if the participant had retired immediately prior to death and elected the 50% surviving spouse annuity option. There is no reduction for commencement of benefits prior to age 65.
Disability retirement	Monthly Pension Benefit, commencing at Total and Permanent Disability.
Form of payment	Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value.

Cash Balance Plan Provisions

Effective date	January 1, 2002.	
Covered employees	Employees who were hired after May 1, 2002: All service.	
	Employees who were hired prior to May 1, age forty on May 1, 2002: Service after De	
Plan participation	Anniversary date following the completion Service.	of one year of Continuous
Definitions		
Continuous service	Elapsed time since last date of hire. If a bre 12 months occurs, the severance period ar will be included in the participant's continue service exceeds 12 months but does not ex service, the prior period of service will be in	nd the prior service period ous service. If a break in xceed the prior period of
Vesting service	Same as Continuous Service.	
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.	
	Periods of severance are not included, even Continuous Service.	n if considered as
Compensation	Total cash compensation, before withhold overtime, bonuses, commissions, elective 401(k) and Section 125 plans, and excludir contributions to a deferred compensation p	contributions under Section ng any employer
	Compensation is limited by the pay cap pro (a)(17).	ovided in Code Section 401
Opening cash balance account	The opening cash balance account has a z Pay Credit is allocated.	zero balance until the first
Cash balance account	A hypothetical account maintained for each participant consisting of the accumulation of Pay Credits and Interest Credits.	
Pay credit	At the end of each plan year, the participant's Cash Balance Account is allocated a Pay Credit equal to the percentage from the table below, multiplied by his Compensation for that plan year.	
	Sum of Attained Age	Annual

Knowles Electronics, LLC		EIN: 36-4316363
Knowles Electronics, LLC Pension Plan		Plan: 001
Schedule SB, Part V - Summ	ary Plan Provisions	
	And Credited Service	Pay Credit
	Less than 40	3.0%
	40 to 49	3.5%
	50 to 59	4.5%
	60 to 69	6.0%
	70 or more	7.5%
Interest credit	At the end of each plan year that the participant has a Cash Balance Account, the Cash Balance Account is allocated an interest credit equal to the value of the Cash Balance Account as of the end of the preceding plan year, multiplied by the Interest Crediting Rate for the current plan year.	
Interest crediting rate	Annual yield on the 10-year Treasury Constant Maturity that is in effect for the September 30th of the preceding plan year, but no less than 4.50%.	
Monthly pension benefit	Single life annuity that is actuarially equivalent to the participant's Cash Balance Account, based on the participant's age at commencement.	
Benefit eligibility		
Termination or retirement	Three years of Vesting Service.	
Pre-retirement death benefit	Three years of Vesting Service.	
Disability retirement	Total and permanent disability aft	er 5 years of Vesting Service.
Benefits payable		
Termination or retirement	Monthly Pension Benefit.	
Pre-retirement death benefit	Lump sum payment of the Cash E married on the date of death, the between an actuarially equivalent payment	
Disability retirement	•	

Knowles Electronics, LLC

EIN: 36-4316363

Knowles Electronics, LLC Pension Plan

Schedule B, Part V - Summary Plan Provisions

Form of payment

Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value, including a lump sum payment of the Cash Balance Account.

Changes from the prior year

The benefits valued for those active as of January 1, 2009 reflect the change in the IRC Section 401(a)(17) pay limit to \$245,000. The increase in the IRC Section 415(b) maximum benefit limit to \$195,000 has been reflected for participants commencing benefits on or after January 1, 2009.

Plan: 001

Knowles Electronics, LLC. Pension Plan Optional Forms of Benefit Conversion Bases

Plan	Conversion Basis
Final Average Pay Plan	Appendix I
Cash Balance Plan	Appendix II

Appendix I – Final Average Pay Plan

Annuity Conversion Basis: N/A (the benefit is defined as an annuity)

Alternate Form Annuity Conversion Basis:

- (A) <u>Mortality</u> Participant – UP 1984 Mortality (Unisex) with 2 year setback. Spouse – UP 1984 Mortality (Unisex) with 1 year setback.
- (B) Interest 8.0% per annum

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65 60/60	.9191 .9327	.8834 .9023	.8503 .8738
55/55	.9450	.9197	.8958

Sample Factors for Joint and Last Survivor (J&LS) annuity:

Participant Age/ Spouse Age	50% J&LS
65/65	1.0113
60/60	1.0090
55/55	1.0071

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	.9781	.9266
60	.9873	.9556
55	.9925	.9731

Lump Sum Conversion Basis (available if under \$10,000):

For any lump sum option, the conversion factor is calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

Appendix II – Cash Balance Plan

Annuity and Alternate Form Conversion Basis:

- (A) <u>Mortality</u> Applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3).
- (B) <u>Interest</u> 10 Year Constant Treasury rate in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made, but not less than 4.50% per annum.

Sample Factors for Single Life (SLA) annuity:

Participant Age	SLA
65	1/(12.5355)
60	1/(14.1713)
55	1/(15.6540)

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	1/(13.6371)	1/(14.1879)	1/(14.7387)
60/60	1/(15.1858)	1/(15.6931)	1/(16.2003)
55/55	1/(16.5476)	1/(16.9945)	1/(17.4413)

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	1/(12.6501)	1/(13.0061)
60	1/(14.2313)	1/(14.4365)
55	1/(15.6837)	1/(15.7895)

Minimum Lump Sum Conversion Basis:

Minimum lump sum is the greater of

- (i) Cash Balance Account Balance
- (ii) Lump sum calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

Knowles Electronics, LLC Pension Plan EIN: 36-4316363 Plan Number: 001 Schedule SB, Line 24 - Change in Actuarial Assumptions

The full corporate bond yield curve used to calculate the funding target and target normal cost was updated from January 2008 to January 2009.

The interest rate used to determine lump sums was changed from the full yield curve as of January 2008 to the full yield curve as of January 2009.

The mortality table used to determine lump sums was changed form the IRS Prescribed 2008 Applicable Mortality Table under IRC Sections 417(e)(3) to the IRS Prescribed 2009 Applicable Mortality Table.

SCHEDULE SB, LINE 25 – Change in Method

Knowles Electronics, LLC Pension Plan

EIN: 36-4316363

Plan Number: 001

Assumed plan-related expenses of \$155,000 were added to the target normal cost.

The valuation software used to produce the actuarial information submitted on the schedule has been refined to reflect evolving understanding of PPA requirements, and such modifications may be considered to be a method change. The percentage changes in funding target, target normal cost and plan assets due to the refinements in the software are each less than 2% (disregarding the effects of any changes that are automatically approved under final IRC 430 regulations), and the modifications to the software were designed to produce re sults no less accurate than the results produced by the software prior to the change. Therefore the change in funding method due to a change in valuation software receives autom atic approval under IRS Announcement 2010-3.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan

EIN: 36-4316363 Pian: 001

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Attachment to 2009 Schedule SB of Form 5500

Schedule SB, Line 26-Schedule of Active Participant Data

Years of Service- 4 5-9 10-14 15-19 20-24 2 0 0 0 0 0 7 1 0 0 0 0 0	•	C	с С	2	ю 4	1	ε	0	0
9 0 -	-	Q	Q						
				4	4	7	D	0	ο
2 7 7		16	9 13	6	7 8	2	1	0	0
Age Last Birthday 0-24 Number Avg PAY Avg CB 25-29 Number	Avg PAY Avg CB 30-34 Number Avg PAY		Avg CB 40-44 Number Avg PAY				Avg CB 60-64 Number Avg PAY	Avg CB 65-69 Number Avg PAY	Avg CB 70 & up Number Avg PAY

Knowles Electronics, LLCEIN: 3Knowles Electronics, LLC Pension PlanSchedule SB, Part V – Statement of Actuarial Assumptions / Methods

Demographic Assumptions

Mortality for contributions:

 Healthy and Disabled 	2000 "Employ with generatio	ed table of rates for non-annuitants (based on RP- ees" table without collar or amount adjustments, nal projection) and annuitants (based on RP-2000 litants" table without collar or amount adjustments, nal projection)	
Termination	Rates varying	by age and service	
	Sample rates:		
	Age I	Male and Female	
	25	0.1899	
	40	0.0350	
	55	0.0015	
Disability	1965-1969 Inter-Company Table		
Retirement	Rates varying by age		
	Sample rates:		
	Age	Rate	
	55-61	.01	
	62	.15	
	63-64	.05	
	65	1	
	The weighted	average retirement age is 64.	
Form of payment	Final average pay benefit: Life annuity Cash balance benefit: Lump Sum		
Percent married	80% of males; 65% of females		
Spouse age	Wife five years younger than husband		
Methods			
Valuation date	First day of pla	n year	
Funding target and target normal cost	Present value o	of accrued benefits	
Actuarial value of assets	Fair market value of assets on the valuation date		

EIN: 36-4316363

Plan: 001

Knowles Electronics, LLC		EIN: 36-4316363		
Knowles Electronics, LLC Pension Plan		Plan: 001		
Schedule SB, Part V – Statement of Actuarial Assumptions / Methods				
Benefits Not Valued	All benefits described in the Plan Plan were valued. Towers Watson has re			

Change in Assumptions and Methods Since Prior Valuation

Contributions The funded interest rate was changed from the full corporate bond yield curve as of January 2008 to the full corporate bond yield curve as of January 2009, as provided under the Pension Protection Act of 2006 (PPA). The required mortality table used to calculate the funding target and

benefits required to be valued that were not.

target normal cost was updated to include one additional year of projected mortality improvements.

Knowles and, based on that review, is not aware of any significant

Data Sources

Towers Watson used asset data supplied by the Knowles. Data was reviewed for reasonableness and consistency, but no audit was performed.

Knowles Electronics, LLC EIN: 36-4316363 **Knowles Electronics, LLC Pension Plan** Schedule SB, Part V - Statement of Actuarial Assumptions / Methods

Actuarial Assumptions and Methods

Economic Assumptions

Discount rate*	7.75%
Funding interest rate basis:	
 Applicable month 	December rates published in January
 Yield curve basis 	Full yield curve
 Transition from current liability rates 	No
Funding interest rates:	
► 10-year rate	7.20%
► 20-year rate	6.94%
► 30-year rate	6.49%
 Effective interest rate 	6.84%

Annual rates of increase

Salaries: (rates varying by age)

Age	Male and Female
25	6.70%
40	5.20%
55	4.20%

Years of Service

The annual rate of salary increased that is equivalent to the rates used is 5.20%

- Future Social Security wage bases
- Interest credit on cash balance accounts

4.50% 5.25% Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Plan Provisions

Effective January 1, 2002, a "cash balance" benefit structure was added to the Knowles Electronics, LLC Pension Plan.

- Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002 will remain covered under the prior version of the plan, which is a traditional "final average earnings" benefit structure.
- Employees who are hired after May 1, 2002 are covered under the cash balance benefit structure.
- Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002 are covered under the final average earnings benefit structure for service prior to January 1, 2002 and under the cash balance benefit structure for service after December 31, 2001.
 - The final average earnings benefit, for service prior to January 1, 2002, is indexed to reflect the individual's final average earnings at termination or retirement.
 - The cash balance account on January 1, 2002 is \$0 and will accumulate with pay credits and interest credits for service after December 31, 2001.
 - The total accrued benefit at termination or retirement cannot be less than the accrued benefit the individual would have earned under the final average earnings formula as of the cash balance amendment adoption date.

EIN: 36-4316363 Plan: 001

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Final Average Pay Plan Provisions

Effective date	Amended and restated effective January 1, 2002.
Covered employees	Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002: for all service.
	Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002: for service prior to January 1, 2002
Plan participation	All employees who were participants under the prior provisions of the plan continue to be participants.
Definitions	
Continuous service	Elapsed time since last date of hire. If a break in service of less than 12 months occurs, the severance period and the prior service period will be included in the participant's continuous service. If a break in service exceeds 12 months but does not exceed the prior period of service, the prior period of service will be included.
Vesting service	Same as Continuous Service.
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.
	Periods of severance are not included, even if considered as Continuous Service.
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Section 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.
	Compensation is limited by the pay cap provided in Code Section 401(a)(17).
Average monthly earnings	Monthly average of the participant's compensation, limited to the Social Security Wage Base, during that period of three consecutive years ending with or within the year of determination.
Final average monthly earnings	Monthly average of the participant's compensation during that period of five consecutive years during which the participant received his highest compensation within the ten-year period ending on the date of termination.
Covered compensation	The 35-year average of the Social Security Wage bases ending in the year a participant attains Social Security normal retirement age.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

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Plan: 001

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Social Security offset allowance	.65% multiplied by years of Credited Service (not to exceed 25 years) multiplied by the Average Monthly Earnings or 1/12th of Covered Compensation.
Monthly pension benefit	2% of Final Average Monthly Earnings multiplied by years of Credited Service (not to exceed 25 years), reduced by the participant's Social Security Offset Allowance.
Benefit eligibility	
Normal retirement	Age 65 with five years of Vesting Service.
Early retirement	Age 55 with five years of Vesting Service.
Deferred vested	Five years of Vesting Service.
Pre-retirement death benefit	Death of a married participant while eligible for retirement or deferred vested benefit.
Disability retirement	Total and permanent disability after 5 years of Vesting Service.
Benefits payable	
Normal retirement	Monthly Pension Benefit.
Early retirement	Monthly Pension Benefit reduced by 8% per year early for ages 62 to 65 and by 4% per year for ages 55 to 62.
Termination with deferred vested benefit	Monthly Pension Benefit, payable at age 65. Payments may commence as early as age 55, and are then reduced as for early retirement above.
Pre-retirement death benefit	Immediate annuity payable to the surviving spouse, determined as if the participant had retired immediately prior to death and elected the 50% surviving spouse annuity option. There is no reduction for commencement of benefits prior to age 65.
Disability retirement	Monthly Pension Benefit, commencing at Total and Permanent Disability.
Form of payment	Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value.

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Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule B, Part V - Summary Plan Provisions

EIN: 36-4316363 Plan: 001 . .

Cash Balance Plan Provisions

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Effective date	January 1, 2002.		
Covered employees	Employees who were hired after May 1, 2002: All service.		
	Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002: Service after December 31, 2001.		
Plan participation	Anniversary date following the completion of one year of Continuous Service.		
Definitions			
Continuous service	Elapsed time since last date of hire. If a break in service of less than 12 months occurs, the severance period and the prior service period will be included in the participant's continuous service. If a break in service exceeds 12 months but does not exceed the prior period of service, the prior period of service will be included.		
Vesting service	Same as Continuous Service.		
Credited service	Continuous Service from the participant's of including the one year required for particip		
× .	Periods of severance are not included, ever Continuous Service.	en if considered as	
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Sectior 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.		
	Compensation is limited by the pay cap pro (a)(17).	ovided in Code Section 401	
Opening cash balance account	The opening cash balance account has a zero balance until the first Pay Credit is allocated.		
Cash balance account	A hypothetical account maintained for each participant consisting of the accumulation of Pay Credits and Interest Credits.		
Pay credit	At the end of each plan year, the participant's Cash Balance Account		
	Sum of Attained Age	Annual	

Knowles Electronics, LLC

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EIN: 36-4316363

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Knowles Electronics, LLC Pension Plan

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Plan: 001

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Schedule SB, Part V - Sumr	nary Plan Provisions And Credited Service	Pay Credit	
	Less than 40	3.0%	
	40 to 49	3.5%	
	50 to 59	4.5%	
	60 to 69	6.0%	
	70 or more	7.5%	
Interest credit	At the end of each plan year that the Account, the Cash Balance Account equal to the value of the Cash Balar preceding plan year, multiplied by th current plan year.	t is allocated an interest credit nce Account as of the end of the	
Interest crediting rate	Annual yield on the 10-year Treasur for the September 30th of the prece 4.50%.		
Monthly pension benefit	Single life annuity that is actuarially Cash Balance Account, based on th commencement.		
Benefit eligibility			
Termination or retirement	Three years of Vesting Service.		
Pre-retirement death benefit	Three years of Vesting Service.		
Disability retirement	Total and permanent disability after 5 years of Vesting Service.		
Benefits payable			
Termination or retirement	Monthly Pension Benefit.		
Pre-retirement death benefit	Lump sum payment of the Cash Bal married on the date of death, the su between an actuarially equivalent sin payment	rviving spouse may choose	
Disability retirement	Monthly Pension Benefit, after a 12- assuming that Credited Service and accrue during the elimination period during the elimination period at the la at the time of his disability.	Vesting Service continue to and that Compensation continues	

EIN: 36-4316363

Knowles Electronics, LLC Pension Plan

Plan: 001

Schedule B, Part V - Summary Plan Provisions

Form of payment

Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value, including a lump sum payment of the Cash Balance Account.

Changes from the prior year

The benefits valued for those active as of January 1, 2009 reflect the change in the IRC Section 401(a)(17) pay limit to \$245,000. The increase in the IRC Section 415(b) maximum benefit limit to \$195,000 has been reflected for participants commencing benefits on or after January 1, 2009.

Knowles Electronics, LLC. Pension Plan Optional Forms of Benefit Conversion Bases

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Plan	Conversion Basis	
Final Average Pay Plan	Appendix I	
Cash Balance Plan	Appendix II	

Appendix I - Final Average Pay Plan

Annuity Conversion Basis: N/A (the benefit is defined as an annuity)

Alternate Form Annuity Conversion Basis:

- Mortality (A) Participant - UP 1984 Mortality (Unisex) with 2 year setback. Spouse - UP 1984 Mortality (Unisex) with 1 year setback.
- (B) Interest – 8.0% per annum

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	.9191	.8834	.8503
60/60	.9327	.9023	.8738
55/55	.9450	.9197	.8958

Sample Factors for Joint and Last Survivor (J&LS) annuity:

Participant Age/ Spouse Age	50% J&LS
65/65	1.0113
60/60	1.0090
55/55	1.0071

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	.9781	.9266
60	.9873	.9556
55	.9925	.9731

Lump Sum Conversion Basis (available if under \$10,000):

For any lump sum option, the conversion factor is calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

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Appendix II – Cash Balance Plan

Annuity and Alternate Form Conversion Basis:

- (A) <u>Mortality</u> Applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3).
- (B) <u>Interest</u> 10 Year Constant Treasury rate in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made, but not less than 4.50% per annum.

Sample Factors for Single Life (SLA) annuity:

Participant Age	SLA
65	1/(12.5355)
60	1/(14.1713)
55	1/(15.6540)

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	1/(13.6371)	1/(14.1879)	1/(14.7387)
60/60	1/(15.1858)	1/(15.6931)	1/(16.2003)
55/55	1/(16.5476)	1/(16.9945)	1/(17.4413)

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	1/(12.6501)	1/(13.0061)
60	1/(14.2313)	1/(14.4365)
55	1/(15.6837)	1/(15.7895)

Minimum Lump Sum Conversion Basis:

Minimum lump sum is the greater of

- (i) Cash Balance Account Balance
- (ii) Lump sum calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

Knowles Electronics, LLCEIN: 3Knowles Electronics, LLC Pension PlanSchedule SB, Part V – Statement of Actuarial Assumptions / Methods

Demographic Assumptions

Mortality for contributions:

 Healthy and Disabled 	Single combined table of rates for non-annuitants (based on RP- 2000 "Employees" table without collar or amount adjustments, with generational projection) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, with generational projection)	
Termination	Rates varying by age and service	
	Sample rates:	
	Age Male and Female	
	25 0.1899	
	40 0.0350	
	55 0.0015	
Disability	1965-1969 Inter-Company Table	
Retirement	Rates varying by age	
	Sample rates:	
	Age Rate	
	55-61 .01	
	62 .15	
	63-64 .05	
	65 1	
	The weighted average retirement age is 64.	
Form of payment	Final average pay benefit: Life annuity Cash balance benefit: Lump Sum	
Percent married	80% of males; 65% of females	
Spouse age	Wife five years younger than husband	
Methods		
Valuation date	First day of plan year	
Funding target and target normal cost	Present value of accrued benefits	
Actuarial value of assets	Fair market value of assets on the valuation date	

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Schedule SB, Part V – Staten	nent of Actuarial Assumptions / Met	hods
Benefits Not Valued		n Provisions section of this report is reviewed the plan provisions with

Change in Assumptions and Methods Since Prior Valuation

Contributions The funded interest rate was changed from the full corporate bond yield curve as of January 2008 to the full corporate bond yield curve as of January 2009, as provided under the Pension Protection Act of 2006 (PPA). The required mortality table used to calculate the funding target and

benefits required to be valued that were not.

target normal cost was updated to include one additional year of projected mortality improvements.

Knowles and, based on that review, is not aware of any significant

Data Sources

Towers Watson used asset data supplied by the Knowles. Data was reviewed for reasonableness and consistency, but no audit was performed.

Knowles Electronics, LLC EIN: 36-4316363 **Knowles Electronics, LLC Pension Plan** Schedule SB, Part V - Statement of Actuarial Assumptions / Methods

Actuarial Assumptions and Methods

Economic Assumptions

Discount rate*	7.75%
Funding interest rate basis:	
 Applicable month 	December rates published in January
 Yield curve basis 	Full yield curve
 Transition from current liability rates 	No
Funding interest rates:	
► 10-year rate	7.20%
► 20-year rate	6.94%
► 30-year rate	6.49%
 Effective interest rate 	6.84%

Annual rates of increase

Salaries: (rates varying by age)

Age	Male and Female
25	6.70%
40	5.20%
55	4.20%

Years of Service

The annual rate of salary increased that is equivalent to the rates used is 5.20%

- Future Social Security wage bases
- Interest credit on cash balance accounts

4.50% 5.25% Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

Plan Provisions

Effective January 1, 2002, a "cash balance" benefit structure was added to the Knowles Electronics, LLC Pension Plan.

- Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002 will remain covered under the prior version of the plan, which is a traditional "final average earnings" benefit structure.
- Employees who are hired after May 1, 2002 are covered under the cash balance benefit structure.
- Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002 are covered under the final average earnings benefit structure for service prior to January 1, 2002 and under the cash balance benefit structure for service after December 31, 2001.
 - The final average earnings benefit, for service prior to January 1, 2002, is indexed to reflect the individual's final average earnings at termination or retirement.
 - The cash balance account on January 1, 2002 is \$0 and will accumulate with pay credits and interest credits for service after December 31, 2001.
 - The total accrued benefit at termination or retirement cannot be less than the accrued benefit the individual would have earned under the final average earnings formula as of the cash balance amendment adoption date.

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Final Average Pay Plan Provisions

Effective date	Amended and restated effective January 1, 2002.
Covered employees	Employees who were hired prior to May 1, 2002 and who were age forty or older on May 1, 2002: for all service.
	Employees who were hired prior to May 1, 2002 and who were under age forty on May 1, 2002: for service prior to January 1, 2002
Plan participation	All employees who were participants under the prior provisions of the plan continue to be participants.
Definitions	
Continuous service	Elapsed time since last date of hire. If a break in service of less than 12 months occurs, the severance period and the prior service period will be included in the participant's continuous service. If a break in service exceeds 12 months but does not exceed the prior period of service, the prior period of service will be included.
Vesting service	Same as Continuous Service.
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.
	Periods of severance are not included, even if considered as Continuous Service.
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Section 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.
	Compensation is limited by the pay cap provided in Code Section 401(a)(17).
Average monthly earnings	Monthly average of the participant's compensation, limited to the Social Security Wage Base, during that period of three consecutive years ending with or within the year of determination.
Final average monthly earnings	Monthly average of the participant's compensation during that period of five consecutive years during which the participant received his highest compensation within the ten-year period ending on the date of termination.
Covered compensation	The 35-year average of the Social Security Wage bases ending in the year a participant attains Social Security normal retirement age.

Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule SB, Part V - Summary Plan Provisions

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Social Security offset allowance	.65% multiplied by years of Credited Service (not to exceed 25 years) multiplied by the Average Monthly Earnings or 1/12th of Covered Compensation.
Monthly pension benefit	2% of Final Average Monthly Earnings multiplied by years of Credited Service (not to exceed 25 years), reduced by the participant's Social Security Offset Allowance.
Benefit eligibility	
Normal retirement	Age 65 with five years of Vesting Service.
Early retirement	Age 55 with five years of Vesting Service.
Deferred vested	Five years of Vesting Service.
Pre-retirement death benefit	Death of a married participant while eligible for retirement or deferred vested benefit.
Disability retirement	Total and permanent disability after 5 years of Vesting Service.
Benefits payable	
Normal retirement	Monthly Pension Benefit.
Early retirement	Monthly Pension Benefit reduced by 8% per year early for ages 62 to 65 and by 4% per year for ages 55 to 62.
Termination with deferred vested benefit	Monthly Pension Benefit, payable at age 65. Payments may commence as early as age 55, and are then reduced as for early retirement above.
Pre-retirement death benefit	Immediate annuity payable to the surviving spouse, determined as if the participant had retired immediately prior to death and elected the 50% surviving spouse annuity option. There is no reduction for commencement of benefits prior to age 65.
Disability retirement	Monthly Pension Benefit, commencing at Total and Permanent Disability.
Form of payment	Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value.

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Knowles Electronics, LLC Knowles Electronics, LLC Pension Plan Schedule B, Part V - Summary Plan Provisions

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Cash Balance Plan Provisions

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Effective date	January 1, 2002.		
Covered employees	Employees who were hired after May 1, 2002: All service.		
	Employees who were hired prior to May 1, age forty on May 1, 2002: Service after De		
Plan participation	Anniversary date following the completion Service.	of one year of Continuous	
Definitions			
Continuous service	Elapsed time since last date of hire. If a br 12 months occurs, the severance period a will be included in the participant's continue service exceeds 12 months but does not e service, the prior period of service will be in	nd the prior service period ous service. If a break in xceed the prior period of	
Vesting service	Same as Continuous Service.		
Credited service	Continuous Service from the participant's date of participation, including the one year required for participation eligibility.		
ς.	Periods of severance are not included, ever Continuous Service.	en if considered as	
Compensation	Total cash compensation, before withholding, including base pay, overtime, bonuses, commissions, elective contributions under Section 401(k) and Section 125 plans, and excluding any employer contributions to a deferred compensation plan.		
	Compensation is limited by the pay cap pro (a)(17).	ovided in Code Section 401	
Opening cash balance account	The opening cash balance account has a zero balance until the first Pay Credit is allocated.		
Cash balance account	A hypothetical account maintained for each participant consisting of the accumulation of Pay Credits and Interest Credits.		
Pay credit	At the end of each plan year, the participant's Cash Balance Account is allocated a Pay Credit equal to the percentage from the table below, multiplied by his Compensation for that plan year.		
	Sum of Attained Age	Annual	

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Knowles Electronics, LLC Pension Plan

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Schedule SB, Part V - Sum	mary Plan Provisions And Credited Service	Pay Credit	
	Less than 40	3.0%	
	40 to 49	3.5%	
	50 to 59	4.5%	
	60 to 69	6.0%	
	70 or more	7.5%	
Interest credit	At the end of each plan year that the Account, the Cash Balance Account equal to the value of the Cash Bala preceding plan year, multiplied by the current plan year.	nt is allocated an interest credit ance Account as of the end of the	
Interest crediting rate		Annual yield on the 10-year Treasury Constant Maturity that is in effect for the September 30th of the preceding plan year, but no less than 4.50%.	
Monthly pension benefit	Single life annuity that is actuarially equivalent to the participant's Cash Balance Account, based on the participant's age at commencement.		
Benefit eligibility			
Termination or retirement	Three years of Vesting Service.		
Pre-retirement death benefit	Three years of Vesting Service.		
Disability retirement	Total and permanent disability after 5 years of Vesting Service.		
Benefits payable			
Termination or retirement	Monthly Pension Benefit.		
Pre-retirement death benefit	Lump sum payment of the Cash Ba married on the date of death, the su between an actuarially equivalent so payment	urviving spouse may choose	
Disability retirement	Monthly Pension Benefit, after a 12 assuming that Credited Service and accrue during the elimination period during the elimination period at the at the time of his disability.	d Vesting Service continue to d and that Compensation continues	

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Schedule B, Part V - Summary Plan Provisions

Form of payment

Retirement and termination benefits are paid as a single life annuity if the participant has no eligible spouse, otherwise as an actuarially reduced 50% joint and survivor annuity. In lieu of the basic form of payment, the participant may elect an optional form of payment, which is actuarially equivalent in value, including a lump sum payment of the Cash Balance Account.

Changes from the prior year

The benefits valued for those active as of January 1, 2009 reflect the change in the IRC Section 401(a)(17) pay limit to \$245,000. The increase in the IRC Section 415(b) maximum benefit limit to \$195,000 has been reflected for participants commencing benefits on or after January 1, 2009.

Knowles Electronics, LLC. Pension Plan Optional Forms of Benefit Conversion Bases

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Plan	Conversion Basis
Final Average Pay Plan	Appendix I
Cash Balance Plan	Appendix II

Appendix I - Final Average Pay Plan

Annuity Conversion Basis: N/A (the benefit is defined as an annuity)

Alternate Form Annuity Conversion Basis:

- Mortality (A) Participant - UP 1984 Mortality (Unisex) with 2 year setback. Spouse - UP 1984 Mortality (Unisex) with 1 year setback.
- (B) Interest – 8.0% per annum

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	.9191	.8834	.8503
60/60	.9327	.9023	.8738
55/55	.9450	.9197	.8958

Sample Factors for Joint and Last Survivor (J&LS) annuity:

Participant Age/ Spouse Age	50% J&LS
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Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
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60	.9873	.9556
55	.9925	.9731

Lump Sum Conversion Basis (available if under \$10,000):

For any lump sum option, the conversion factor is calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.

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Appendix II – Cash Balance Plan

Annuity and Alternate Form Conversion Basis:

- (A) <u>Mortality</u> Applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3).
- (B) <u>Interest</u> 10 Year Constant Treasury rate in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made, but not less than 4.50% per annum.

Sample Factors for Single Life (SLA) annuity:

Participant Age	SLA
65	1/(12.5355)
60	1/(14.1713)
55	1/(15.6540)

Sample Factors for Joint and Survivor (J&S) forms of annuity:

Participant Age/ Spouse Age	50% J&S	75% J&S	100% J&S
65/65	1/(13.6371)	1/(14.1879)	1/(14.7387)
60/60	1/(15.1858)	1/(15.6931)	1/(16.2003)
55/55	1/(16.5476)	1/(16.9945)	1/(17.4413)

Sample Factors for Certain and Life (C&L) annuities:

Participant Age	5 Year C&L	10 Year C&L
65	1/(12.6501)	1/(13.0061)
60	1/(14.2313)	1/(14.4365)
55	1/(15.6837)	1/(15.7895)

Minimum Lump Sum Conversion Basis:

Minimum lump sum is the greater of

- (i) Cash Balance Account Balance
- (ii) Lump sum calculated using the applicable Mortality table established by the Internal Revenue Service under Code Section 417(e)(3) and the segment interest rates established by the IRS under 417(e) in effect for the September of the Plan Year immediately preceding the Plan Year in which payment is to be made.