

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089
		2009
		This Form is Open to Public Inspection

Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>06/30/2009</u>	
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 than 12 months).
C If the plan is a collectively-bargained plan, check here.	☒
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information										
1a Name of plan PENSION PLAN FOR HOURLY EMPLOYEES OF TUBOCARE, INC. (UNITED BROTHERHOOD OF CARPENTER AND JOINERS OF AMERICA, LOCAL UNION NUMBER 724)	<table border="1"> <tr> <td>1b Three-digit plan number (PN) ►</td> <td>002</td> </tr> <tr> <td>1c Effective date of plan</td> <td>01/17/1995</td> </tr> <tr> <td>2b Employer Identification Number (EIN)</td> <td>59-3744121</td> </tr> <tr> <td>2c Sponsor's telephone number</td> <td>713-336-1300</td> </tr> <tr> <td>2d Business code (see instructions)</td> <td>333200</td> </tr> </table>	1b Three-digit plan number (PN) ►	002	1c Effective date of plan	01/17/1995	2b Employer Identification Number (EIN)	59-3744121	2c Sponsor's telephone number	713-336-1300	2d Business code (see instructions)	333200
1b Three-digit plan number (PN) ►	002										
1c Effective date of plan	01/17/1995										
2b Employer Identification Number (EIN)	59-3744121										
2c Sponsor's telephone number	713-336-1300										
2d Business code (see instructions)	333200										
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) TURBOCARE, INC. 3100 SAM HOUSTON PARKWAY HOUSTON, TX 77047											

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.	03/10/2010	DANIEL NAVATTA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") TUBOCARE, INC. 3100 SAM HOUSTON PARKWAY HOUSTON, TX 77047	3b Administrator's EIN 59-3744121 3c Administrator's telephone number 713-336-1300
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	132
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	0
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	0
d Subtotal. Add lines 6a , 6b , and 6c	6d	0
e 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	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	

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

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

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

a Pension Schedules

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

b General Schedules

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

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2009</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 06/30/2009

Round off amounts to nearest dollar.
Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan PENSION PLAN FOR HOURLY EMPLOYEES OF TUBOCARE, INC. (UNITED BROTHERHOOD OF CARPENTER AND JOINERS OF AMERICA, LOCAL UNION NUMBER 724)	B Three-digit plan number (PN) 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TURBOCARE, INC.	D Employer Identification Number (EIN) 59-3744121

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B **F** Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2009		
2 Assets:		
a Market value	2a	2667220
b Actuarial value	2b	2667220
3 Funding target/participant count breakdown	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	3a 20	979256
b For terminated vested participants	3b 35	619848
c For active participants:		
(1) Non-vested benefits	3c(1)	57516
(2) Vested benefits	3c(2)	1642578
(3) Total active	3c(3) 71	1700094
d Total	3d 126	3299198
4 If the plan is at-risk, check the box and complete items (a) and (b) ☐		
a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b	
5 Effective interest rate	5	6.83 %
6 Target normal cost	6	77338

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

SIGN HERE		
Signature of actuary	Date	
AL-KARIM ALIDINA	08-06110	
Type or print name of actuary	Most recent enrollment number	
HEWITT ASSOCIATES LLC	571-226-2400	
Firm name	Telephone number (including area code)	
3130 FAIRVIEW PARK DRIVE SUITE 300 FALLS CHURCH, VA 22042-4514		
Address of the firm		

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

Part II Beginning of year carryover and prefunding balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	547133	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	93700	0
9	Amount remaining (Item 7 minus item 8).....	453433	0
10	Interest on item 9 using prior year's actual return of <u>-10.86</u> %	-49243	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		273644
b	Interest on (a) using prior year's effective rate of <u>6.37</u> %		1286
c	Total available at beginning of current plan year to add to prefunding balance		274930
d	Portion of (c) to be added to prefunding balance.....		0
12	Reduction in balances due to elections or deemed elections.....	376328	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	27862	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	80.00 %
15	Adjusted funding target attainment percentage.....	15	80.00 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	93.55 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and liquidity shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
06/29/2009	94000	0			
			Totals ►	18(b)	94000
				18(c)	

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contribution from prior years.....	19a 0
b	Contributions made to avoid restrictions adjusted to valuation date	19b 0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c 91003
20 Quarterly contributions and liquidity shortfalls:		
a	Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b	If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of Quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
		(4) 4th
		0

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

21 Discount rate:				
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
b Applicable month (enter code)				21b
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	77338
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	461888	39926
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	117264
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	26261	0
36 Additional cash requirement (item 34 minus item 35).....	36	91003
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	91003
38 Interest-adjusted excess contributions for current year (see instructions).....	38	0
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

<div>SCHEDULE D</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div>		<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2009</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 06/30/2009					
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<div>C Plan or DFE sponsor's name as shown on line 2a of Form 5500</div> <div>TUBOCARE, INC.</div>				<div>D Employer Identification Number (EIN)</div> <div>59-3744121</div>	
<div>Part I</div> <div>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</div> <div>(Complete as many entries as needed to report all interests in DFEs)</div>					
<div>a Name of MTIA, CCT, PSA, or 103-12 IE:</div> <div>MASTER TRUST FOR SIEMENS PENSION PL</div>					
<div>b Name of sponsor of entity listed in (a):</div> <div>SIEMENS CORPORATION</div>					
<div>c EIN-PN</div> <div>13-3406827-001</div>		<div>d Entity code</div> <div>M</div>		<div>e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)</div> <div>0</div>	
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103-12 IE at end of year (see instructions)

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

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

For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>06/30/2009</u>		
A Name of plan PENSION PLAN FOR HOURLY EMPLOYEES OF TUBOCARE, INC. (UNITED BROTHERHOOD OF CARPENTER AND JOINERS OF AMERICA, LOCAL UNION NUMBER 724)	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 TURBOCARE, INC.	D Employer Identification Number (EIN) <u>59-3744121</u>	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	<u>300000</u>	<u>0</u>
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	<u>2376145</u>	<u>0</u>
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	2676145	0

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	1401	0
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1401	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	2674744	0
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	94000	
(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)		94000

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

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

(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)		-58611
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		35389

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	55405	
(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)		55405
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		55405

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-20016
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		2654728

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

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

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

(1) Name: ERNST & YOUNG LLP

(2) EIN: 34-6565596

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

- 4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....	X		
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
SIEMENS PENSION PLAN FOR UNION EMPLOYEE'S	13-2623356	028

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection.
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 06/30/2009

A Name of plan <u>PENSION PLAN FOR HOURLY EMPLOYEES OF TUBOCARE, INC. (UNITED BROTHERHOOD OF CARPENTER AND JOINERS OF AMERICA, LOCAL UNION NUMBER 724)</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TUBOCARE, INC.</u>	D Employer Identification Number (EIN) <u>59-3744121</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>25-1904503</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>0</u>

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☒ No	☐ N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☒ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

- 19** If the total number of participants is 1,000 or more, complete items (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: 34.7% Investment-Grade Debt: 58.6% High-Yield Debt: _____% Real Estate: 5.1% Other: 1.6%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☒ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate item 19(b)?

☐ Effective duration ☐ Macaulay duration ☒ Modified duration ☐ Other (specify): _____

**PENSION PLAN FOR HOURLY EMPLOYEES OF TURBOCARE, INC.
(UNITED BROTHERHOOD OF CARPENTERS AND JOINERS
OF AMERICA, LOCAL UNION NUMBER 724)**

Financial Statements

For the 6-Month Period Ended July 1, 2009
and Year Ended December 31, 2008
(with Report of Independent Auditors)

Pension Plan for Hourly Employees of Turbocare, Inc.
(United Brotherhood of Carpenters and Joiners of America,
Local Union Number 724)

Financial Statements

6-Month Period Ended July 1, 2009
and Year Ended December 31, 2008

Contents

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Statements of Net Assets Available for Benefits.....	2
Statements of Changes in Net Assets Available for Benefits	3
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Report of Independent Auditors

The Plan Administrator of the Pension Plan for Hourly Employees of TurboCare, Inc. (United Brotherhood of Carpenters and Joiners of America, Local Union Number 724) and the Siemens Administrative and Investment Committees

We were engaged to audit the accompanying statements of net assets available for benefits of the Pension Plan for Hourly Employees of TurboCare, Inc. (United Brotherhood of Carpenters and Joiners of America, Local Union Number 724) as of July 1, 2009 and December 31, 2008, and the related statements of changes in net assets available for benefits for the 6-month period ended July 1, 2009 and year ended December 31, 2008, respectively. These financial statements are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the investment information summarized in Note 8, which was certified by BNY Mellon 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 a certification from the trustee as of and for the 6-month period ended July 1, 2009 and year ended December 31, 2008, respectively, 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 as of and for the 6-month period ended July 1, 2009 and year ended December 31, 2008 taken as a whole. The form and content of the information included in the financial statements, other than that derived from the investment information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Ernst & Young LLP

January 13, 2010

Pension Plan for Hourly Employees of Turbocare, Inc.
(United Brotherhood of Carpenters and Joiners of America,
Local Union Number 724)

Statements of Net Assets Available for Benefits

	July 1, 2009	December 31, 2008
Assets:		
Investment in the net assets of the Master Trust for Siemens Pension Plans, as certified by BNY Mellon Bank, N.A.	\$ —	\$ 2,376,145
Employer contributions receivable	—	300,000
Total assets	—	2,676,145
Liabilities:		
Accrued plan expenses	—	1,401
Net assets available for benefits	<u>\$ —</u>	<u>\$ 2,674,744</u>

See accompanying notes.

Pension Plan for Hourly Employees of Turbocare, Inc.
(United Brotherhood of Carpenters and Joiners of America,
Local Union Number 724)

Statements of Changes in Net Assets Available for Benefits

	6-Month Period Ended July 1, 2009	Year Ended December 31, 2008
Contributions and investment activity:		
Employer contribution	\$ 94,000	\$ 300,000
Plan's share of investment (loss) income of the Master Trust for Siemens Pension Plans, as certified by BNY Mellon Bank, N.A.:		
Net depreciation in fair value of investments	(69,044)	(388,609)
Interest	30,242	71,217
Dividends	1,670	19,452
Other	1,754	4,250
Total investment activity	(35,378)	(293,690)
Total contributions and investment activity	58,622	6,310
Deductions:		
Benefits paid directly to participants	55,405	111,591
Plan expenses	23,233	59,529
Transfer out	2,654,728	—
Total deductions	2,733,366	171,120
Net decrease in net assets	(2,674,744)	(164,810)
Net assets available for benefits:		
Beginning of period	2,674,744	2,839,554
End of period	\$ —	\$ 2,674,744

See accompanying notes.

Pension Plan for Hourly Employees of Turbocare, Inc.
(United Brotherhood of Carpenters and Joiners of America,
Local Union Number 724)

Notes to Financial Statements

July 1, 2009

1. Description of Plan

The following brief description of the Pension Plan for Hourly Employees of TurboCare, Inc. (United Brotherhood of Carpenters and Joiners of America, Local Union Number 724) (the Plan) is provided only for general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit plan sponsored by Siemens Demag Delaval Turbomachinery Corp. (the Company), a subsidiary of Mannesmann Corporation, which is a subsidiary of Siemens Corporation (Siemens). The Plan was amended and restated effective January 1, 1997. Employees are eligible to participate in the Plan if they (i) have completed 1,000 hours of service in a twelve-month consecutive period, (ii) are 21 years of age, and (iii) are in an hourly paid position at the Company's Houston, Texas plant and their employment is covered by a collective bargaining agreement which provides for participation in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). On June 7, 2008, the Plan was frozen to new participants.

The assets of the Plan are held in the Master Trust for Siemens Pension Plans (the Master Trust), along with assets of certain other Siemens-sponsored pension plans. The assets of the Master Trust were held by BNY Mellon Bank, N.A. (the trustee) at July 1, 2009 and December 31, 2008.

Effective July 1, 2009, the Plan was merged into the Siemens Pension Plan for Union Employees (Siemens Pension Plan) and the related Plan assets of \$2,654,728 were transferred into the Siemens Pension Plan for Union Employees. This transfer did not impact the Plan's provisions.

Administration

The Administrative Committee of Siemens is responsible for administering the Plan's operations and the Investment Committee of Siemens is responsible for monitoring investments by the Plan. The Administrative Committee is currently composed of the Director of Employee Benefits of Siemens, the Vice President and Controller of Siemens, and six human resource representatives

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Notes to Financial Statements (continued)

1. Description of Plan (continued)

from certain of Siemens affiliates who are appointed by the Senior Vice President of Human Resources of Siemens. The six-person Investment Committee is currently composed of the following members: the Executive Vice President and Chief Financial Officer of Siemens (who serves as Chairman of the Investment Committee); the President of the Siemens Capital Company, LLC; the Senior Vice President, General Counsel and Secretary of Siemens; the Senior Vice President of Human Resources of Siemens; the Vice President of Mergers and Acquisitions of Siemens; and the Vice President and Controller of Siemens, all of whom are appointed by the Board of Directors of Siemens.

Pension Benefits

Participants with at least five years of service or upon attainment of age 65 will be 100% vested in their benefits accrued to their date of termination payable on their normal retirement date. Monthly pension benefits are based upon a flat dollar amount, multiplied by number of years of service (not to exceed 38) in accordance with the following schedule:

Date of Retirement	Benefit Multiplier
Prior to June 4, 1997	15.00
June 4, 1997 – June 3, 1998	15.50
June 4, 1998 – June 3, 1999	16.00
June 4, 1999 – May 31, 2001	24.00
June 1, 2001 – June 3, 2002	28.00
June 4, 2002 – June 3, 2005	30.00
June 4, 2005 – June 30, 2008	34.00
July 1, 2008 and later	38.00

The Plan permits early retirement, provided the participant has reached age 55 with 15 years of service, although the amount of pension benefit is reduced actuarially. If the actuarial present value of the vested benefit is less than \$5,000, the Plan provides for lump-sum payments of accumulated pension benefits to participants.

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Notes to Financial Statements (continued)

1. Description of Plan (continued)

Death Benefits

Unless a participant elects otherwise, in the event of a participant's death, the Plan also provides for a life annuity to a participant's surviving spouse equal to 50% of the reduced monthly benefit amount to which the participant was entitled under the Plan at the time of the participant's death. Benefits commence when the participant attains age 55, or immediately if the participant was eligible for early retirement.

2. Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Fair Value Measurements

The Company defines fair value as the exchange price that would be received for an asset or paid for a liability in a most advantageous market for these assets or liabilities in an orderly transaction between market participants on the measurement date. The Company utilizes a fair value hierarchy which requires the Plan to maximize the use of observable inputs and minimize unobservable inputs when determining fair value and also established three levels of classification (see Note 9).

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Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Investment Valuation and Income Recognition

The fair value of the Plan's interest in the Master Trust is based on the beginning of year value of the Plan's interest in the Master Trust plus actual contributions, asset transfers in, and allocated administrative expenses.

Investments in securities held by the Master Trust are generally valued using quoted market prices. The last reported sales price on the valuation date is used when no other value is obtainable from the trustee. The amounts reported by the Master Trust for securities that have no quoted market price represent estimated fair value as determined by the trustee. Investments in forward currency contracts are marked to market using quoted exchange rates on the valuation dates. The investment manager values investments in private placement bonds and high-yield bonds when no other value is obtainable from the trustee. Investments in short-term investment funds are reported at cost, which approximates fair value. Investments in limited partnerships are valued based on information provided by the sponsor of the partnership. In the event that no other value is obtainable from the trustee, the investment manager will determine the value. Purchases and sales by the Master Trust are recorded on a trade-date basis. Interest income is recorded by the Master Trust on the accrual basis. The Master Trust records dividends on the ex-dividend date.

Payment of Benefits

Benefit payments to participants are recorded when paid.

Plan Expenses

Certain expenses are paid by the Master Trust and charged to the Plan based upon the Plan's proportionate interest in the net assets of the Master Trust. Expenses attributed to a specific plan are charged to that plan only.

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Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Risks and Uncertainties

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

The Investment Committee has diversified the net assets of the Master Trust with the intention of appropriately addressing significant concentrations of risk. The Master Trust's net assets were managed by 13 investment managers for the 6-month period and year ended July 1, 2009 and December 31, 2008, respectively.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect amounts reported and disclosed in the financial statements.

3. Funding Policy

The Plan is funded solely by contributions made by the Company.

Contributions are determined annually based on actuarial valuations of the Plan by Hewitt Associates, LLC (Hewitt), an independent consulting actuary. Hewitt determines the maximum amount permitted by law or regulation as a federal income tax deduction and the minimum amount necessary during any plan year to avoid an accumulated funding deficiency as defined by ERISA.

The Company funds normal cost on a current basis and initial and additional past service liabilities from plan amendments, assumption/method changes, and actuarial experience over periods of 30, 10, and 5 years, respectively. The actuarial funding method was the Projected Unit

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Notes to Financial Statements (continued)

3. Funding Policy (continued)

Credit Cost Method for the December 31, 2008 valuation. The interest rate assumption used for funding purposes was 8% as of December 31, 2008. The contributions for the 6-month period ended July 1, 2009 and year ended December 31, 2008 were \$94,000 and \$300,000, respectively, for the Plan. The minimum funding requirements of ERISA were met for both periods.

4. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions, for employee services already rendered. Accumulated plan benefits include benefits expected to be paid to: (i) retired or terminated employees or their beneficiaries; (ii) beneficiaries of employees who have died; and (iii) present employees or their beneficiaries. Benefits under the Plan are based on employees' years of service. The accumulated plan benefits for active employees are based on years of service prior to the date of calculation (the valuation date). Benefits payable under all circumstances – retirement, death, disability, and termination of employment – are included, to the extent they are deemed attributable to employees' services rendered and compensation received up to the valuation date.

The actuarial present value of accumulated plan benefits as of December 31, 2008 was determined by Hewitt, and is 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 death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The more significant actuarial assumptions used in the December 31, 2008 valuation are as follows:

1. Life expectancy of active participants: 2008 RP – 2000 Combined Healthy Mortality Table
2. Accrued benefit interest rate: 6.95%
3. Weighted average retirement age: 65

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Notes to Financial Statements (continued)

4. Actuarial Present Value of Accumulated Plan Benefits (continued)

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.

The actuarial present value of accumulated plan benefits as of December 31, 2008 and the changes in actuarial present value of accumulated plan benefits during the year ended December 31, 2008 are as follows:

Vested benefits:	
Participants and beneficiaries currently receiving payments	\$ 983,563
Participants with deferred benefits	608,848
Other participants	1,607,761
	<u>3,200,172</u>
Nonvested benefits	50,158
Total actuarial present value of accumulated plan benefits	<u><u>\$ 3,250,330</u></u>
Actuarial present value of accumulated plan benefits at beginning of year	\$ 2,638,857
Increase (decrease) during the year attributable to:	
Increase for interest due to decrease in discount period	179,588
Benefits paid	(111,591)
Other changes	543,476
Net increase	<u>611,473</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 3,250,330</u></u>

The Plan's experience and assumptions change amounts reflect changes to retirement experience, turnover and mortality.

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Notes to Financial Statements (continued)

5. Plan Termination

The Company intends to continue the Plan indefinitely without interruption, but reserves the right to discontinue it at any time.

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- (a) Annuity benefits that former participants or their beneficiaries have been receiving for at least three years, or that participants eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.
- (b) Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. government agency) up to the applicable limitations (discussed below).
- (c) All other vested benefits (that is, vested benefits not insured by the PBGC).
- (d) All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2009, that ceiling is \$4,500 per month. That ceiling, which is adjusted periodically, applies to pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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Notes to Financial Statements (continued)

5. Plan Termination (continued)

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at the time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the plan sponsor and the level of benefits guaranteed by the PBGC.

6. Tax Status

The Internal Revenue Service (IRS) has issued a favorable determination letter dated March 12, 2008, advising that the Plan qualifies for tax-exempt status pursuant to the provisions of the Internal Revenue Code (the Code). The Plan's management and management of the Company believe that the Plan conforms to ERISA requirements and continues to qualify as tax exempt under the Code.

7. Parties-in-Interest

The Plan trustee, BNY Mellon Bank, N.A. (the trustee), also serves as an investment manager with respect to one of the funds of the Master Trust of the Plan. In addition, the trustee also serves as the custodian for certain funds managed by INVESCO in which the Plan participates.

8. Information Certified by the Trustee

The Plan's administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan's administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the following information certified by BNY Mellon Bank, N.A., the trustee of the Plan, as complete and accurate, except for comparing such information certified by the trustee to information included in the Plan's financial statements.

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Notes to Financial Statements (continued)

8. Information Certified by the Trustee (continued)

BNY Mellon Bank, N.A. has certified to the accuracy and completeness of the Plan's investment in the net assets of the Master Trust and the investment loss as summarized below:

July 1, 2009:	
Investment in the net assets of the Master Trust	\$ —
6-month period ended July 1, 2009:	
Plan's share of investment (loss) income of the Master Trust:	
Net depreciation in fair value of investments	\$ (69,044)
Interest	30,242
Dividends	1,670
Other	1,754
Total investment activity	<u>\$ (35,378)</u>
December 31, 2008:	
Investment in the net assets of the Master Trust	<u>\$ 2,376,145</u>
Year ended December 31, 2008:	
Plan's share of investment (loss) income of the Master Trust:	
Net depreciation in fair value of investments	\$ (388,609)
Interest	71,217
Dividends	19,452
Other	4,250
Total investment activity	<u>\$ (293,690)</u>

9. Investment in the Master Trust

All Master Trust amounts were prepared from records certified to be complete and accurate by the trustee at June 30, 2009 (as this is the most recent statement available) and December 31, 2008 and for the 6-month period and year then ended, respectively.

The Plan has a proportionate interest in the Master Trust. The Master Trust's net assets and investment loss are allocated to the individual Siemens-sponsored pension plans on a daily weighted average basis. The Plan's proportionate interest in the Master Trust's net assets was 0% and 0.07% at July 1, 2009 and December 31, 2008, respectively.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

Financial Statements of the Master Trust

The following table presents the fair value of the net assets of the Master Trust at June 30, 2009 and December 31, 2008:

	2009	2008
Assets:		
Investments, at fair value, as determined by quoted market prices:		
U.S. common stock	\$ 1,112,554,667	\$ 762,788,506
Short-term investments	414,356,400	624,925,328
U.S. government obligations	508,647,747	570,380,949
U.S. corporate debt obligations	845,917,674	936,428,862
Foreign common stock	103,171,393	293,145,130
Preferred stock	762,212	10,885,880
Securities on loan against collateral	355,687,513	564,247,588
Foreign corporate debt obligations	194,434,075	184,450,151
Foreign government obligations	4,567,013	6,208,603
Forward currency contracts – net	(5,767)	(68,117)
	<u>3,540,092,927</u>	<u>3,953,392,880</u>
Investments at estimated fair value:		
Limited partnerships	105,657,571	80,887,475
Receivables:		
Receivables for securities sold, and accrued income and other receivables	68,163,050	66,031,098
Total assets	<u>3,713,913,548</u>	<u>4,100,311,453</u>
Liabilities:		
Liability for collateral deposits	(362,602,025)	(558,380,268)
Payables for securities purchased and accrued liabilities	(26,768,702)	(39,718,254)
Total liabilities	<u>(389,370,727)</u>	<u>(598,098,522)</u>
	<u>\$ 3,324,542,821</u>	<u>\$ 3,502,212,931</u>

Within short-term investments and U.S. government obligations are \$358,972,128 and \$3,629,897, respectively of collateral held for securities lending as described below.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

The investment loss for the Master Trust for the 6-months ended June 30, 2009 and for the year ended December 31, 2008 is as follows:

	2009	2008
Net (depreciation) appreciation in fair value of investments:		
Investments, at fair value, as determined by quoted market prices:		
Common stock	\$ 127,109,272	\$ (681,668,983)
Government obligations	(218,278,700)	306,860,018
Corporate debt obligations	31,823,650	(197,998,629)
Preferred stock	2,188,217	(5,431,082)
Other	(35,920,226)	40,371,630
	(93,077,787)	(537,867,046)
Investments at estimated fair value:		
Limited partnerships	(1,676,051)	(44,327,758)
Total net depreciation	(94,753,838)	(582,194,804)
Interest	45,091,509	105,367,203
Dividends	2,519,221	28,711,915
Other	4,762,103	12,326,395
Total investment loss of the Master Trust	\$ (42,381,005)	\$ (435,789,291)

Fair Value Measurements

The Company defines fair value as the exchange price that would be received for an asset or paid for a liability in an orderly transaction between market participants on the measurement date. The Company utilizes a fair value hierarchy which requires the Plan to maximize the use of observable inputs and minimize unobservable inputs when determining fair value and also establishes three levels of classifications. The levels are:

- Level 1 – Quoted market prices or identical assets or liabilities in active markets, e.g., NYSE, NASDAQ, and over-the-counter markets that the Plan has the ability to access as of the measurement date.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

Level 2 – Significant other observable inputs other than Level 1 prices, e.g., interest rates, yield curves, and quoted prices for similar assets or liabilities, quoted prices in markets that are not active, and other inputs that are observable or can be corroborated by observable market data.

Level 3 – Significant unobservable inputs that reflect the custodian's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2009.

Cash and cash equivalents: Cash and cash equivalents comprise short-term investments and are held in a pooled investment vehicle. This fund maintains a \$1 per share value. Any gains and/or earnings by the underlying assets are paid out as interest.

Common stock (foreign and U.S.): All assets in which the Master Trust holds a direct share have been classified as common stocks. These assets are valued at the closing price reported on the active market on which the individual securities are traded.

Corporate debt obligation (foreign and U.S.): Valued based on market data, incorporating various inputs such as benchmark curves, benchmarking of like securities, matrix pricing, etc. as model processes such as the Option Adjusted Spread model to assess interest rate impact of and develop prepayment scenarios. Both models and processes take into account market convention.

Government debt obligations (foreign and U.S.): Valued based on market data, incorporating various inputs such as benchmark curves, benchmarking of like securities, matrix pricing, etc. as model processes such as the Option Adjusted Spread model to assess interest rate impact of and develop prepayment scenarios. Both models and processes take into account market convention.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

Preferred stock: Valued based on market data, incorporating various inputs such as benchmark curves, benchmarking of like securities, matrix pricing, etc. as model processes such as the Option Adjusted Spread model to assess interest rate impact of and develop prepayment scenarios. Both models and processes take into account market convention.

Real estate investment trust (REIT): The REIT is a limited partnership comprising marketable securities. The Plan directly holds shares of the underlying assets of the limited partnership and, therefore, the value is reported using the closing price on the active market of the underlying assets.

Commingled and mutual funds: These assets have been classified as common stocks on the preceding Master Trust table based on the underlying assets of the funds which are common stocks. The fund calculates a net asset value (NAV) based on the underlying securities' value at market close, less any applicable expenses, divided by the shares outstanding. NAVs may be calculated on daily/weekly/monthly basis (as determined by the fund).

Limited partnerships: Limited partnerships are valued based on the information provided by the manager. Quarterly data is usually received one to three months after quarter end. This creates a "lag" as the data is updated when it is received. There is no material impact as a result of this lag.

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 and assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

The following tables set forth by level within the fair value hierarchy the Master Trust's investments at fair value, for the 6-month period ended June 30, 2009 and year ended December 31, 2008, respectively.

Master Trust Pension Plans				
Investment at Fair Value as of June 30, 2009				
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ —	\$ 55,372,738	\$ —	\$ 55,372,738
Foreign common stock	103,171,393	—	—	103,171,393
U.S. common stock	281,979,882	—	—	281,979,882
U.S. government obligations	587,864,308	244,901,968	—	832,766,276
Foreign government debt obligations	—	9,111,184	—	9,111,184
U.S. corporate debt	—	868,511,534	—	868,511,534
Foreign corporate debt	—	190,995,780	—	190,995,780
Preferred stock	—	762,212	—	762,212
REIT	75,314,025	—	—	75,314,025
Commingled funds	—	752,363,388	—	752,363,388
Mutual funds	—	79,809,504	—	79,809,504
Limited partnerships	—	—	32,984,792	32,984,792
Total	\$ 1,048,329,608	\$ 2,201,828,308	\$ 32,984,792	\$ 3,283,142,708

The table above excludes receivables and payables for pending trades of \$68,163,050 and \$26,768,702, respectively, which are part of the Master Trust table above. Also excluded from the table above are liabilities for collateral deposits of \$358,972,128 and \$3,629,897 relating to the Securities Lending Program which are classified as short-term investments and U.S. Government obligations, respectively, in the Master Trust table.

Master Trust Pension Plans				
Investment at Fair Value as of December 31, 2008				
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ —	\$ 68,326,829	\$ —	\$ 68,326,829
Foreign common stock	71,037,340	—	—	71,037,340
U.S. common stock	180,469,678	—	—	180,469,678
U.S. government obligations	813,952,770	479,067,552	—	1,293,020,322
Foreign government debt obligations	4,060,474	7,503,571	—	11,564,045
U.S. corporate debt	—	933,442,589	—	933,442,589
Foreign corporate debt	—	8,651,508	—	8,651,508
Preferred stock	—	10,885,880	—	10,885,880
REIT	46,584,574	—	—	46,584,574
Commingled funds	—	709,776,934	—	709,776,934
Mutual funds	—	107,837,488	—	107,837,488
Limited partnerships	—	—	34,302,900	34,302,900
Total	\$ 1,116,104,836	\$ 2,325,492,351	\$ 34,302,900	\$ 3,475,900,087

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

The table above excludes receivables and payables for pending trades of \$66,031,098 and \$39,718,254, respectively, which are part of the Master Trust table above. Also excluded from the table above are liabilities for collateral deposits of \$556,530,384 and \$1,849,884 relating to the Securities Lending Program which are classified as short-term investments and U.S. Government obligations, respectively, in the Master Trust table.

The table below presents a reconciliation and income statement classification of gains and losses for all assets measured at fair value annually using the significant unobservable inputs (Level 3) for the 6-months and year ended June 30, 2009 and December 31, 2008.

Reconciliation of Income Level 3 Gains and Losses

**Fair Value Measurements Using Significant
Unobservable Inputs (Level 3)**

	<u>Limited Partnerships</u>
Beginning balance at January 1, 2009	\$ 34,302,900
Realized loss, net	(792,569)
Unrealized loss	(496,530)
Purchases, sales and settlements	(29,009)
Ending balance at June 30, 2009	<u>\$ 32,984,792</u>
Beginning balance at January 1, 2008	\$ 40,208,796
Realized gain, net	247,152
Unrealized loss	(4,413,914)
Purchases, sales and settlements	(1,739,134)
Ending balance at December 31, 2008	<u>\$ 34,302,900</u>

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

401(h) Account

Included within the assets of the Master Trust is a separate 401(h) account which is maintained with respect to a health-benefit component of the Siemens ElectroCom L.P. Retirement Plan which merged into the Siemens Pension Plan. The Siemens Pension Plan also participates in the Master Trust. This asset has been accounted for in accordance with Section 401(h) of the Code. The corresponding liability has been recorded in the statement of net assets of the Siemens Pension Plan and is not reflected in the Master Trust assets above. These assets are not available to the Plan.

Forward Currency Contracts – Net

In order to hedge against foreign currency exchange rate risks, the Master Trust may buy or sell foreign forward currency contracts. Foreign forward currency contracts obligate one party to purchase and the other party to sell a specific currency at a set price on a future date. Foreign forward currency contracts are valued monthly based on forward currency rates with the resulting adjustment being recorded as unrealized gain (loss). The net unrealized loss for forward currency contracts was \$5,767 and \$68,117 for the 6-months ended June 30, 2009 and year ended December 31, 2008, respectively.

As of June 30, 2009 and December 31, 2008, the Master Trust had open positions to buy foreign forward currency contracts in various denominations in exchange for \$525,007 and \$2,700,827, respectively, and whose values at June 30, 2009 and December 31, 2008 were \$519,240 and \$2,695,193, respectively, resulting in losses of \$5,767 and \$5,634 for 2009 and 2008, respectively.

As of June 30, 2009 and December 31, 2008, the Master Trust had open positions to sell foreign forward currency contracts in various denominations in exchange for \$525,007 and \$2,700,827, respectively, and whose values at June 30, 2009 and December 31, 2008 were \$525,007 and \$2,763,310, respectively, resulting in a loss of \$0 for the 6-month period ended June 30, 2009 and a loss of \$62,483 for the year ended December 31, 2008.

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Notes to Financial Statements (continued)

9. Investment in the Master Trust (continued)

Securities Lending

As of June 30, 2009 and December 31, 2008, the Master Trust participated in the BNY Mellon Bank Security Lending Program for its U.S. and non-U.S. securities held in custody at BNY Mellon Bank, N.A. These securities are lent to certain unrelated third-party brokers in exchange for collateral, usually in the form of cash. Collateralization levels are equal to a percentage of the market value of the borrowed securities. For U.S. securities, collateral shall not be less than 102%, and for non-U.S. securities, collateral shall not be less than 105% unless it is denominated in the same currency as the collateral, in which case it will be 102%. Collateral received is invested in a short-term collateral reinvestment fund that is managed by BNY Mellon's Global Security Lending Group, and the fund consists of high quality short-term investments. The value of loaned securities amounted to \$355,687,513 and \$564,247,588 at June 30, 2009 and December 31, 2008, respectively. The obligation to return collateral is reflected as a liability in the Master Trust's financial statements.

10. Subsequent Events

The Company has evaluated all subsequent events through January 13, 2010, which represents the date of these financial statements, to ensure that these financial statements include appropriate disclosure of events both recognized in the financial statements as of July 1, 2009, and events which occurred subsequent to July 1, 2009 but were not recognized in the financial statements. As of January 13, 2010, there were no subsequent events which required recognition or disclosure.

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 06/30/2009		

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

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

A Name of plan PENSION PLAN FOR HOURLY EMPLOYEES OF TUBOCARE, INC. (UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA, LOCAL UNION NUMBER 724)	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TUBOCARE, INC.	D Employer Identification Number (EIN) 59-3744121
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I Basic Information			
1 Enter the valuation date: Month 01 Day 01 Year 2009			
2 Assets:			
a Market value.....	2a	2667220	
b Actuarial value.....	2b	2667220	
3 Funding target/participant count breakdown			
		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	3a	20	979256
b For terminated vested participants	3b	35	619848
c For active participants:			
(1) Non-vested benefits.....	3c(1)		57516
(2) Vested benefits.....	3c(2)		1642578
(3) Total active	3c(3)	71	1700094
d Total.....	3d	126	3299198
4 If the plan is at-risk, check the box and complete items (a) and (b) ☐			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	6.83 %	
6 Target normal cost.....	6	77338	

Statement by Enrolled Actuary

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

SIGN HERE		03/01/2010
AL-KARIM ALIDINA		Date
HEWITT ASSOCIATES LLC		08-06110
Type or print name of actuary		Most recent enrollment number
Firm name		571-226-2400
3130 FAIRVIEW PARK DRIVE SUITE 300 FALLS CHURCH, VA 22042-4514		Telephone number (including area code)
Address of the firm		

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

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II Beginning of year carryover and prefunding balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	547133	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	93700	0
9	Amount remaining (Item 7 minus item 8).....	453433	0
10	Interest on item 9 using prior year's actual return of <u>-10.86</u> %	-49243	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		273644
b	Interest on (a) using prior year's effective rate of <u>6.37</u> %		1286
c	Total available at beginning of current plan year to add to prefunding balance		274930
d	Portion of (c) to be added to prefunding balance		0
12	Reduction in balances due to elections or deemed elections.....	376328	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12)	27862	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	80.00 %
15	Adjusted funding target attainment percentage.....	15	80.00 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	93.55 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and liquidity shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
06/29/2009	94000	0			
Totals ►			18(b)	94000	18(c)

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 91003
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No	
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No	
c If 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of Quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

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

21 Discount rate:			
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %
			☒ N/A, full yield curve used
b Applicable month (enter code)	21b		0
22 Weighted average retirement age	22		65
23 Mortality table(s) (see instructions)	☐ Prescribed - combined	☒ Prescribed - separate	☐ Substitute

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)	31	77338
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	461888	39926
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33)	34	117264
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	26261	0
36 Additional cash requirement (item 34 minus item 35)	36	91003
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)	37	91003
38 Interest-adjusted excess contributions for current year (see instructions)	38	0
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	39	0
40 Unpaid minimum required contribution for all years	40	0

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2009

Date	Amount	Interest Rate	Interest Adjusted Contribution
June 29, 2009	\$ 94,000	6.83%	\$ 91,003
Total Contribution	\$ 94,000		\$ 91,003

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

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
64.5	25.00%	1.0000	16.13
65.5	75.00%	0.7500	36.84
66	100.00%	0.1875	12.38
Weighted Average			65.35

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
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EIN: 59-3744121 PN: 002

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

Interest Rates	Based on the full Yield Curve with no lookback (December 2008 yield curve), with sample rates as follows: Duration 0.5 - 5.42% Duration 5.5 - 6.81% Duration 10.5 - 7.24% Duration 15.5 - 7.24% Duration 20.5 - 6.90% Duration 25.5 - 6.64% Duration 30.5 - 6.48%
Retirement Age	
Active Participants	See Table 1.
Terminated Vested Participants	65.
Mortality Rates	
Healthy and Disabled	Generational Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(d).
Withdrawal Rates	See Table 2.
Disability Rates	None.
Surviving Spouse Benefit	It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are 4 years older than their spouses.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of \$195,000.
Valuation of Plan Assets	Fair market value.
Trust Expenses Included in Target Normal Cost	\$29,000.
Actuarial Method	Standard Unit Credit Cost Method.
Valuation Date	January 1, 2009.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Changes in Funding Assumptions since the Prior Year

The funding valuation reflects the following assumption changes:

- A change in the interest rate assumption from the December 2007 yield curve to the December 2008 yield curve.
- An addition to the Target Normal Cost of assumed expenses payable from the trust, as required by WRERA.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Table 1
Retirement Rates

Age	Rate
64	25.00%
65	75.00%
66+	100.00%

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Table 2
Termination Rates

Age	Rate	Age	Rate
15	11.10%	45	3.30%
16	11.10%	46	3.24%
17	11.10%	47	3.18%
18	11.10%	48	3.12%
19	11.10%	49	3.06%
20	11.10%	50	3.00%
21	11.10%	51	2.98%
22	11.10%	52	2.96%
23	11.10%	53	2.94%
24	11.10%	54	2.92%
25	11.10%	55	2.90%
26	10.36%	56	2.80%
27	9.62%	57	2.70%
28	8.88%	58	2.60%
29	8.14%	59	2.50%
30	7.40%	60	2.40%
31	7.00%	61+	0.00%
32	6.60%		
33	6.20%		
34	5.80%		
35	5.40%		
36	5.14%		
37	4.88%		
38	4.62%		
39	4.36%		
40	4.10%		
41	3.94%		
42	3.78%		
43	3.62%		
44	3.46%		

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Schedule SB, Part V—Summary of Plan Provisions

Effective Date January 17, 1995 (Amended and Restated as of October 1, 2006).

Employees Covered All employees covered by a participating collective bargaining agreement and not considered "Leased Employees".

Eligibility Requirements All employees are eligible to participate upon attainment of age 21 and completion of one Year of Service.

Definitions:

Year of Service One year of 12 consecutive months, in which 1,000 hours of service are rendered, including service under the prior plan, calculated from date of hire.

Pension Credit One year of 12 consecutive months, in which 1,800 hours of service are rendered, prorated for service over 1,000 hours and partial credit for less than 1,000 hours. Service under the prior plan is included under the plan. Pension Credit is measured from date of hire.

Monthly Accrued Benefit A flat dollar amount per year of Pension Credit (not to exceed 35) in accordance with the following schedule:

Date of Retirement	Benefit Multiplier
Prior to 06/04/97	15.00
06/04/97 – 06/03/98	15.50
06/04/98 – 06/03/99	16.00
06/04/99 – 06/03/01	24.00
06/04/01 – 06/03/02	28.00
06/04/02 – 06/03/05	30.00
06/04/05 and later	34.00

Form of Payment

Normal Form of Annuity 50% Joint and Survivor Annuity for married participants; the actuarial equivalent of the Life Annuity.

Optional Forms Single Life Annuity for non-married participants.

Lump Sum Cash Out Benefit paid immediately to participant as a lump sum if the Actuarial Equivalent of the age 65 monthly retirement benefit payable as a Life Annuity is less than \$5,000.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
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Number 724)
EIN: 59-3744121 PN: 002

Plan Year	Calendar Year.
Normal Retirement Eligibility	The first day of the month coinciding with or next following the later of age 65 or fifth anniversary of the participant's date of participation.
Amount	The Monthly Accrued Benefit payable immediately.
Early Retirement Eligibility	Upon election, the first day of any month after age 55 and 15 years of Pension Credit.
Amount	Actuarial Equivalent Benefit as of date of early retirement.
Vesting Eligibility	Termination with vested rights.
Amount	The Monthly Accrued Benefit, payable unreduced at age 65 or payable on a reduced basis at an age not earlier than age 55.
Vesting Schedule	Any participant who ceases to be an Employee of the Company and has completed at least 5 Years of Service or upon attainment of Normal Retirement Eligibility will be 100% vested in his benefit accrued to his date of termination payable on his Normal Retirement Date.
Pre-retirement Death Eligibility	Vested and married for one year period prior to death.
Amount	The amount which would be payable if the participant terminated on his/her date of death, elected payment at the earliest eligibility for early retirement in the form of a qualified joint and survivor annuity, and died prior to the first payment.
Benefit Commencement	At the time the employee would have attained Early Retirement Eligibility 55, or immediately if the participant was eligible for an early retirement benefit.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
Brotherhood of Carpenters and Joiners of America, Local Union
Number 724)
EIN: 59-3744121 PN: 002

Changes in Plan Provisions Since January 1, 2008 Valuation

The January 1, 2009 funding valuation reflects the following plan changes:

- An increase in the annual maximum benefit limit under IRC section 415 from \$185,000 in 2008 to \$195,000 in 2009.
- The plan was merged with the Siemens Pension Plan for Union Employees effective July 1, 2009.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
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Number 724)
EIN: 59-3744121 PN: 002

**Schedule SB, Part V—Other Information to Fully and Fairly Disclose the Actuarial
Position of the Plan**

The actuarial valuation was conducted on an ongoing (not termination) basis using personnel data furnished as of January 1, 2009 by Turbocare, Inc.. Asset information and the dates and amounts of contributions are based on information supplied by Turbocare, Inc.

The target liability was calculated using the full yield curve based on corporate bond rates for December. As such, "0" was entered on line 21b as the applicable lookback month.

There is a difference between Item 2a and Schedule H line 11(a) due to accrued expenses as well as the discounting of the 2008 plan year accrued contribution to January 1, 2009 as shown in the table below.

Date	Amount	Interest Rate	Interest Adjusted Contribution
June 29, 2009	\$ 300,000	6.37%	\$ 291,095
Total Contribution	\$ 300,000		\$ 291,095

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Hourly Employees of TurboCare, Inc. (United
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Number 724)
EIN: 59-3744121 PN: 002

Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2009
Number of Participants

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29		1								
30-34	1	4								
35-39		11		4	1					
40-44		5	3	1	1	1				
45-49		3	2	5	1	2				
50-54				3	1			1		
55-59		2		2	2	3	3			
60-64						3		2	1	
65-69			1					1		
70+										

N-71