

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
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Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</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 <u>HONDA MANUFACTURING 401K SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>10/01/1985</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>10/01/1985</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>10/01/1985</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>HONDA OF AMERICA MFG., INC.</u> <u>24000 HONDA PARKWAY</u> <u>MARYSVILLE, OH 43040</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>31-0925242</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>937-642-5000</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>336100</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>31-0925242</u>	2c Sponsor's telephone number <u>937-642-5000</u>	2d Business code (see instructions) <u>336100</u>	
2b Employer Identification Number (EIN) <u>31-0925242</u>					
2c Sponsor's telephone number <u>937-642-5000</u>					
2d Business code (see instructions) <u>336100</u>					

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.	08/03/2010	SHANE MCCOY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/03/2010	SHANE MCCOY
	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") HONDA MANUFACTURING 401K SAVINGS PLAN RETIREMENT COMMITTEE 24000 HONDA PARKWAY MARYSVILLE, OH 43040		3b Administrator's EIN 31-0925242
		3c Administrator's telephone number 937-642-5000
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name		4b EIN 4c PN
5 Total number of participants at the beginning of the plan year		5
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	16986
b Retired or separated participants receiving benefits.....	6b	90
c Other retired or separated participants entitled to future benefits.....	6c	1337
d Subtotal. Add lines 6a , 6b , and 6c	6d	18413
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	27
f Total. Add lines 6d and 6e	6f	18440
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	18301
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2F 2G 2J 2K 2S 2T 3H 2E 3F		
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
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☒ G (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan HONDA MANUFACTURING 401K SAVINGS PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 HONDA OF AMERICA MFG., INC.	D Employer Identification Number (EIN) 31-0925242	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PACIFIC INV MANAGEMENT COMPANY
33-0629048

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
THE VANGUARD GROUP, INC.
23-1945930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
DODGE & COX
94-1441976

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHERN TRUST CORPORATION
36-2723087

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

RAINIER INVESTMENT MANAGEMENT, INC.

91-1457076

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

DIMENSIONAL FUND ADVISORS, INC.

22-2370029

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

THE CAPITAL GROUP COMPANIES

86-0206507

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

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

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

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

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

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

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

MERCER, INC.

13-2834414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
38 50	NONE	368918	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MORNINGSTAR, INC.

36-3297808

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 99 50	NONE	54377	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SCHUBERT ART AND DESIGN, LLC

20-8091096

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 38	NONE	23315	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE MERTEN COMPANY

31-1473036

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
38 50	NONE	48071	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

T. ROWE PRICE RPS INC.

52-1714114

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 21 25 28 37 38 49 50 52 57 59 62 63 64 65	NONE	1060573	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>HONDA MANUFACTURING 401K SAVINGS PLAN</u>	B Three-digit plan number (PN) <u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>HONDA OF AMERICA MFG., INC.</u>	D Employer Identification Number (EIN) <u>31-0925242</u>

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>STABLE VALUE COMMON TRUST FUND</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>52-1309931-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>66843437</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NTGI-QM COLL DAILY AGG BOND INDEX</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST GLOBAL INVESTMENTS</u>		
c EIN-PN <u>45-6138589-029</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>11146039</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NTGI-QM COLLECTIVE DAILY ACWI</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST GLOBAL INVESTMENTS</u>		
c EIN-PN <u>45-6138589-113</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5973562</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NTGI-QM COLL DAILY U.S. MKT CAP EQT</u>		
b Name of sponsor of entity listed in (a): <u>NORTHERN TRUST GLOBAL INVESTMENTS</u>		
c EIN-PN <u>45-6138589-053</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>6233218</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VFTC TARGET RETIREMENT INCOME TRUST</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD FIDUCIARY TRUST COMPANY</u>		
c EIN-PN <u>90-6083968-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8769185</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VFTC TARGET RETIREMENT 2010 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD FIDUCIARY TRUST COMPANY</u>		
c EIN-PN <u>90-6083964-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>20947235</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VFTC TARGET RETIREMENT 2015 TRUST</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD FIDUCIARY TRUST COMPANY</u>		
c EIN-PN <u>90-6083953-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>73098909</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2020 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083983-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 152624315
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2025 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083981-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 197100554
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2030 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083979-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 189928760
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2035 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083977-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 104506971
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2040 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083975-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53420818
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2045 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083973-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22195785
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a Name of MTIA, CCT, PSA, or 103-12 IE: **VFTC TARGET RETIREMENT 2050 TRUST**
VANGUARD FIDUCIARY TRUST COMPANY

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

c EIN-PN 90-6083969-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6877145
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

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

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

SCHEDULE G (Form 5500) Department of Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	Financial Transaction Schedules 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.
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For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009	
A Name of plan: HONDA MANUFACTURING 401K SAVINGS PLAN	B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 HONDA OF AMERICA MFG., INC.	D Employer Identification Number (EIN): 31-0925242

Part I	Schedule of Loans or Fixed Income Obligations in Default or Classified as Uncollectible				
Complete as many entries as needed to report all loans or fixed income obligations in default or classified as uncollectible. Check box (a) if obligor is known to be a party in interest. Attach Overdue Loan Explanation for each loan listed. See Instructions.					
(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest
(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest
(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
	Amount received during reporting year			Amount overdue	
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

(a)	(b) Identity and address of obligor		(c) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items		
☐					
		Amount received during reporting year			Amount overdue
(d) Original amount of loan	(e) Principal	(f) Interest	(g) Unpaid balance at end of year	(h) Principal	(i) Interest

Part II Schedule of Leases in Default or Classified as Uncollectible

Complete as many entries as needed to report all leases in default or classified as uncollectible. Check box (a) if lessor or lessee is known to be a party in interest. Attach Overdue Lease Explanation for each lease listed. (See instructions)

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

(a)	(b) Identity of lessor/lessee	(c) Relationship to plan, employer, employee organization or other party-in-interest	(d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased)			
☐						
(e) Original cost	(f) Current value at time of lease	(g) Gross rental receipts during the plan year	(h) Expenses paid during the plan year	(i) Net receipts	(j) Amount in arrears	

Part III Nonexempt Transactions

Complete as many entries as needed to report all nonexempt transactions. **Caution:** If a nonexempt prohibited transaction occurred with respect to a disqualified person, file Form 5330 with the IRS to pay the excise tax on the transaction.

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transaction including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
HONDA OF AMERICA MFG	EMPLOYER	EXPENSES IMPROPERLY PAID BY A PLAN		33491	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
			33491	33491	

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
HONDA OF AMERICA MFG	EMPLOYER	EXPENSES IMPROPERLY PAID BY A PLAN		43090	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
			43090	43090	

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
HONDA OF AMERICA MFG	EMPLOYER	EXPENSES IMPROPERLY PAID BY A PLAN		18931	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
			18931	18931	

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
HONDA OF AMERICA MFG	EMPLOYER	EXPENSES IMPROPERLY PAID BY A PLAN		4400	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
			4400	4400	

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
MERCER, INC.	SERVICE PROVIDER	DUPLICATE PAYMENT BY A PLAN		46563	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction
			46563	46563	

(a) Identity of party involved	(b) Relationship to plan, employer, or other party-in-interest	(c) Description of transactions including maturity date, rate of interest, collateral, par or maturity value		(d) Purchase price	
(e) Selling price	(f) Lease rental	(g) Transaction expenses	(h) Cost of asset	(i) Current value of asset	(j) Net gain (or loss) on each transaction

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

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan HONDA MANUFACTURING 401K SAVINGS PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 HONDA OF AMERICA MFG., INC.	D Employer Identification Number (EIN) 31-0925242	

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

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1284350	1535642
(2) Participant contributions	1b(2)	2218450	2363432
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2638532	2391857
(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)	34281559	35709215
(9) Value of interest in common/collective trusts.....	1c(9)	790742992	919665933
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	142577908	253418105
(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	973743791	1215084184

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	973743791	1215084184
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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)	43840471	
(B) Participants	2a(1)(B)	56645272	
(C) Others (including rollovers)	2a(1)(C)	405167	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		100890910

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	561	
(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)	2634026	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2634587

(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)	5704048	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		5704048

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

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		174502311
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		52177995
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		335909851

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	93133347	
(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)		93133347
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		-133102
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)	1569213	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		1569213
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		94569458

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		241340393
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: MCGLADREY & PULLEN, LLP

(2) EIN: 42-0714325

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		146475
e Was this plan covered by a fidelity bond?.....	X		20000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

A Name of plan <u>HONDA MANUFACTURING 401K SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>HONDA OF AMERICA MFG., INC.</u>	D Employer Identification Number (EIN) <u>31-0925242</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>52-1481931</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	

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

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

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

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

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

Honda Manufacturing 401(k) Savings Plan

Financial Report
12.31.2009

McGladrey & Pullen

Certified Public Accountants

Independent Auditor's Report

To the Honda Manufacturing 401(k) Savings Plan
Retirement Committee
Marysville, Ohio

We were engaged to audit the accompanying statements of net assets available for benefits of the Honda Manufacturing 401(k) Savings Plan (the Plan) as of December 31, 2009 and 2008, and the related statements of changes in net assets available for benefits for the years then ended, and the supplemental schedules of assets (held at end of year) as of December 31, 2009 and non-exempt transactions for the year ended December 31, 2009. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 5, which was certified or provided by T. Rowe Price Trust Company, the current trustee of the Plan, and Merrill Lynch Trust Company, N.A., the former trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plan Administrator that the trustee holds the Plan's investment assets and executes investment transactions. As discussed in Note 5, the Plan Administrator has obtained certifications from the trustees regarding the completeness and accuracy of the investment information provided to the Plan Administrator by the trustees as of and for the years ended December 31, 2009 and 2008.

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

McGladrey & Pullen, LLP

Columbus, Ohio
July 29, 2010

Honda Manufacturing 401(k) Savings Plan

Financial Report
12.31.2009

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McGladrey & Pullen

Certified Public Accountants

Independent Auditor's Report

To the Honda Manufacturing 401(k) Savings Plan
Retirement Committee
Marysville, Ohio

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McGladrey & Pullen, LLP

Columbus, Ohio
July 29, 2010

Honda Manufacturing 401(k) Savings Plan

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

	2009	2008
Assets		
Investments, at fair value:		
Registered investment companies	\$ 253,418,105	\$ 142,577,908
Common/collective trusts	919,665,933	790,742,992
Money market funds	2,391,857	2,638,532
Participant loans	39,566,332	38,439,898
Total investments	<u>1,215,042,227</u>	<u>974,399,330</u>
Receivables:		
Associate contributions	2,363,432	2,218,450
Employer contributions	1,535,642	1,284,350
Total receivables	<u>3,899,074</u>	<u>3,502,800</u>
Net assets available for benefits, at fair value	<u>1,218,941,301</u>	<u>977,902,130</u>
Adjustment from fair value to contract value for interest in common/collective trust relating to fully benefit-responsive investment contracts	<u>(2,007,288)</u>	<u>527,148</u>
Net assets available for benefits	<u>\$ 1,216,934,013</u>	<u>\$ 978,429,278</u>

See notes to the financial statements.

Honda Manufacturing 401(k) Savings Plan

Statements of Changes in Net Assets Available for Benefits Years Ended December 31, 2009 and 2008

	2009	2008
Additions (Reductions)		
Investment income (loss):		
Net appreciation (depreciation) in fair value of investments	\$ 221,441,570	\$ (377,588,828)
Interest and dividends	10,874,815	16,245,945
Total investment income (loss)	<u>232,316,385</u>	<u>(361,342,883)</u>
Contributions:		
Associate	56,645,272	61,416,248
Employer	43,840,471	30,492,952
Rollover	405,167	1,957,976
Total contributions	<u>100,890,910</u>	<u>93,867,176</u>
	<u>333,207,295</u>	<u>(267,475,707)</u>
Deductions		
Benefits paid to participants or beneficiaries	93,133,347	64,312,659
Administrative expenses	1,569,213	1,251,286
Total deductions	<u>94,702,560</u>	<u>65,563,945</u>
Net increase (decrease) prior to transfers	238,504,735	(333,039,652)
Plan transfers from other plans	<u>-</u>	<u>142,314,438</u>
Net increase (decrease)	238,504,735	(190,725,214)
Net Assets Available for Benefits:		
Beginning of year	<u>978,429,278</u>	<u>1,169,154,492</u>
End of year	<u>\$ 1,216,934,013</u>	<u>\$ 978,429,278</u>

See notes to the financial statements.

Honda Manufacturing 401(k) Savings Plan

Notes to the Financial Statements

Note 1. Plan Description

The following description of the Honda Manufacturing 401(k) Savings Plan (the Plan), formerly known as the Honda of America Mfg., Inc. Savings Plan, as renamed effective March 28, 2008, provides only general information. Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

Plan merger: Effective March 28, 2008, the Honda Manufacturing of Alabama, LLC Savings Plan, the Honda Transmission Mfg. of America, Inc. 401(k) Salary Deferral Plan, and the Honda Precision Parts of Georgia, LLC Savings Plan merged into the Plan. The net assets transferred into the Plan are as follows:

Plan transfers from the Honda Manufacturing of Alabama, LLC Savings Plan	\$ 94,521,740
Plan transfers from the Honda Transmission Mfg., Inc. 401(k) Salary Deferral Plan	46,083,453
Plan transfers from the Honda Precision Parts of Georgia, LLC Savings Plan	1,709,245
Total plan transfers from other plans	<u>\$ 142,314,438</u>

General: The Plan was established on October 1, 1985 by Honda of America Mfg., Inc. and Honda Engineering North America, Inc. The Plan allows participants an opportunity to contribute according to provisions of Section 401(k) of the Internal Revenue Code (IRC). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Honda of America Mfg., Inc. is the Plan Administrator. These responsibilities are carried out by the Honda Manufacturing 401(k) Savings Plan Retirement Committee (the Committee). The participating employers in the Plan are Honda of America Mfg., Inc., Honda Engineering North America, Inc., Honda Manufacturing of Alabama, LLC, Honda Transmission Mfg. of America, Inc., Honda Precision Parts of Georgia, LLC and Honda Manufacturing of Indiana, LLC (the Employers).

T. Rowe Price Trust Company (T. Rowe Price) is the trustee of the Plan effective March 28, 2008 (Merrill Lynch Trust Company, N.A (Merrill Lynch) was the prior trustee). The trustee holds the Plan's investment assets and executes transactions therein based upon specific authorization of the Plan Administrator or participants.

Contributions: Under the terms of the Plan, eligible associates (other than Japanese national associates) with at least three months of service may elect to participate in the Plan. An associate may authorize payroll deductions ranging from 1% to 50% of their base salary. Associates hired on or after March 28, 2008 fall under automatic enrollment provisions, in which participants are automatically enrolled in the Plan with an elective pre-tax deferral rate of 3% of compensation, increasing each January 1 thereafter by 1% until such elective deferral rate is 6% of compensation, unless the participant affirmatively elects out of the automatic deferral feature or elects a different deferral rate. The Employer matching contributions equal 100% of the first 3% of each participant's basic contribution and 50% of the next 2%. Effective January 1, 2009, Honda of America Mfg., Inc., Honda Engineering North America, Inc. and Honda Transmission Mfg. of America, Inc. associates who are eligible for the Plan receive a retirement contribution funded by their respective employers equal to 1% of the participants' base salary. In January 2009, eligible Honda of America Mfg., Inc., Honda Engineering North America, Inc. and Honda Transmission Mfg. of America, Inc. associates also received a one-time lump sum contribution equal to 1 % of their 2008 base salary. The Plan also permits employees to transfer funds from other qualified plans into the trust fund managed for the Plan. Such transfers must be approved by the Plan Administrator. Contributions are subject to certain limitations.

Note 1. Plan Description (Continued)

Participant accounts: Each participant's account is credited with the associate's contributions, Employer matching contributions and an allocation of investment earnings and is charged with an allocation of administrative expenses. Allocations are based on the participant's selected allocation percentages. Participants may make changes of investment fund allocations and investment income is allocated to participant accounts by investment fund balance on a daily basis. This allocation is based upon the ratio of each participant's weighted average fund balance to the total of all participants' fund balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Associate contributions are 100% vested at all times. Employer amounts credited to a participant's account are fully vested at the time the matching contribution is made.

Investment options: Participants may allocate their contributions to any of the various funds provided by the Plan. Participants may transfer account balances among the different funds on a daily basis.

Participant loans: The Plan permits loans to participants up to 50% of their vested account balance for not less than \$1,000 and not to exceed \$50,000. The term for repayment shall be no longer than five years nor less than twelve months. Loans bear a reasonable rate of interest as determined by the Committee. Principal and interest is paid ratably through periodic payroll deductions.

Distributions: A participant's vested account will be distributed upon retirement, termination, disability or death. Distributions are made in lump sum or in installments not to exceed the life expectancy of the participant. A participant may make an in-service withdrawal due to financial hardship or upon attainment of age 59 ½. Such withdrawals are subject to approval of the Committee.

Note 2. Summary of Significant Accounting Policies

Basis of accounting: The financial statements of the Plan are prepared on the accrual basis of accounting.

Investment contracts held by a defined contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The Plan invests in investment contracts through a common/collective trust. Contract value for this common/collective trust is based on the net asset value of the fund as reported by the trustee. The statements of net assets available for benefits as of December 31, 2009 and 2008 present the fair value of the investment in the common/collective trust as well as the adjustment of the investment in the common/collective trust from fair value to contract value relating to the investment contracts. The statements of changes in net assets available for benefits are prepared on a contract value basis.

Investment valuation and income recognition: Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Note 2. Summary of Significant Accounting Policies (Continued)

Contributions: Associate contributions and Employer matching contributions are recognized when the associate contributions are withheld from the associate's earnings. The Employer retirement contribution is recognized weekly.

Distributions: Benefits are recognized when paid.

Administrative expenses: Fees charged by the trustees and other fees, such as audit, legal and administrative fees, incurred by the Plan are charged to and paid directly by the Plan Administrator or the Plan, as directed by the Committee.

Use of estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan Administrator to make certain estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ significantly from those estimates.

Risks and uncertainties: The Plan 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 value of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

The credit and liquidity crisis in the United States and throughout the global financial system has resulted in substantial volatility in financial markets and the banking system. These and other economic events may have had a significant adverse impact on investment portfolios.

Subsequent events: The Plan Administrator has evaluated subsequent events for potential recognition and/or disclosure through July 29, 2010, the date the financial statements were available to be issued.

Note 3. Tax Status

The Internal Revenue Service has determined and informed the Plan Administrator by a letter dated May 8, 2009, that the Plan and its underlying trust qualify under the applicable sections of the IRC. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

The Financial Accounting Standards Board (FASB) issued new guidance on accounting for uncertain tax positions. The Plan adopted this new guidance for the year ended December 31, 2009. Management evaluated the Plan's tax positions and concluded that the Plan had maintained its tax exempt status and had taken no uncertain tax positions that require adjustment to the financial statements. Therefore, no provision or liability for income taxes has been included in the financial statements.

Note 4. Related Party Transactions

Certain Plan investments are shares of a registered investment company and a common/collective trust managed by T. Rowe Price Associates, Inc., an affiliate of T. Rowe Price. T. Rowe Price is the current trustee, as defined by the Plan; therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for administrative services provided by T. Rowe Price amounted to \$946,773 and \$810,826 for the year ended December 31, 2009 and 2008, respectively.

Until March 28, 2008, certain Plan investments were shares of common/collective trusts and a money market fund managed by Merrill Lynch Investment Managers, an affiliate of Merrill Lynch. Certain other Plan investments were shares of registered investment companies managed by BlackRock, Inc. Merrill Lynch merged its investment management business, Merrill Lynch Investment Managers, with BlackRock, Inc. on September 29, 2006. Merrill Lynch is the former trustee, as defined by the Plan and, therefore, these transactions qualified as party-in-interest transactions. Fees paid by the Plan for administrative services provided by Merrill Lynch amounted to \$ -0- and \$8,215 for the years ended December 31, 2009 and 2008, respectively.

Note 5. Investments and Information Certified and Provided by the Trustees

The following is a summary of the investment information as of December 31, 2009 and 2008, and for the years then ended, included throughout the Plan's financial statements and supplemental schedule that was prepared by or derived from information provided by the trustees and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the trustees that information provided to the Plan Administrator by the trustees related to the following investments is complete and accurate. Accordingly, as permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information which appears throughout the financial statements and supplemental schedule related to the following investments.

Honda Manufacturing 401(k) Savings Plan

Notes to the Financial Statements

Note 5. Investments and Information Certified and Provided by the Trustees (Continued)

The following table presents the fair value of the Plan's investments as certified by the trustee as of December 31. The fair value of individual investments that represent 5% or more of the Plan's net assets are separately identified.

	2009		2008	
Registered investment companies:				
Other registered investment companies	\$ 253,418,105		\$ 142,577,908	
Common/collective trusts:				
T. Rowe Price Stable Value Common Trust Fund	66,843,437	* **	56,234,790	* **
VFTC Target Retirement 2015 Trust	73,098,909	*	80,223,957	*
VFTC Target Retirement 2020 Trust	152,624,315	*	134,030,386	*
VFTC Target Retirement 2025 Trust	197,100,554	*	170,084,969	*
VFTC Target Retirement 2030 Trust	189,928,760	*	156,095,994	*
VFTC Target Retirement 2035 Trust	104,506,971	*	81,990,690	*
Other common/collective trusts	135,562,987		112,082,206	
	919,665,933		790,742,992	
Money market funds:				
Vanguard Prime Money Market Fund	2,391,857		-	
T. Rowe Price Trust Company US Treasury Money Fund	-		2,638,532	
	2,391,857		2,638,532	
Participant loans	39,566,332		38,439,898	
Total investments	\$ 1,215,042,227		\$ 974,399,330	

* Greater than 5% of Plan's net assets in the reported year.

** T. Rowe Price has also certified the contract values of \$64,836,149 and \$56,761,938 of the T. Rowe Price Stable Value Common Trust Fund as of December 31, 2009 and 2008, respectively.

T. Rowe Price and Merrill Lynch also certified to the completeness and accuracy of the following for the years ended December 31:

	2009		2008
Net appreciation (depreciation) in fair value of investments:			
Registered investment companies	\$ 52,177,995	\$	(136,932,663)
Common/collective trusts	169,263,575		(240,656,165)
	\$ 221,441,570	\$	(377,588,828)
Interest and dividends	\$ 10,874,815	\$	16,245,945

Note 6. Fair Value Measurements

FASB guidance establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the standard are described below:

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

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

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

Shares of registered investment companies: Valued at the net asset value (NAV) of shares held by the plan at year end.

Shares of common/collective trusts: Valued at the total of the NAV of the underlying securities held by the account at year-end. The Plan's interest in the common/collective trusts are valued based on the information reported by the investment advisor.

Money market fund: Valued at the closing price reported on the active market on which the fund is traded, generally at \$1 per share.

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

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

Honda Manufacturing 401(k) Savings Plan

Notes to the Financial Statements

Note 6. Fair Value Measurements (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets measured at fair value on a recurring basis as of December 31, 2009 and 2008:

Assets at Fair Value as of December 31, 2009				
	Level 1	Level 2	Level 3	Total
Money market fund	\$ 2,391,857	\$ -	\$ -	\$ 2,391,857
Registered investment companies:				
Intermediate-term fixed income fund	60,595,573	-	-	60,595,573
Large cap domestic equity funds	94,425,298	-	-	94,425,298
Small/mid cap domestic equity funds	38,262,735	-	-	38,262,735
International equity fund (non U.S.)	41,617,361	-	-	41,617,361
Global equity fund	18,517,138	-	-	18,517,138
Common/collective trusts	-	919,665,933	-	919,665,933
Participant loans	-	-	39,566,332	39,566,332
Total assets at fair value	<u>\$ 255,809,962</u>	<u>\$ 919,665,933</u>	<u>\$ 39,566,332</u>	<u>\$ 1,215,042,227</u>
Assets at Fair Value as of December 31, 2008				
	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ 142,577,908	\$ -	\$ -	\$ 142,577,908
Common/collective trusts	-	790,742,992	-	790,742,992
Money market fund	2,638,532	-	-	2,638,532
Participant loans	-	-	38,439,898	38,439,898
Total assets at fair value	<u>\$ 145,216,440</u>	<u>\$ 790,742,992</u>	<u>\$ 38,439,898</u>	<u>\$ 974,399,330</u>

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31:

	Participant Loans	
	2009	2008
Balance, beginning of year	\$ 38,439,898	\$ 31,522,429
Issuances and settlements (net)	1,126,434	6,917,469
Balance, end of year	<u>\$ 39,566,332</u>	<u>\$ 38,439,898</u>

Notes to the Financial Statements

Note 6. Fair Value Measurements (Continued)

In September 2009, FASB issued an amendment which provides guidance on how entities should estimate fair value of certain alternative investments. The fair value of investments within the scope of this guidance can now be determined using NAV per share as a practical expedient, when the fair value is not readily determinable, unless it is probable the investment will be sold at something other than NAV. It also requires disclosure of certain attributes by major category of alternative investments, regardless of whether the practical expedient was used. This amendment was effective for periods ending after December 15, 2009, with early adoption permitted.

The following table sets forth additional disclosures of Plan's investments whose fair value is estimated using net asset value per share (or its equivalent) as of December 31, 2009:

	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common/collective trusts:				
Target retirement date trusts (a)	\$ 829,469,678	\$ -	Daily	None
Stable value trust (b)	66,843,437	-	Daily	12 months
Index trusts (a)	23,352,818	-	Daily	None
Total	<u>\$ 919,665,933</u>	<u>\$ -</u>		

(a) This category includes high quality, short term securities. Investments in this category can be redeemed immediately at the current net asset value per share based on the fair value of the underlying assets. The fair value of investments in this category has been estimated using the net asset value per share of the investments.

(b) This category includes a stable value trust whose objective is to maximize current income consistent with the maintenance of principal and to provide for withdrawals for certain participant-initiated transactions without penalty or adjustment. The trust invests principally in guaranteed investment contracts issued by insurance companies; investment contracts held by banks; structured or synthetic investment contracts issued by banks, insurance companies, and other issuers, as well as the securities supporting such contracts; separate account contracts; and other similar instruments. Investments in this category can be redeemed daily at the current net asset value per share based on the fair value of the underlying assets. The fair value of the investments in this category has been estimated using the net asset value per share of the underlying investments. A plan-level total withdrawal from the stable value trust requires 12 months notice to the trustee; however, participants may trade in and out of the trust on a daily basis.

In January 2010, FASB issued an amendment which requires new disclosures and reasons for transfers of financial assets and liabilities between Levels 1 and 2. This amendment also clarifies that fair value measurement disclosures are required for each class of financial assets and liabilities, and disclosures about inputs and valuation techniques are required for both Level 2 and Level 3 measurements. It further clarifies that the reconciliation of Level 3 measurements should separately present purchases, sales, issuances, and settlements instead of netting these changes.

With respect to the matters other than Level 3 measurements, the amendment was effective and not yet adopted for periods beginning on or after December 15, 2009. The guidance related to Level 3 measurements is effective for periods beginning on or after December 15, 2010 and has not yet been adopted. We are currently evaluating the impact of the guidance related to Level 3 measurements on our disclosures.

Honda Manufacturing 401(k) Savings Plan

Notes to the Financial Statements

Note 7. Plan Termination

Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of participant loans per the financial statements at December 31, 2009 and 2008 to participant loans per Form 5500:

	2009	2008
Total participant loans per the financial statements	\$ 39,566,332	\$ 38,439,898
Deemed distribution loans included in participant loans on financial statements	(3,857,117)	(4,158,339)
Total participant loans per Form 5500	<u>\$ 35,709,215</u>	<u>\$ 34,281,559</u>

The following is a reconciliation of total net assets per the financial statements at December 31, 2009 and 2008 to total net assets per Form 5500:

	2009	2008
Total net assets per the financial statements	\$ 1,216,934,013	\$ 978,429,278
Deemed distribution loans included in participant loans on financial statements	(3,857,117)	(4,158,339)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	2,007,288	(527,148)
Total net assets per Form 5500	<u>\$ 1,215,084,184</u>	<u>\$ 973,743,791</u>

The following is a reconciliation of investment income (loss) per the financial statements to the Form 5500 for the years ended December 31:

	2009	2008
Total investment income (loss) per the financial statements	\$ 232,316,385	\$ (361,342,883)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts, current year	2,007,288	(527,148)
Adjustment from contract value to fair value for fully benefit-responsive investment contracts, prior year	527,148	-
Accrued interest on deemed distribution loans included in participant loans on financial statements, current year	(606,753)	(774,873)
Accrued interest on deemed distribution loans included in participant loans on financial statements, prior year	774,873	-
Total investment income (loss) per the Form 5500	<u>\$ 235,018,941</u>	<u>\$ (362,644,904)</u>

Honda Manufacturing 401(k) Savings Plan

Notes to the Financial Statements

Note 8. Reconciliation of Financial Statements to Form 5500 (Continued)

The following is a reconciliation of benefits paid to participants or beneficiaries per the financial statements to total benefit payments and deemed distributions per Form 5500 for the years ended December 31:

	2009	2008
Total benefits paid per the financial statements	\$ 93,133,347	\$ 64,312,659
Participant fees reported with benefits paid on financial statements	-	(2,090)
Deemed distribution loans included in participant loans on financial statements, current year	586,003	1,530,538
Deemed distribution loans included in participant loans on financial statements, prior year	(719,105)	-
Total benefits paid and deemed distributions per Form 5500	<u>\$ 93,000,245</u>	<u>\$ 65,841,107</u>

The following is a reconciliation of plan transfers from other plans per the financial statements to plan transfers per Form 5500 for the years ended December 31:

	2009	2008
Plan transfers from other plans per the financial statements	\$ -	\$ 142,314,438
Deemed distribution loans included in plan transfers on the financial statements	-	(297,006)
Plan transfers per Form 5500	<u>\$ -</u>	<u>\$ 142,017,432</u>

Honda Manufacturing 401(k) Savings Plan

EIN 31-0925242, Plan Number 002

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2009

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current Value
Registered investment companies:			
	Pacific Investment Management Company	Total Return Instl Fund 5,610,701 shares of interest	\$ 60,595,573
	American Funds	Growth Fund of America 1,379,656 shares of interest	37,705,994
	Dimensional Fund Advisors	US Targeted Value Fund 1,113,037 shares of interest	14,480,613
	Dodge & Cox	Stock Fund 440,423 shares of interest	42,342,308
	Dodge & Cox	International Stock Fund 1,306,668 shares of interest	41,617,361
*	T. Rowe Price Trust Company	Global Stock Fund 1,145,863 shares of interest	18,517,138
	Rainier Investment Management	Small/Mid Cap Equity Portfolio 889,384 shares of interest	23,782,122
	Vanguard Fiduciary Trust Company	Prime Cap Core Fund 1,187,200 shares of interest	14,376,996
		Total registered investment companies	253,418,105
Common/collective trusts:			
*	T. Rowe Price Trust Company	Stable Value Common Trust Fund 64,836,149 shares of interest	66,843,437
	Northern Trust Company	Daily Aggregate Bond Index Fund 27,665 shares of interest	11,146,039

Honda Manufacturing 401(k) Savings Plan

EIN 31-0925242, Plan Number 002

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2009

(a)	(b)	(c)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Current Value
	Northern Trust Company	Daily All Country World Index Fund 700,465 shares of interest	5,973,562
	Northern Trust Company	US Market Cap Equity Index Fund 701,949 shares of interest	6,233,218
	Vanguard Fiduciary Trust Company	Target Retirement Income Trust 273,098 shares of interest	8,769,185
	Vanguard Fiduciary Trust Company	Target Retirement 2010 Trust 714,191 shares of interest	20,947,235
	Vanguard Fiduciary Trust Company	Target Retirement 2015 Trust 2,587,572 shares of interest	73,098,909
	Vanguard Fiduciary Trust Company	Target Retirement 2020 Trust 5,570,230 shares of interest	152,624,315
	Vanguard Fiduciary Trust Company	Target Retirement 2025 Trust 7,468,759 shares of interest	197,100,554
	Vanguard Fiduciary Trust Company	Target Retirement 2030 Trust 7,436,522 shares of interest	189,928,760
	Vanguard Fiduciary Trust Company	Target Retirement 2035 Trust 4,166,945 shares of interest	104,506,971
	Vanguard Fiduciary Trust Company	Target Retirement 2040 Trust 2,122,400 shares of interest	53,420,818
	Vanguard Fiduciary Trust Company	Target Retirement 2045 Trust 884,999 shares of interest	22,195,785
	Vanguard Fiduciary Trust Company	Target Retirement 2050 Trust 272,686 shares of interest	6,877,145
			919,665,933

Honda Manufacturing 401(k) Savings Plan

EIN 31-0925242, Plan Number 002

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2009

(a)	(b)	(c)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Current Value
		Money market fund:	
	Vanguard Fiduciary Trust Company	Prime Money Market Fund 2,391,857 shares of interest	2,391,857
*	Various	Participant loans with maturities at various dates through August 2014, interest rates ranging from 5% to 9.25%	39,566,332
			<u>\$ 1,215,042,227</u>

* Denotes party-in-interest.

Note: The above information has been certified as complete and accurate by T. Rowe Price Trust Company, the trustee of the Plan. Column (d) (Cost) has been omitted as it is not required under ERISA.

Honda Manufacturing 401(k) Savings Plan

EIN 31-0925242, Plan Number 002

Schedule G, Part III - Schedule of Non-Exempt Transactions

For the Year Ended December 31, 2009

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)
Identity of party involved	Relationship to plan, employer, or other party-in-interest	Description of transactions including maturity date, rate of interest, collateral, par or maturity value	Purchase price	Selling price	Lease rental	Expenses incurred in connection with transaction	Cost of asset	Current value of asset	Net gain or (loss) on each transaction
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 4,400	\$ -	\$ -	\$ -	\$ 4,400	\$ 4,400	\$ -
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 33,491	\$ -	\$ -	\$ -	\$ 33,491	\$ 33,491	\$ -
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 18,931	\$ -	\$ -	\$ -	\$ 18,931	\$ 18,931	\$ -
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 43,090	\$ -	\$ -	\$ -	\$ 43,090	\$ 43,090	\$ -
Mercer, Inc.	Service provider	Duplicate payment by the plan	\$ 46,563	\$ -	\$ -	\$ -	\$ 46,563	\$ 46,563	\$ -

Honda Manufacturing 401(k) Savings Plan

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Honda Manufacturing 401(k) Savings Plan

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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2009

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Registered investment companies:			
	Pacific Investment Management Company	Total Return Instl Fund 5,610,701 shares of interest	\$ 60,595,573
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	Dimensional Fund Advisors	US Targeted Value Fund 1,113,037 shares of interest	14,480,613
	Dodge & Cox	Stock Fund 440,423 shares of interest	42,342,308
	Dodge & Cox	International Stock Fund 1,306,668 shares of interest	41,617,361
*	T. Rowe Price Trust Company	Global Stock Fund 1,145,863 shares of interest	18,517,138
	Rainier Investment Management	Small/Mid Cap Equity Portfolio 889,384 shares of interest	23,782,122
	Vanguard Fiduciary Trust Company	Prime Cap Core Fund 1,187,200 shares of interest	14,376,996
		Total registered investment companies	253,418,105
Common/collective trusts:			
*	T. Rowe Price Trust Company	Stable Value Common Trust Fund 64,836,149 shares of interest	66,843,437
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Honda Manufacturing 401(k) Savings Plan

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December 31, 2009

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Honda Manufacturing 401(k) Savings Plan

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December 31, 2009

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	Vanguard Fiduciary Trust Company	Prime Money Market Fund 2,391,857 shares of interest	2,391,857
*	Various	Participant loans with maturities at various dates through August 2014, interest rates ranging from 5% to 9.25%	39,566,332
			<u>\$ 1,215,042,227</u>

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Note: The above information has been certified as complete and accurate by T. Rowe Price Trust Company, the trustee of the Plan. Column (d) (Cost) has been omitted as it is not required under ERISA.

Honda Manufacturing 401(k) Savings Plan

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Honda Manufacturing 401(k) Savings Plan

EIN 31-0925242, Plan Number 002

Schedule G, Part III - Schedule of Non-Exempt Transactions

For the Year Ended December 31, 2009

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)
Identity of party involved	Relationship to plan, employer, or other party-in-interest	Description of transactions including maturity date, rate of interest, collateral, par or maturity value	Purchase price	Selling price	Lease rental	Expenses incurred in connection with transaction	Cost of asset	Current value of asset	Net gain or (loss) on each transaction
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Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 33,491	\$ -	\$ -	\$ -	\$ 33,491	\$ 33,491	\$ -
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 18,931	\$ -	\$ -	\$ -	\$ 18,931	\$ 18,931	\$ -
Honda of America Mfg., Inc.	Employer	Expenses relating to plan design improperly paid by the plan on June 3, 2009	\$ 43,090	\$ -	\$ -	\$ -	\$ 43,090	\$ 43,090	\$ -
Mercer, Inc.	Service provider	Duplicate payment by the plan	\$ 46,563	\$ -	\$ -	\$ -	\$ 46,563	\$ 46,563	\$ -