

<div>Form 5500</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Annual Return/Report of Employee Benefit Plan</div> <div>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2009</div> <div>This Form is Open to Public Inspection</div>
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Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009	
A	This return/report is for: <div><div>☐ a multiemployer plan;</div><div>☒ a single-employer plan;</div><div>☐ a multiple-employer plan; or</div><div>☐ a DFE (specify) ____</div></div>
B	This return/report is: <div><div>☐ the first return/report;</div><div>☒ an amended return/report;</div><div>☐ the final return/report;</div><div>☐ a short plan year return/report (less than 12 months).</div></div>
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: <div><div>☐ Form 5558;</div><div>☐ automatic extension;</div><div>☐ the DFVC program;</div><div>☐ special extension (enter description)</div></div>

Part II	Basic Plan Information—enter all requested information
1a	Name of plan CRANE AND EXCELSIOR COMPANIES PENSION PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 01/01/1958
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) CRANE & CO., INC. 30 SOUTH STREET DALTON, MA 01226-1751
2b	Employer Identification Number (EIN) 04-1215780
2c	Sponsor's telephone number 413-684-2600
2d	Business code (see instructions) 322100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2010	KAREN M. STREETER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") CRANE & CO., INC. 30 SOUTH STREET DALTON, MA 01226-1751	3b Administrator's EIN 04-1215780 3c Administrator's telephone number 413-684-2600
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	1407
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	796
b Retired or separated participants receiving benefits.....	6b	322
c Other retired or separated participants entitled to future benefits.....	6c	161
d Subtotal. Add lines 6a , 6b , and 6c	6d	1279
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	55
f Total. Add lines 6d and 6e	6f	1334
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	15

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

A Name of plan <u>CRANE AND EXCELSIOR COMPANIES PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>CRANE & CO., INC.</u>	D Employer Identification Number (EIN) <u>04-1215780</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☐ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2009</u>	
2 Assets:	
a Market value	2a <u>32966140</u>
b Actuarial value	2b <u>36262754</u>
3 Funding target/participant count breakdown	
	(1) Number of participants (2) Funding Target
a For retired participants and beneficiaries receiving payment	3a <u>378</u> <u>14619890</u>
b For terminated vested participants	3b <u>133</u> <u>2359884</u>
c For active participants:	
(1) Non-vested benefits	3c(1) <u>1568317</u>
(2) Vested benefits	3c(2) <u>17798261</u>
(3) Total active	3c(3) <u>896</u> <u>19366578</u>
d Total	3d <u>1407</u> <u>36346352</u>
4 If the plan is at-risk, check the box and complete items (a) and (b)	☐
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>8.17</u> %
6 Target normal cost	6 <u>1245538</u>

Statement by Enrolled Actuary

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

SIGN HERE	<u>10/08/2010</u>
Signature of actuary	Date
<u>SEAMUS A. DOYLE</u>	<u>08-05809</u>
Type or print name of actuary	Most recent enrollment number
<u>TOWERS WATSON DELAWARE INC.</u>	<u>781-237-3900</u>
Firm name	Telephone number (including area code)
<u>80 WILLIAM STREET</u> <u>WELLESLEY HILLS, MA 02481</u>	
Address of the firm	

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

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II Beginning of year carryover and prefunding balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	3292972	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	1501344	0
9	Amount remaining (Item 7 minus item 8).....	1791628	
10	Interest on item 9 using prior year's actual return of <u>-21.09</u> %	-377801	
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		
b	Interest on (a) using prior year's effective rate of <u>6.00</u> %		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance.....		
12	Reduction in balances due to elections or deemed elections.....		
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	1413827	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	95.88 %
15	Adjusted funding target attainment percentage.....	15	99.77 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	103.25 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and liquidity shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/12/2010	500000				
06/11/2010	1234728				
08/20/2010	2400000				
			Totals ►	18(b)	4134728
				18(c)	

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years.....	19a
b Contributions made to avoid restrictions adjusted to valuation date	19b
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c 3665247
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of Quarter of this plan year	
(1) 1st	(2) 2nd
(3) 3rd	(4) 4th

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

21 Discount rate:				
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
b Applicable month (enter code)				21b 3
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	1245538
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment		
b Waiver amortization installment		
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	1245538
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	1120984	
36 Additional cash requirement (item 34 minus item 35).....	36	124554
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	3665247
38 Interest-adjusted excess contributions for current year (see instructions).....	38	3540693
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	
40 Unpaid minimum required contribution for all years	40	

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

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

<div>A Name of plan</div> <div>CRANE AND EXCELSIOR COMPANIES PENSION PLAN</div>	<div>B Three-digit plan number (PN)</div> <div>▶</div> <div>001</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500</div> <div>CRANE & CO., INC.</div>	<div>D Employer Identification Number (EIN)</div> <div>04-1215780</div>

Part I

Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

TD BANKNORTH WEALTH MGMT GROUP

03-0349319

(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	TRUSTEE	68198	Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2009 This Form is Open to Public Inspection
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>		
A Name of plan <u>CRANE AND EXCELSIOR COMPANIES PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>CRANE & CO., INC.</u>	D Employer Identification Number (EIN) <u>04-1215780</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)		
	(2) Participant contributions	1b(2)		
	(3) Other	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1277803	166166
	(2) U.S. Government securities	1c(2)	5262938	4199706
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)	7383670	8209282
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		0
	(B) Common	1c(4)(B)	17807632	22338499
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts	1c(9)		
	(10) Value of interest in pooled separate accounts	1c(10)		
	(11) Value of interest in master trust investment accounts	1c(11)		
	(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)	1036655	0
	(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	32768698	34913653

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		

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	32768698	34913653
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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)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	3848	
(B) U.S. Government securities	2b(1)(B)	199733	
(C) Corporate debt instruments	2b(1)(C)	415820	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		619401

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	416699	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		416699

(3) Rents	2b(3)		
-----------------	--------------	--	--

(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	15677651	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	17606216	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-1928565

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	6983169	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		6983169
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		2674
d Total income. Add all income amounts in column (b) and enter total.....	2d		6093378

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3877740	
(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)		3877740
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	68198	
(4) Other	2i(4)	2485	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		70683
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		3948423

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2144955
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: CATURANO AND COMPANY, INC.

(2) EIN: 04-2775195

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

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

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>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).</div> <div>► File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2009</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan CRANE AND EXCELSIOR COMPANIES PENSION PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 CRANE & CO., INC.		D Employer Identification Number (EIN) 04-1215780
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
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): _____ 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 46
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?..... ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
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): _____

Crane and Excelsior Companies Pension Plan

Financial Statements
and
Supplemental Schedules

December 31, 2009 and 2008

Crane and Excelsior Companies Pension Plan

FINANCIAL STATEMENTS
AND
SUPPLEMENTAL SCHEDULES
December 31, 2009 and 2008

Crane and Excelsior Companies Pension Plan

FINANCIAL STATEMENTS
AND
SUPPLEMENTAL SCHEDULES
December 31, 2009 and 2008

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INDEPENDENT AUDITOR'S REPORT

To the Pension Committee of the
Crane and Excelsior Companies Pension Plan
Dalton, Massachusetts

We have audited the financial statements (modified cash basis) of Crane and Excelsior Companies Pension Plan (the "Plan") as of December 31, 2009 and 2008 and for the year ended December 31, 2009, and the supplemental schedules as of and for the year ended December 31, 2009, as listed on the contents page. These financial statements are the responsibility of the Plan's management.

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

As described in Note 2, these financial statements were prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for plan benefits of Crane and Excelsior Companies Pension Plan as of December 31, 2009 and 2008, and changes in net assets available for plan benefits for the year ended December 31, 2009, on the basis of accounting described in Note 2.

Our audits were performed for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental schedules, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) and Schedule H, Line 4j – Schedule of Reportable Transactions for the year then ended December 31, 2009 are presented for additional analysis and are not a required part of the basic financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The supplemental schedules are the responsibility of the Plan's management. The supplemental schedules have been subjected to the auditing procedures applied in the audit of the basic financial statements as of and for the year ended December 31, 2009, and, in our opinion, are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Caturano and Company, Inc.

CATURANO AND COMPANY, INC.

October 13, 2010
Boston, Massachusetts

Crane and Excelsior Companies Pension Plan

Statements of Net Assets Available for Plan Benefits - Modified Cash Basis

December 31, 2009 and 2008

	2009	2008
ASSETS		
Investments at fair value:		
Cash and cash equivalents	\$ 166,166	\$ 1,277,803
Common stock	22,338,499	17,807,632
Mutual funds	-	1,036,655
United States Government Agency Securities	4,199,706	5,262,938
Corporate bonds	7,796,719	7,088,295
Foreign obligation bonds	412,563	295,375
Net assets available for plan benefits	<u>\$ 34,913,653</u>	<u>\$ 32,768,698</u>

The accompanying notes are an integral part of these financial statements.

Crane and Excelsior Companies Pension Plan

Statement of Changes in Net Assets Available for Plan Benefits - Modified Cash Basis

Year Ended December 31, 2009

Additions to net assets attributed to:

Investment income:

Net appreciation in fair value of investments	\$ 5,054,603
Interest and dividend income	1,036,101
Other receipts	<u>2,674</u>
Total investment income	<u>6,093,378</u>

Deductions from net assets attributed to:

Benefits paid to participants	3,877,740
Administrative expenses	68,198
Foreign withholding taxes, net	<u>2,485</u>
Total deductions	<u>3,948,423</u>

Net increase	<u>2,144,955</u>
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Net assets available for plan benefits at beginning of year	<u>32,768,698</u>
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Net assets available for plan benefits at end of year	<u><u>\$ 34,913,653</u></u>
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Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

1. DESCRIPTION OF PLAN

The following description of the Crane and Excelsior Companies Pension Plan (the “Plan”) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan’s provisions.

The Plan is a defined benefit retirement plan covering substantially all of the United States employees of Crane & Co., Inc. and participating subsidiaries (the “Company”). The funding policy of the plan is to satisfy the minimum funding standards required under the Employee Retirement Income Security Act of 1974 (ERISA) and the Internal Revenue Code. In addition, the Company may make discretionary contributions in excess of the minimum from time to time to meet funding objectives. The Plan was in compliance with applicable ERISA minimum funding requirements for the years ended December 31, 2009 and 2008.

Frozen Plan

The Company froze the Plan as of June 30, 2007. The trust will continue to exist as long as necessary to pay accrued benefits, and the Company will contribute to the Plan amounts necessary to meet the minimum funding requirements under ERISA. Participants will continue to accrue benefits and vest in the Plan as previously discussed; however, no employee hired or rehired after June 30, 2007 will become eligible to participate in the Plan.

Eligibility

Effective July 1, 2007, any employee hired or rehired shall not be eligible to become a participant in the plan or accrue any benefits. Employees hired prior to this were eligible after one year of service and reaching age 21.

Vesting

Upon termination of employment after 5 years of vesting service or upon attaining age 65, a participant will be eligible for a deferred vested benefit. The benefit is payable at age 65 without reduction.

Contributions

All contributions to provide benefits under the Plan shall be made by the Company and no participant shall make contributions. The Company determines its contribution amount on the basis of annual actuarial valuations and reports, to be at least sufficient to meet the minimum funding standards of any applicable federal law. The Company determined that \$4,134,728 of employer contributions were necessary to meet this requirement for the year ended December 31, 2009. These contributions were paid subsequent to the date of the financial statements. As the Plan’s financial reporting is based on the modified cash basis of accounting, the contributions and related receivable were not recorded as of December 31, 2009.

Normal Retirement Benefits

Employees who have attained age 65 with five years of service are entitled to the normal retirement benefit. Employees may continue working past age 65.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

1. DESCRIPTION OF PLAN...continued

Normal Retirement Benefits...continued

Average annual compensation is defined as the highest 5 complete consecutive calendar years within the 10 years prior to the participant's termination of employment. Covered compensation is the average of the social security wage bases in the 35 years prior to social security normal retirement age. Minimum annual benefit is \$109 per year of service. The percentage of average monthly compensation is the sum of:

- (i) 0.40% of average annual compensation up to covered compensation times years of service up to 35 plus,
- (ii) 0.75% of average annual compensation in excess of covered compensation times years of service up to 35 plus,
- (iii) 0.40% of average annual compensation up to covered compensation times years of service over 35 years.

Early Retirement Benefit

The Plan permits early retirement for employees with at least 5 years of credited service earned who have attained the age of 62. The Plan also permits early retirement for employees with at least 30 years of credited service earned who have attained the age of 55.

The basic benefit is calculated the same as in the normal retirement formula but reduced 0.25% for each month by which the benefit commencement date precedes the participant's normal retirement date.

Late Retirement Benefit

The Plan permits late retirement for employees who are over the age of 65.

The basic benefit is calculated the same as in the normal retirement formula based on service and compensation at the date of the late retirement.

Death Benefits

Before retirement, if a married participant dies while employed on or after the earliest retirement age, his spouse will be entitled to a lifetime benefit of 50% of the early retirement benefit the participant would have received had he retired the day before his death and elected the normal 50% joint and survivor income option. If a married participant dies before the earliest retirement age and has completed at least 5 years of vesting service, the participant's spouse will receive the same benefit as if the participant had separated from service on the date of death, survived to the earliest retirement age, retired with an immediate 50% qualified joint and survivor annuity on that date, and died on the following day. The surviving spouse will begin to receive payments at the participant's earliest retirement age unless the spouse elects a later date. After retirement, the benefit to a married participant is payable on an actuarially reduced basis for the lifetime of the participant with 50% continued to the spouse after the participant's death. If the participant elects an optional form of benefit, the spouse must consent to the election.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

1. DESCRIPTION OF PLAN...continued

Disability Benefit

Participants who have become disabled and who have earned 5 years of credited service are entitled to normal retirement based on service to date of disability, (a) without reduction if the participant is eligible for Social Security disability payments, or (b) reduced 0.25% for the remaining months prior to the age 65, if not eligible for Social Security payments.

Plan Expenses

The Plan pays for its administrative expenses. The Company pays for actuarial, audit and other consulting costs, as well as Pension Benefit Guaranty Corporation premiums.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared in accordance with accounting standards set by the Financial Accounting Standards Board ("FASB"). The FASB sets generally accepted accounting principles ("GAAP") to ensure net assets available for plan benefits and changes in net assets available for plan benefits are consistently reported. References to GAAP issued by the FASB in these footnotes are to the FASB Accounting Standards Codification ("FASB ASC"). The FASB finalized FASB ASC effective for the periods ending on or after September 15, 2009.

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

Basis of Accounting

The financial statements have been prepared on a modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Under the modified cash basis of accounting, investment income is recognized when received rather than when earned, contributions are recorded when received and certain expenses are recognized when paid rather than when the obligation is incurred.

Investment Valuation and Income Recognition

The Plan's investments are stated 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.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when earned. Dividends are recorded on the ex-dividend date. In the statement of changes in net assets available for plan benefits, the Plan presents the net appreciation (depreciation) in the fair value of investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management, and its consulting professionals to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, the disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES...continued

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 values of investment securities will occur in the near term and those changes could materially affect the amounts reported in the statement of net assets available for benefits.

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

Fair Value Measurements

Effective January 1, 2008, the Plan adopted the guidance in FASB ASC 820 – *Fair Value Measurements and Disclosures*, which defines fair value, and establishes 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 are described below:

- Level 1 – Inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date.
- Level 2 – Valuations based on quoted prices in markets that are not active or for which all significant inputs are observable, either directly or indirectly.
- Level 3 – Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

To the extent that valuation is based on models or inputs that are less observable or unobservable in the market, the determination of fair value requires more judgment. Accordingly, the degree of judgment exercised by the Plan in determining fair value is greatest for instruments categorized in Level 3. A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Fair value is a market-based measure considered from the perspective of a market participant rather than an entity-specific measure. Therefore, even when market assumptions are not readily available, the Plan's own assumptions are set to reflect those that market participants would use in pricing the asset or liability at the measurement date. The Plan uses prices and inputs that are current as of the measurement date, including during periods of market dislocation. In periods of market dislocation, the observability of prices and inputs may be reduced for many instruments. This condition could cause an instrument to be reclassified from Level 1 to Level 2 or Level 2 to Level 3.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES...continued

Fair Value Measurements...continued

Effective January 1, 2009, the guidance in FASB ASC 820 became effective for nonfinancial assets or nonfinancial liabilities that are recorded or disclosed at fair value on a non-recurring basis. As of the adoption date and December 31, 2009, the Plan does not have any non-financial assets or liabilities which are required to be at fair value.

Investment Valuation

There have been no changes in the valuation techniques used during the current period.

Cash and Cash Equivalents

Cash and cash equivalents are valued at cost plus accrued interest, which approximates fair value, and are categorized as Level 1 of the fair value hierarchy.

Common Stock and United States Government Agency Securities

Common stock, preferred stock, and United States government agency securities values are determined by quoted active-market prices where available. These securities are categorized in Level 1 as they are actively traded and no valuation adjustments have been applied.

Mutual Funds

Mutual funds are valued at the quoted market prices. These securities are categorized in Level 1 as they are actively traded and no valuation adjustments have been applied.

Corporate Bonds and Foreign Obligation Bonds

Corporate bonds and foreign obligation bonds are priced using pricing model which consists of a compilation of inputs from observable market information including broker quotes, recent trades, supply information, benchmark yields (treasury curves) and security specific historic information, returns, and yields. These securities are categorized in Level 2 as they have observable inputs but they are not actively quoted.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on the employee's average compensation during the highest compensated 60 month period within the 120 month period prior to termination. The accumulated plan benefits for active employees are based on their average compensation during the five years ending on the date as of which the benefit information is presented (the valuation date). Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES...continued

Payment of Benefits

All benefits are recorded when paid.

Recent Accounting Pronouncements

In April 2009, the FASB issued FSP FAS 157-4, *Determining Fair Value When the Volume and Level of Activity for the Asset or Liability Have Significantly Decreased and Identifying Transactions That Are Not Orderly*, which was included in Subtopic 820-10-35 in the FASB Codification. ASC 820-10-35 provides guidance regarding how to determine whether there has been a significant decrease in the volume and level of activity for the asset or liability when compared with normal market activity for the asset or liability. In such situations, an entity may conclude that transactions or quoted prices may not be determinative of fair value, and may adjust the transactions or quoted prices to arrive at the fair value of the asset or liability. ASC 820-10-35 also requires disclosures of the breakdown of debt and equity investments by major category based on nature and risks of the investments. This new guidance within ASC 820 is effective for interim and annual reporting periods ending after June 15, 2009, with early adoption permitted for periods ending after March 15, 2009, and must be applied prospectively. The Plan adopted this new guidance effective for the plan year ended December 31, 2009. See Note 5 for related disclosures.

In September 2009, the FASB issued ASU No. 2009-12, *Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)* (ASU 2009-12), which amends the Fair Value Measurements and Disclosures Topic of the FASB ASC to permit the use of net asset value per share, without further adjustment, to estimate the fair value of investments in investment companies that do not have readily determinable fair values. The net asset value per share must be calculated in a manner consistent with the measurement principles of the Financial Services – Investment Companies Topic of the FASB ASC and can be used by investors in investments such as hedge funds, private equity funds, venture capital funds and real estate funds. If it is probable the investment will be sold for an amount other than net asset value, the investor would be required to estimate the fair value of the investment considering all of the rights and obligations of the investment and any other market available data. In addition, the amendments require enhanced disclosure for the investments within the scope of this accounting update. The accounting guidance in ASU 2009-12 is effective for periods ending after December 15, 2009, and early adoption is permitted. The Plan adopted these amendments effective January 1, 2009. The adoption did not have an impact on the Plan's financial statements.

The FASB issued guidance which establishes general standards of accounting for and disclosing events that occur after the date of the statement of net assets available for plan benefits but before financial statements are issued or are available to be issued. The standard defines the period after the statement of net assets available for plan benefits date during which management of a reporting entity should evaluate events or transactions that may occur for potential recognition or disclosure in the financial statements, the circumstances under which an entity should recognize events or transactions occurring after the date of the statement of net assets available for plan benefits in its financial statements and the disclosures that an entity should make about events or transactions that occurred after the statement of net assets available for plan benefits. The guidance is effective for fiscal years, and interim periods within those fiscal years, beginning after June 15, 2009. Management has adopted this guidance as of January 1, 2009, see Note 8.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES...continued

Future Adoption of Accounting Pronouncements

In January 2010, the FASB issued ASU No. 2010-06, *Improving Disclosures about Fair Value Measurements* (ASU 2010-06), which primarily requires new disclosures related to the levels within the fair value hierarchy. An entity will be required to disclose significant transfers in and out of Levels 1 and 2 of the fair value hierarchy, and separately present information related to purchases, sales, issuances and settlements in the reconciliation of fair value measurements classified as Level 3. In addition, ASU 2010-06 will amend the fair value disclosure requirement for pension and postretirement benefit plan assets to require this disclosure at the investment class level. ASU 2010-06 will be effective for interim and annual reporting periods beginning after December 15, 2009, except for the disclosures related to purchases, sales, issuances and settlements for Level 3 fair value measurements, which are effective for reporting periods beginning after December 15, 2010. The Plan will include the disclosures as required by ASU 2010-06 in the notes to the Plan's financial statements effective January 1, 2010, except for the disclosures related to Level 3 fair value measurements, which will be included in the notes to the Plan's financial statements effective January 1, 2011.

3. ACTUARIAL COST METHOD AND ASSUMPTIONS

The following methods and assumptions were used in measuring the Plan's actuarial present value of accumulated benefits at December 31, 2009 and 2008.

Actuarial Cost Method

Entry age normal cost method.

Asset Valuation Method

The 5-year average appreciation method, under which 20% of the realized and unrealized gains and losses occurring in the prior year are recognized, 40% of those occurring 2 years ago, etc., so that 100% of realized and unrealized gains and losses occurring 5 or more years ago are recognized. The valuation of assets will be adjusted, if needed, in order to remain between 80% and 120% of the market value.

Actuarial Assumptions

The significant actuarial assumptions used in the valuation as of and for the years ended December 31, 2009 and 2008, the valuation dates, are as follows:

	<u>2009</u>	<u>2008</u>
Investment returns	8.00%	8.25%
Social Security Increases	4.00%	5.00%

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

3. ACTUARIAL COST METHOD AND ASSUMPTIONS...continued

Actuarial Assumptions...continued

Salary Increases

Annual rate at selected ages are as follows for 2009 and 2008:

<u>Age</u>	<u>Rate</u>
20	9.4%
25	6.9%
30	5.6%
35	5.4%
40	5.3%
45	4.8%
50	4.4%
55	4.2%
60 and over	4.0%

Retirement Age

Rates of retirement based on the Company's experience are as follows for 2009 and 2008:

<u>Age</u>	<u>Rate of Retirement</u>
55	5%
56	5%
57	5%
58	5%
59	5%
60	5%
61	5%
62	30%
63	30%
64	30%
65	100%

Termination

The following rates of termination assumptions were used and are based on the Company's experience for 2009 and 2008. The termination rates are not due to disability, retirement or mortality.

<u>Attained Age</u>	<u>Annual Rate</u>
20	5.0%
25	5.0%
30	4.1%
35	2.9%
40	2.5%
45	2.5%
50	2.5%
55	3.4%
60	4.0%

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

3. ACTUARIAL COST METHOD AND ASSUMPTIONS...continued

Actuarial Assumptions...continued

Mortality and Disabled Mortality

For all participants, the prescribed mortality assumptions are under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants.

Disability

None.

Marital Status

For purposes of valuing the pre-retirement surviving spouse's benefit, 85% of eligible participants are assumed to be married and male spouses are assumed to be 3 years older than female spouses.

Expenses

For the year ended December 31, 2009 administrative expenses were \$68,198.

4. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

The actuarial present value of accumulated Plan benefits as of December 31 2009 and 2008 determined by the Plan's Actuary, Towers Watson, is as follows:

	<u>2009</u>	<u>2008</u>
Vested pension benefits:		
Participants currently receiving payments	\$ 14,910,560	\$ 14,704,181
Other vested benefits	<u>22,766,684</u>	<u>19,640,710</u>
	37,677,244	34,344,891
Nonvested pension benefits	<u>2,360,040</u>	<u>1,899,781</u>
	<u>\$ 40,037,284</u>	<u>\$ 36,244,672</u>

As of December 31, 2009, the market value of the net assets of the Plan was \$817,717 less than the present value of accumulated plan benefits. As of December 31, 2008, the market value of the net assets of the Plan was \$3,477,058 less than the present value of accumulated plan benefits.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

4. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS...continued

Analysis of the change in the actuarial value of accumulated plan benefits for the year ended December 31, 2009 is as follows:

Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 36,244,672</u>
Change attributable to:	
Benefits accumulated	1,099,965
Benefits paid	(3,877,740)
Decrease in the discount period	2,920,976
Actuarial losses	935,262
Change of assumptions	<u>2,714,149</u>
Net increase	<u>3,792,612</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 40,037,284</u>

For the year end December 31, 2009, the interest rate assumption changed from using the October Full Yield Curve to the September 3-Segment rates and the impact of this change is listed in the above table.

5. FAIR VALUE DISCLOSURE

Assets measured at fair value on a recurring basis as of December 31, 2009 and 2008 are as follows:

	Total Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2009:				
Common stocks:				
Information technology	\$ 4,384,367	\$ 4,384,367	\$ -	\$ -
Financials	3,054,649	3,054,649	-	-
Energy	2,966,411	2,966,411	-	-
Health care	2,963,470	2,963,470	-	-
Consumer staples	2,387,559	2,387,559	-	-
Industrials	2,300,272	2,300,272	-	-
Consumer discretionary	2,126,014	2,126,014	-	-
Materials	877,498	877,498	-	-
Telecommunications	684,093	684,093	-	-
Utilities	<u>594,166</u>	<u>594,166</u>	-	-
Total common stocks	22,338,499	22,338,499	-	-
United States Government				
Agency Securities	4,199,706	4,199,706	-	-
Corporate bonds	7,796,719	-	7,796,719	-
Foreign obligation bonds	412,563	-	412,563	-
Cash and cash equivalents	<u>166,166</u>	<u>166,166</u>	-	-
	<u>\$ 34,913,653</u>	<u>\$ 26,704,371</u>	<u>\$ 8,209,282</u>	<u>\$ -</u>

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis

December 31, 2009 and 2008

5. FAIR VALUE DISCLOSURE...continued

	Total Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
December 31, 2008:				
Common stocks:				
Health care	\$ 2,639,906	\$ 2,639,906	\$ -	\$ -
Information technology	2,560,223	2,560,223	-	-
Consumer staples	2,396,343	2,396,343	-	-
Energy	2,287,716	2,287,716	-	-
Industrials	2,131,479	2,131,479	-	-
Financials	2,079,241	2,079,241	-	-
Consumer discretionary	1,744,719	1,744,719	-	-
Utilities	746,592	746,592	-	-
Telecommunications	697,561	697,561	-	-
Materials	<u>523,852</u>	<u>523,852</u>	-	-
Total common stocks	17,807,632	17,807,632	-	-
Mutual funds	1,036,655	1,036,655	-	-
United States Government				
Agency Securities	5,262,938	5,262,938	-	-
Corporate bonds	7,088,295	-	7,088,295	-
Foreign obligation bonds	295,375	-	295,375	-
Cash and cash equivalents	<u>1,277,803</u>	<u>1,277,803</u>	-	-
	<u>\$ 32,768,698</u>	<u>\$ 25,385,028</u>	<u>\$ 7,383,670</u>	<u>\$ -</u>

As of December 31, 2009 and 2008, no individual investments represent greater than 5% of net assets available for plan benefits. During 2009, the investments appreciated (depreciated) in fair value (including investments bought, sold, as well as held, during the period) as follows:

Net appreciation (depreciation) in fair value:

Investments at fair value as determined by

quoted market value:

Common stock	\$ 4,248,098
United States Government Agency Securities	(183,503)
Mutual funds	<u>539,549</u>
	<u>4,604,144</u>

Investments at estimated fair value:

Corporate bonds	451,797
Foreign obligation bonds	<u>(1,338)</u>
	<u>450,459</u>

Net appreciation in fair value \$ 5,054,603

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

6. INCOME TAX STATUS

The Plan obtained its latest determination letter on May 23, 2003, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is currently being operated in compliance with the applicable requirements of the Internal Revenue Code and accordingly, believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date. Therefore, no provision for income taxes has been included in the Plan financial statements.

7. PRIORITIES UPON PLAN TERMINATION

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

If the Plan is discontinued, the assets of the Plan attributable to contributions of each of the participating subsidiaries (or in the event of partial termination, the assets attributable to affected employees of each of the participating subsidiaries), after providing for necessary expenses, and subject to the provisions of the Plan to prevent discrimination, shall be allocated within each participating subsidiary in the following priority in accordance with ERISA:

- (1) To provide for the payment of Pension Benefits, pro rata to the extent available among all persons in the following subcategories:
 - (a) In the case of the Pension Benefit for each retired Participant and terminated vested Participant or Surviving Spouse, Beneficiary or Joint Annuitant which was in pay status for the 3-year period ending on the termination date of the Plan, the Pension Benefit payable is determined on the basis of the Plan's provisions in effect during the 5-year period ending on the date of Plan termination under which the Pension Benefit is the least, and
 - (b) In the case of a Pension Benefit which would have been in pay status for the 3-year period ending on the termination date of the Plan for each Participant (and each Beneficiary and Joint Annuitant of the Participant) if the Participant had retired prior to the beginning of the 3-year period and if his Pension Benefit had commenced as of the beginning of such period the Pension Benefit payable is determined on the basis of the Plan's provisions in effect during the 5-year period ending on the date of Plan termination under which the Pension Benefit is the least.
- (2) To provide for the payment of Pension Benefits, to the extent not provided under (1) above, with respect to Participants whose benefits are guaranteed by the Pension Benefit Guaranty Corporation.
- (3) To provide for the payment of Pension Benefits, to the extent not provided under (1) and (2) above, with respect to Participants who, on the termination date, have completed the age and service requirements for a Pension Benefit, without reference to the order in which they completed such requirements.
- (4) To provide for the payment of Pension Benefits to the extent not provided under (1), (2) and (3) above, with respect to the remaining Participants on the termination date.
- (5) To the Employer.

Crane and Excelsior Companies Pension Plan

Notes to Financial Statements – Modified Cash Basis
December 31, 2009 and 2008

7. PRIORITIES UPON PLAN TERMINATION...continued

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, adjusted periodically on the maximum amount of an individual's monthly benefit that the PBGC guarantees. Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan Sponsor and the level of benefits guaranteed by the PBGC.

The allocations provided under (1), (2), (3) and (4) above may be accomplished, as determined by the Pension/Profit Sharing Committee ("the Committee"), either by:

- (a) Continuance of the Trust Fund or establishment of a new trust fund; or
- (b) Purchase of annuity contracts from an insurance company; provided, however, that if with respect to any of the above groups, it is not, in the opinion of the Pension Committee, practicable or desirable to do either of the foregoing with respect to such group or groups, the Committee may make the allocation for such group or groups in a manner other than either of such methods of allocation.

Each of the participating subsidiaries, as defined by the Plan, reserves the right at any time, by action of its board of directors, communicated in writing to the Committee, the Trustee and Crane & Co., Inc., to terminate its contributions or to terminate the Plan as to its employees. If such a subsidiary so terminates its contributions to the Plan as to its employees, assets with a fair market value equivalent to the interest in the Trust Fund of such subsidiary shall, as the board of directors of such subsidiary shall direct, either:

- (a) be delivered by the Trustee to such other trustee as shall be designated by the board of directors of such subsidiary for the purpose of providing a plan identical to this Plan for its employees, and for the employees (including their Joint Annuitants and Beneficiaries) for which it had made contributions, or
- (b) be used for the benefit of the employees (including their Joint Annuitants and Beneficiaries) for which such company has made contributions, in the manner provided under the Plan.

If a participating subsidiary ceases to be a subsidiary of Crane & Co., Inc., then such former subsidiary shall cease to be a party to this Plan and the termination provisions of the Plan shall be applicable to it, as if it had terminated the Plan as to its employees.

8. SUBSEQUENT EVENTS

The Plan Sponsor has evaluated all subsequent events through October 13, 2010, the date which the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULES

Crane and Excelsior Companies Pension Plan

Employer Identification Number 04-1215780
Plan Number 002

SCHEDULE H, LINE 4i- SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2009

(a)	(b)	(c)					(d)	(e)
		Description of Investment						
	Identity of Issue, Borrower, Lendor or Similar Party	Type of Investment	Maturity Date	Rate of Interest	Maturity Value	Collateral	Cost	Current Value
	Microsoft Corporation	Common Stock	n/a	n/a	n/a	n/a	\$ 669,330	\$ 679,704
	Cognizant Technology Solutions Corp.	Common Stock	n/a	n/a	n/a	n/a	362,264	665,444
	Cisco Systems Inc.	Common Stock	n/a	n/a	n/a	n/a	418,983	636,086
	American Express Co.	Common Stock	n/a	n/a	n/a	n/a	560,106	610,636
	J P Morgan Chase & Co.	Common Stock	n/a	n/a	n/a	n/a	505,546	604,215
	EMC Corporation/Mass	Common Stock	n/a	n/a	n/a	n/a	653,737	602,715
	Diageo PLC ADR	Common Stock	n/a	n/a	n/a	n/a	650,464	589,291
	Apache Corporation	Common Stock	n/a	n/a	n/a	n/a	334,000	575,689
	Johnson & Johnson Co.	Common Stock	n/a	n/a	n/a	n/a	504,018	560,367
	United Technologies	Common Stock	n/a	n/a	n/a	n/a	336,585	555,280
	Cimarex Energy Co.	Common Stock	n/a	n/a	n/a	n/a	407,192	531,819
	3M Co.	Common Stock	n/a	n/a	n/a	n/a	526,142	529,088
	Novartis A G Sponsored ADR	Common Stock	n/a	n/a	n/a	n/a	511,693	526,882
	Chevron Corporation	Common Stock	n/a	n/a	n/a	n/a	305,347	521,992
	US Bancorp Del New	Common Stock	n/a	n/a	n/a	n/a	636,188	516,379
	Yum Brands Inc.	Common Stock	n/a	n/a	n/a	n/a	507,214	515,108
	Stryker Corp.	Common Stock	n/a	n/a	n/a	n/a	473,925	509,744
	Clorox Co.	Common Stock	n/a	n/a	n/a	n/a	453,508	498,370
	Exxon Mobile Corp.	Common Stock	n/a	n/a	n/a	n/a	515,212	493,696
	Autodesk Inc.	Common Stock	n/a	n/a	n/a	n/a	466,766	486,856
	Petsmart Inc.	Common Stock	n/a	n/a	n/a	n/a	589,451	477,751
	Texas Instruments	Common Stock	n/a	n/a	n/a	n/a	527,211	472,989
	Home Dept Inc.	Common Stock	n/a	n/a	n/a	n/a	465,105	470,980
	Illinois Tool Wks Inc.	Common Stock	n/a	n/a	n/a	n/a	469,468	455,905
	Pepsico Incorporated	Common Stock	n/a	n/a	n/a	n/a	483,033	454,176
	Ultra Petroleum Corp.	Common Stock	n/a	n/a	n/a	n/a	461,833	453,227
	Wells Fargo & CO New	Common Stock	n/a	n/a	n/a	n/a	300,216	443,986
	Proctor & Gamble Co.	Common Stock	n/a	n/a	n/a	n/a	323,442	431,686
	Hewlett Packard Co.	Common Stock	n/a	n/a	n/a	n/a	309,518	429,078
	Colgate Polomolive Co.	Common Stock	n/a	n/a	n/a	n/a	315,930	414,036
	Paycheck Inc.	Common Stock	n/a	n/a	n/a	n/a	392,365	411,495
	Quest Diagnostics Inc.	Common Stock	n/a	n/a	n/a	n/a	328,216	399,112
	BHP Billiton Ltd.	Common Stock	n/a	n/a	n/a	n/a	244,253	395,919
	Transocean LTD	Common Stock	n/a	n/a	n/a	n/a	358,378	389,988
	Fastenal Co.	Common Stock	n/a	n/a	n/a	n/a	442,361	381,006
	Expeditors Intl. Wash Inc.	Common Stock	n/a	n/a	n/a	n/a	376,196	378,993
	AT&T Inc.	Common Stock	n/a	n/a	n/a	n/a	426,196	375,322
	Walt Disney Co.	Common Stock	n/a	n/a	n/a	n/a	349,206	362,813
	Zimmer HLDGS Inc.	Common Stock	n/a	n/a	n/a	n/a	431,460	354,660
	Medtronic Inc.	Common Stock	n/a	n/a	n/a	n/a	364,662	351,840
	State Street Corp.	Common Stock	n/a	n/a	n/a	n/a	302,692	320,454
	Gallagher Arthur J & Co.	Common Stock	n/a	n/a	n/a	n/a	397,851	318,066
	Verizon Communications	Common Stock	n/a	n/a	n/a	n/a	298,165	308,772
	Abercromb & Fitch CL A	Common Stock	n/a	n/a	n/a	n/a	209,718	299,362
	EXELON Corp.	Common Stock	n/a	n/a	n/a	n/a	292,262	297,618
	Southern Co.	Common Stock	n/a	n/a	n/a	n/a	314,458	296,548
	Monsanto Co.	Common Stock	n/a	n/a	n/a	n/a	262,784	269,775
	Thermo Fisher Scientific Inc.	Common Stock	n/a	n/a	n/a	n/a	298,115	260,864
	Ade Ltd	Common Stock	n/a	n/a	n/a	n/a	205,269	240,912
	Sigma Aldrich Corp.	Common Stock	n/a	n/a	n/a	n/a	209,243	211,805
							20,547,277	22,338,499

Crane and Excelsior Companies Pension Plan

Employer Identification Number 04-1215780

Plan Number 002

SCHEDULE H, LINE 4i- SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2009

(a)	(b)	(c)					(d)	(e)
		Description of Investment						
	Identity of Issue, Borrower, Lendor or Similar Party	Type of Investment	Maturity Date	Rate of Interest	Maturity Value	Collateral	Cost	Current Value
	U S Treasury Note	United States Government Agency Security	08/15/2016	4.875%	850,000	n/a	919,972	935,000
	Federal National Mortgage Assn.	United States Government Agency Security	10/15/2013	4.625%	425,000	n/a	427,312	460,992
	Federal Farm Credit Bank	United States Government Agency Security	11/28/2016	5.200%	400,000	n/a	404,552	434,000
	Federal Farm Credit Bank	United States Government Agency Security	08/25/2016	3.875%	370,000	n/a	383,067	386,939
	Federal Home Loan Mortgage	United States Government Agency Security	11/17/2015	4.750%	300,000	n/a	318,216	324,986
	Federal Home Loan Bank	United States Government Agency Security	06/01/2017	5.375%	300,000	n/a	300,000	315,938
	U S Treasury Inflation Index	United States Government Agency Security	1/15/2015	1.625%	290,737	n/a	277,984	302,730
	Federal National Mortgage Assn.	United States Government Agency Security	05/18/2012	4.875%	250,000	n/a	257,921	269,921
	U S Treasury Note	United States Government Agency Security	05/15/2019	3.125%	280,000	n/a	275,538	265,257
	U S Treasury Note	United States Government Agency Security	08/15/2017	4.750%	160,000	n/a	168,400	173,662
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							4,042,568	4,199,706
	GE Company	Corporate Bond	02/01/2013	5.000%	400,000	n/a	396,720	423,184
	Wells Fargo Co. FDIC GTD	Corporate Bond	12/09/2011	3.000%	380,000	n/a	382,398	392,301
	Honeywell Intl.	Corporate Bond	03/01/2010	7.500%	375,000	n/a	405,851	379,511
	Bank of America	Corporate Bond	12/01/2017	5.750%	300,000	n/a	309,312	307,206
	Caterpillar Fin	Corporate Bond	12/15/2012	4.500%	300,000	n/a	300,000	307,197
	JPMorgan Chase & Co.	Corporate Bond	01/15/2018	6.000%	270,000	n/a	277,936	290,247
	Pepsico Inc.	Corporate Bond	05/15/2012	5.150%	255,000	n/a	263,483	274,508
	Occidental Petroleum	Corporate Bond	01/15/2012	6.750%	250,000	n/a	275,970	273,538
	General Electric Capital	Corporate Bond	12/09/2011	3.000%	265,000	n/a	275,226	273,167
	Conoco Funding Co.	Corporate Bond	10/15/2011	6.350%	250,000	n/a	261,299	271,990
	Dominion Resources	Corporate Bond	09/17/2012	5.700%	250,000	n/a	265,185	270,153
	Kellog Co.	Corporate Bond	04/01/2011	6.600%	250,000	n/a	267,970	266,620
	AT&T Inc.	Corporate Bond	02/15/2019	5.800%	250,000	n/a	247,933	266,490
	Caterpillar Fin	Corporate Bond	10/12/2011	5.125%	250,000	n/a	252,170	265,348
	Citigroup INC FDIC GTD	Corporate Bond	12/09/2011	2.875%	255,000	n/a	264,032	262,650
	Union Pacific Co.	Corporate Bond	01/15/2011	6.650%	245,000	n/a	257,784	258,418
	Wells Fargo Co.	Corporate Bond	09/15/2016	5.125%	250,000	n/a	243,405	249,438
	BP Capital Markets	Corporate Bond	11/07/2013	5.250%	225,000	n/a	225,676	245,077
	United Tech Corp.	Corporate Bond	05/01/2015	4.875%	225,000	n/a	225,970	241,513
	Credit Suisse FB	Corporate Bond	01/15/2012	6.500%	220,000	n/a	239,451	239,402
	ConocoPhillips	Corporate Bond	10/15/2016	5.625%	200,000	n/a	204,738	216,960
	Chase Issuance TR	Corporate Bond	12/15/2012	4.650%	200,000	n/a	199,924	206,126
	BP Capital Markets Place	Corporate Bond	03/10/2012	3.125%	200,000	n/a	199,988	206,010
	ERP Operating LP	Corporate Bond	04/01/2014	5.200%	175,000	n/a	172,615	179,646
	Bank of America Corp.	Corporate Bond	05/15/2014	7.357%	150,000	n/a	154,193	170,207
	Cisco Systems Inc.	Corporate Bond	02/15/2019	4.950%	150,000	n/a	150,668	153,752
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	Bank of NY Mellon	Corporate Bond	11/01/2012	4.950%	125,000	n/a	123,716	134,623
	Trans Canada Pipe	Corporate Bond	01/15/2019	7.125%	105,000	n/a	115,736	122,767
	Union Pacific Corp.	Corporate Bond	01/15/2015	4.875%	110,000	n/a	112,934	114,220
	Trans-Canada Pipelines	Corporate Bond	05/15/2012	8.625%	90,000	n/a	104,144	102,132
							7,586,657	7,796,719
	Ontario Prov CDA	Foreign Obligation Bond	02/03/2015	4.500%	275,000	n/a	278,522	290,389
	Deutsche Band London	Foreign Obligation Bond	05/20/2013	4.875%	115,000	n/a	118,526	122,174
							397,048	412,563
	Federated Inst. Gov't Obligation Fund	Cash and Cash Equivalents	n/a	n/a	n/a	n/a	166,166	166,166
							166,166	166,166
							\$ 32,739,716	\$ 34,913,653

Crane and Excelsior Companies Pension Plan

Employer Identification Number 04-1215780

Plan Number 002

SCHEDULE H, LINE 4i - SCHEDULE OF REPORTABLE TRANSACTIONS

Year Ended December 31, 2009

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Category (iii) - Series of transactions in excess of 5% of plan assets								
* TD Banknorth	Federated Inst. Gov't. Oblig. Fund #05 (117 Transactions)	\$ 5,600,692	\$ -	\$ -	\$ -	\$ -	\$ 5,600,692	\$ -
* TD Banknorth	Federated Inst. Gov't. Oblig. Fund #05 (50 Transactions)	-	6,712,329	-	-	6,712,329	6,712,329	-

There were no other categories of reportable transactions during 2009

* Represents a party-in-interest to the Plan.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Sponsor

Crane & Co., Inc.

Effective Date and Most Recent Amendment

January 1, 1958, as last amended effective January 1, 2008.

Eligibility

All employees hired prior to July 1, 2007 are eligible to participate in the plan after completing one year of service and attaining age 21. Participants hired prior to July 1, 2007 who terminate employment and are rehired on or after July 1, 2007 will accrue no additional benefits under the plan.

Retirement Dates

- | | |
|---------------|---|
| 1. Normal | Age 65 and 5 years of service. |
| 2. Early | Age 62 and 5 years of service or age 55 and 30 years of service. |
| 3. Late | After normal retirement date. |
| 4. Disability | Upon permanent disablement, as determined by the Company, and completion of 5 years of vesting service. |

Plan Name:	Crane and Excelsior Companies Pension Plan
EIN / PN	04-1215780 / 001
Plan Sponsor:	Crane and Co., Inc.
Valuation Date	January 1, 2009

SCHEDULE SB ATTACHMENTS

Retirement Benefits

1. Normal

.40% of average compensation up to Covered Compensation time years of service up to 35,

plus

.75% of average compensation in excess of Covered Compensation times years of service up to 35,

plus

.40% of average annual compensation times years of service over 35.

Average annual compensation is defined as compensation paid in the 60 consecutive months of employment within the last 120 months of employment producing the highest average. Compensation includes all wages and salaries, including overtime, commissions, bonuses and any deferrals under section 125 or 401(K) plans, plus employer contributions to the Profit Sharing Plus Plan.

Covered compensation is the average of the Social Security wage bases in the 35 years prior to Social Security normal retirement age.

Minimum annual benefit is \$109 per year of service.
2. Early

Determined as in 1. above and payable at age 65 without reduction, or reduced ¼% for each month by which the benefit commencement date precedes the Participant's normal retirement date.
3. Late

Determined as in 1. above based on service and compensation to late retirement date.
4. Disability

Determined as in 1. above to the date of disablement and payable at disability retirement date (1) without reduction if the participant is eligible for Social Security disability payments or (2) reduced ¼% for each month prior to age 65, if not eligible for Social Security payments.

Vesting

Upon termination of employment after 5 years of vesting service, a participant will be eligible for a deferred vested benefit determined for normal retirement, but based on average compensation and service at termination. The benefit is payable at age 65 without reduction or any time after age 62 reduced ¼% for each month commencement precedes age 65. When a participant who completed 30 years of service attains age 55, the participant is eligible to begin payments. These payments would be reduced ¼% for each month commencement precedes age 65.

Plan Name:	Crane and Excelsior Companies Pension Plan
EIN / PN	04-1215780 / 001
Plan Sponsor:	Crane and Co., Inc.
Valuation Date	January 1, 2009

SCHEDULE SB ATTACHMENTS

Death Benefits

1. Before Retirement

If a married participant dies while employed on or after the earliest retirement age, his spouse will be entitled to a lifetime benefit of 50% of the early retirement benefit the participant would have received had he retired the day before his death and elected the normal 50% joint and survivor income option.

If a married participant dies before the earliest retirement age and has completed at least 5 years of vesting service, the participant's spouse will receive the same benefit as if the participant had separated from service on the date of death, survived to the earliest retirement age, retired with an immediate 50% qualified joint and survivor annuity on that date, and died on the following day. The surviving spouse will begin to receive payments at the participant's earliest retirement age unless the spouse elects a later date.

2. After Retirement

Death benefits after commencement of benefits are dependent on the optional form elected.

Cost of Living Adjustments (COLA's)

The plan has provided ad hoc COLA's to retired members from time to time. The last COLA was granted effective July 1, 2003 for members who retired before July 1, 2002.

Forms of Payment

The normal form of payment is a life annuity. The benefit to a married participant is payable on an actuarially reduced basis for the lifetime of the participant with 50% continued to the spouse after the participant's death.

Optional forms of payment include:

- 10 year certain and life annuity
- Joint and Survivor Annuity, with either 50%, 75% or 100% continuation to the spouse
- Single lump-sum payment (available only if eligible for normal, early or late retirement from active service or if the actuarial equivalent of the accrued benefits is less than \$25,000)

All optional forms of payment are the actuarial equivalent of the normal form. If married, spousal consent is required to elect an optional form.

Changes in Plan Provision Since Last Actuarial Valuation

None.

Plan Name:	Crane and Excelsior Companies Pension Plan
EIN / PN	04-1215780 / 001
Plan Sponsor:	Crane and Co., Inc.
Valuation Date	January 1, 2009

Crane and Excelsior Companies Pension Plan

Employer Identification Number 04-1215780
Plan Number 002

SCHEDULE H, LINE 4i- SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2009

(a)	(b)	(c)					(d)	(e)
		Description of Investment						
	Identity of Issue, Borrower, Lendor or Similar Party	Type of Investment	Maturity Date	Rate of Interest	Maturity Value	Collateral	Cost	Current Value
	Microsoft Corporation	Common Stock	n/a	n/a	n/a	n/a	\$ 669,330	\$ 679,704
	Cognizant Technology Solutions Corp.	Common Stock	n/a	n/a	n/a	n/a	362,264	665,444
	Cisco Systems Inc.	Common Stock	n/a	n/a	n/a	n/a	418,983	636,086
	American Express Co.	Common Stock	n/a	n/a	n/a	n/a	560,106	610,636
	J P Morgan Chase & Co.	Common Stock	n/a	n/a	n/a	n/a	505,546	604,215
	EMC Corporation/Mass	Common Stock	n/a	n/a	n/a	n/a	653,737	602,715
	Diageo PLC ADR	Common Stock	n/a	n/a	n/a	n/a	650,464	589,291
	Apache Corporation	Common Stock	n/a	n/a	n/a	n/a	334,000	575,689
	Johnson & Johnson Co.	Common Stock	n/a	n/a	n/a	n/a	504,018	560,367
	United Technologies	Common Stock	n/a	n/a	n/a	n/a	336,585	555,280
	Cimarex Energy Co.	Common Stock	n/a	n/a	n/a	n/a	407,192	531,819
	3M Co.	Common Stock	n/a	n/a	n/a	n/a	526,142	529,088
	Novartis A G Sponsored ADR	Common Stock	n/a	n/a	n/a	n/a	511,693	526,882
	Chevron Corporation	Common Stock	n/a	n/a	n/a	n/a	305,347	521,992
	US Bancorp Del New	Common Stock	n/a	n/a	n/a	n/a	636,188	516,379
	Yum Brands Inc.	Common Stock	n/a	n/a	n/a	n/a	507,214	515,108
	Stryker Corp.	Common Stock	n/a	n/a	n/a	n/a	473,925	509,744
	Clorox Co.	Common Stock	n/a	n/a	n/a	n/a	453,508	498,370
	Exxon Mobile Corp.	Common Stock	n/a	n/a	n/a	n/a	515,212	493,696
	Autodesk Inc.	Common Stock	n/a	n/a	n/a	n/a	466,766	486,856
	Petsmart Inc.	Common Stock	n/a	n/a	n/a	n/a	589,451	477,751
	Texas Instruments	Common Stock	n/a	n/a	n/a	n/a	527,211	472,989
	Home Dept Inc.	Common Stock	n/a	n/a	n/a	n/a	465,105	470,980
	Illinois Tool Wks Inc.	Common Stock	n/a	n/a	n/a	n/a	469,468	455,905
	Pepsico Incorporated	Common Stock	n/a	n/a	n/a	n/a	483,033	454,176
	Ultra Petroleum Corp.	Common Stock	n/a	n/a	n/a	n/a	461,833	453,227
	Wells Fargo & CO New	Common Stock	n/a	n/a	n/a	n/a	300,216	443,986
	Proctor & Gamble Co.	Common Stock	n/a	n/a	n/a	n/a	323,442	431,686
	Hewlett Packard Co.	Common Stock	n/a	n/a	n/a	n/a	309,518	429,078
	Colgate Polomolive Co.	Common Stock	n/a	n/a	n/a	n/a	315,930	414,036
	Paycheck Inc.	Common Stock	n/a	n/a	n/a	n/a	392,365	411,495
	Quest Diagnostics Inc.	Common Stock	n/a	n/a	n/a	n/a	328,216	399,112
	BHP Billiton Ltd.	Common Stock	n/a	n/a	n/a	n/a	244,253	395,919
	Transocean LTD	Common Stock	n/a	n/a	n/a	n/a	358,378	389,988
	Fastenal Co.	Common Stock	n/a	n/a	n/a	n/a	442,361	381,006
	Expeditors Intl. Wash Inc.	Common Stock	n/a	n/a	n/a	n/a	376,196	378,993
	AT&T Inc.	Common Stock	n/a	n/a	n/a	n/a	426,196	375,322
	Walt Disney Co.	Common Stock	n/a	n/a	n/a	n/a	349,206	362,813
	Zimmer HLDGS Inc.	Common Stock	n/a	n/a	n/a	n/a	431,460	354,660
	Medtronic Inc.	Common Stock	n/a	n/a	n/a	n/a	364,662	351,840
	State Street Corp.	Common Stock	n/a	n/a	n/a	n/a	302,692	320,454
	Gallagher Arthur J & Co.	Common Stock	n/a	n/a	n/a	n/a	397,851	318,066
	Verizon Communications	Common Stock	n/a	n/a	n/a	n/a	298,165	308,772
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Crane and Excelsior Companies Pension Plan

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	Ontario Prov CDA	Foreign Obligation Bond	02/03/2015	4.500%	275,000	n/a	278,522	290,389
	Deutsche Band London	Foreign Obligation Bond	05/20/2013	4.875%	115,000	n/a	118,526	122,174
							397,048	412,563
	Federated Inst. Gov't Obligation Fund	Cash and Cash Equivalents	n/a	n/a	n/a	n/a	166,166	166,166
							166,166	166,166
							\$ 32,739,716	\$ 34,913,653

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26 Schedule of Active Participant Data as of January 1, 2009

Attained Age	Years of Credited Service																			
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & Over	
	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	0		17		0		0		0		0		0		0		0		0	
25 - 29	0		16		12		0		0		0		0		0		0		0	
30 - 34	0		15		13		9		0		0		0		0		0		0	
35 - 39	0		13		11		30		10		1		0		0		0		0	
40 - 44	0		15		11		26		20		19		0		0		0		0	
45 - 49	0		17		16		47		34		36		25		5		0		0	
50 - 54	0		10		14		40		32		26		31		34		6		0	
55 - 59	0		22		11		26		23		26		21		13		33		2	
60 - 64	0		3		12		25		11		7		7		6		15		5	
65 - 69	0		1		3		4		1		1		0		0		1		2	
70 & Over	0		0		0		1		0		1		0		1		0		1	

Plan Name: Crane and Excelsior Companies Pension Plan
 EIN / PN: 04-1215780 / 001
 Plan Sponsor: Crane and Co., Inc.
 Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Plan Sponsor

Crane and Co., Inc.

Discount Rates

Current plan year PPA effective interest rate: 8.17%

Prior plan year PPA effective interest rate: 6.00%

Full Yield Curve

Applicable month: October

Transition election: No

Assumed Cost-of-Living Adjustments

None.

Compensation Increases

Annual Rate at Selected Ages:	
Age	Rate
20	9.4%
25	6.9%
30	5.6%
35	5.4%
40	5.3%
45	4.8%
50	4.4%
55	4.2%
60 and over	4.0%

However, no compensation increases are assumed during 2009. For 2010 and beyond, it is assumed that compensation increases according to the table above.

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Future Increases in Social Security

5.00% annual increases in the national average wage index are assumed.

Future Increases in Maximum Benefits and Plan Compensation Limitations

Projected benefits are limited to the maximum presently allowed under IRC Section 415. Plan compensation is limited to the maximum presently allowed under IRC Section 401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

Inclusion Date

The valuation date coincident with or next following the date on which the employee is hired.

Plan-related Expenses

The amount included this year for plan-related expenses is \$128,000.

Mortality

For all participants: The prescribed mortality assumption under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants.

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), rates of retirement based on Crane & Co., Inc. experience as follows:

Age	Rate of Retirement
55	5%
56	5%
57	5%
58	5%
59	5%
60	5%
61	5%
62	30%
63	30%
64	30%
65	100%

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Disability Rates

None.

Representative Termination Rates (not due to disability, retirement, or mortality)

Attained Age	Annual Rate
20	5.0%
25	5.0%
30	4.1%
35	2.9%
40	2.5%
45	2.5%
50	2.5%
55	3.4%
60	4.0%

The following rates are used during the first five years of employment:

First year of employment -	9.0%
Second year of employment -	8.0%
Third year of employment -	7.0%
Fourth year of employment -	6.0%
Fifth year of employment -	5.0%

Form of Payment

50% of retiring participants are assumed to elect a lump-sum and all other participants are assumed to elect the normal form. Lump sums are valued assuming the above interest assumption and mortality under Rev. Ruling 2007-67.

Marriage

For purposes of valuing the pre-retirement surviving spouse's benefit, 85% of eligible participants are assumed to be married and male spouses are assumed to be 3 years older than female spouses.

Employees

It was assumed that there will be no new or rehired employees.

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Plan Compensation

Compensation assumed paid in the current year beginning on the valuation date is the prior year's annual rate increased by 10% to estimate anticipated long term average increases due to profit sharing.

Asset Method

Under this method, the valuation assets are equal to the average of three values (all determined without regard to receivable contributions), the result increased by the discounted present value of contributions expected to be made after the valuation date based on the prior plan year PPA effective interest rate. This amount is then subject to a 10% corridor around the market value of assets (including the discounted present value of receivable contributions) as of the valuation date. The three values used to develop the average value are: the market value of assets as of the current valuation date, the adjusted market value of assets as of the prior valuation date and the adjusted market value of assets as of the second prior valuation date. The adjusted market value as of a relevant valuation date is equal to the market value of assets as of the prior valuation date increased by actual plan contributions and assumed return on plan assets and decreased by actual plan disbursements after that date until the current valuation date. The assumed rate of return on plan assets for the prior plan year (pursuant to IRS Notice 2009-22) was 6.38%, which is the lesser of the anticipated rate of return on assets for the plan year, equal to 8.25%, and the applicable limitation for the plan year, equal to 6.38%. The assumed rate of return on plan assets for the second prior plan year (pursuant to IRS Notice 2009-22) was 6.09%, which is the lesser of the anticipated rate of return on assets for the plan year, equal to 8.25%, and the applicable limitation for the plan year, equal to 6.09%. The algebraically equivalent development of this method (pursuant to IRS Notice 2009-22) is shown in Section 2.4. Because expected investment returns under this method are limited under WRERA, over time it is more likely to produce an actuarial value that is expected to be less than the market value of assets.

Participant Data

Employee data was supplied on a diskette by the employer as of the valuation date. Data on persons receiving benefits was provided on a listing. Data on other participants was provided by the employer.

Tax Policy

The actuarial valuation performed for the plan year ending December 31, 2009 is used to determine the maximum deductible contribution for the tax year ending December 31, 2009.

Benefits Not Included in Valuation

No assumption is made to reflect elections of lump sums under \$25,000 available to participants assumed to terminate before eligibility to retire.

Plan Name:	Crane and Excelsior Companies Pension Plan
EIN / PN:	04-1215780 / 001
Plan Sponsor:	Crane and Co., Inc.
Valuation Date:	January 1, 2009

SCHEDULE SB ATTACHMENTS

Nature of Actuarial Calculations

The results documented in this report are estimates based on data that may be imperfect and on assumptions about future events. Certain plan provisions may be approximated or deemed insignificant and therefore are not valued. Assumptions may be made about participant data or other factors. Reasonable efforts were made in this valuation to ensure that items that are significant in the context of the actuarial liabilities or costs are treated appropriately, and not excluded or included inappropriately.

A range of results, different from those presented in this report could be considered reasonable. The numbers are not rounded, but this is for convenience only and should not imply precision, which is not inherent in actuarial calculations. Certain percentages determined in this report, such as the Funding Target Attainment Percentage, are rounded to the nearest .01% (e.g., 81.58%) to be consistent with the rounding specified for Schedule SB of the Form 5500.

The assumptions selected for this valuation other than those prescribed by law, generally reflect long-term average expectations. If overall future plan experience is less favorable than assumed, the relative level of plan costs or contribution requirements determined in this valuation will likely increase in future valuations. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for the measurements (such as the end of an amortization period); and changes in plan provisions or applicable law. It is beyond the scope of this actuarial valuation to analyze the potential range of future pension contributions, but we can do so upon request.

Plan Name:	Crane and Excelsior Companies Pension Plan
EIN / PN:	04-1215780 / 001
Plan Sponsor:	Crane and Co., Inc.
Valuation Date:	January 1, 2009

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25 Change in Method

The discount rate was changed from the September 3-segment rates to the full yield curve as of the October before the valuation date. This change is being made as elected by the plan sponsor and is deemed to be automatically approved by the IRS pursuant to final regulation §1.430(h)(2)-1(h)(3).

The asset valuation method was updated pursuant to changes in the permitted asset valuation method made by the Worker, Retiree, and Employer Recovery Act of 2008 (WRERA). As described in IRS Notice 2009-22, expected earnings are taken into account when averaging. Changes in the asset method for plan years beginning in 2009 to any permissible asset method are deemed to be automatically approved by the IRS.

The amount included this year for plan-related expenses is \$128,000. WRERA includes a technical corrections provision requiring target normal cost to include the amount of plan-related expenses expected to be paid from plan assets during the year.

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

The salary scale assumption was changed so that no compensation increases are assumed during 2009.

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

SCHEDULE SB ATTACHMENTS

Statement by Enrolled Actuary

Plan Sponsor	Crane and Co., Inc.
EIN/PN	04-1215780/001
Plan Name	Crane and Excelsior Companies Pension Plan
Valuation Date	January 1, 2009
Enrolled Actuary	Seamus A. Doyle
Enrollment Number	08-05809

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2009

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

x	q _{xr}	l _x	$x-55p_{55} = l_x / l_{55}$	$q_{xr} * l_x / l_{55}$	$x * q_x * l_x / l_{55}$
55	0.05	1,000,000	1.000000	0.050000	2.750000
56	0.05	950,000	0.950000	0.047500	2.660000
57	0.05	902,500	0.902500	0.045125	2.572125
58	0.05	857,375	0.857375	0.042869	2.486388
59	0.05	814,506	0.814506	0.040725	2.402793
60	0.05	773,781	0.773781	0.038689	2.321343
61	0.05	735,092	0.735092	0.036755	2.242030
62	0.30	698,337	0.698337	0.209501	12.989074
63	0.30	488,836	0.488836	0.146651	9.239002
64	0.30	342,185	0.342185	0.102656	6.569957
65	1.00	239,530	0.239530	0.239530	15.569430
Average age at retirement					61.802142
Rounded for Schedule SB Line 22					62

Plan Name: Crane and Excelsior Companies Pension Plan
EIN / PN: 04-1215780 / 001
Plan Sponsor: Crane and Co., Inc.
Valuation Date: January 1, 2009

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 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2009</div> 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		01/01/2009	and ending
		12/31/2009	
A This return/report is for:	☐ a multiemployer plan; ☒ a single-employer plan;	☐ a multiple-employer plan; or ☐ a DFE (specify) _____	
B This return/report is:	☐ the first return/report; ☐ an amended return/report;	☐ the final 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; ☐ special extension (enter description) _____	☐ automatic extension;	☐ the DFVC program;

Part II Basic Plan Information - enter all requested information			
1a Name of plan CRANE AND EXCELSIOR COMPANIES PENSION PLAN	1b	Three-digit plan number (PN) ►	001
	1c	Effective date of plan	01/01/1958
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) CRANE & CO., INC. 30 SOUTH STREET DALTON MA 01226-1751	2b	Employer Identification Number (EIN)	04-1215780
	2c	Sponsor's telephone number	413-684-2600
	2d	Business code (see instructions)	322100

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		10/13/10	KAREN M. STREETER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (If same as plan sponsor, enter "Same") SAME	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
--	--

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	1,407
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	796
b Retired or separated participants receiving benefits	6b	322
c Other retired or separated participants entitled to future benefits	6c	161
d Subtotal. Add lines 6a, 6b, and 6c	6d	1,279
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	55
f Total. Add lines 6d and 6e	6f	1,334
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	15
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 1G

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)

Crane and Excelsior Companies Pension Plan

Employer Identification Number 04-1215780

Plan Number 002

SCHEDULE H, LINE 4i - SCHEDULE OF REPORTABLE TRANSACTIONS

Year Ended December 31, 2009

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Category (iii) - Series of transactions in excess of 5% of plan assets								
* TD Banknorth	Federated Inst. Gov't. Oblig. Fund #05 (117 Transactions)	\$ 5,600,692	\$ -	\$ -	\$ -	\$ -	\$ 5,600,692	\$ -
* TD Banknorth	Federated Inst. Gov't. Oblig. Fund #05 (50 Transactions)	-	6,712,329	-	-	6,712,329	6,712,329	-

There were no other categories of reportable transactions during 2009

* Represents a party-in-interest to the Plan.

**SCHEDULE SB
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**This schedule is required to be filed under section 104 of the Employee
Retirement Income Security Act of 1974 (ERISA) and section 6059 of the
Internal Revenue Code (the Code)

File as an attachment to Form 5500 or 5500-SF.

OMB No. 1210-0110

2009This Form is Open to Public
Inspection

For calendar plan year 2009 or fiscal plan year beginning and ending

Round off amounts to nearest dollar.

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

A Name of plan**B** Three-digit
plan number (PN)

001

CRANE & EXCELSIOR COMPANIES PENSION PLAN

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF**D** Employer Identification Number (EIN)

CRANE & CO., INC.

04-1215780

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B**F** Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500**Part I Basic Information****1** Enter the valuation date: Month 1 Day 1 Year 2009**2** Assets.**a** Market value **2a** 32,966,140**b** Actuarial value **2b** 36,262,754**3** Funding target/participant count breakdown

(1) Number of participants

(2) Funding Target

a For retired participants and beneficiaries receiving payment **3a** 378 14,619,890**b** For terminated vested participants **3b** 133 2,359,884**c** For active participants:(1) Non-vested benefits **3c(1)** 1,568,317(2) Vested benefits **3c(2)** 17,798,261(3) Total active **3c(3)** 896 19,366,578**d** Total **3d** 1,407 36,346,352**4** If the plan is at-risk, check the box and complete items (a) and (b) ☐**a** Funding target disregarding prescribed at-risk assumptions **4a****b** Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been
at-risk for fewer than five consecutive years and disregarding loading factor **4b****5** Effective interest rate **5** 8.17 %**6** Target normal cost **6** 1,245,538**Statement by Enrolled Actuary**To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in
accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions in
combination offer my best estimate of anticipated experience under the plan.**SIGN
HERE**

Seamus A. Doyle

S.A.

Signature of actuary

10/8/2010

Date

Seamus A. Doyle

08-05809

Type or print name of actuary

Most recent enrollment number

Towers Watson Delaware Inc.

(781) 237-3900

Firm name

Telephone number (including area code)

80 William Street

Wellesley Hills

MA 02481-3713

Address of the firm

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

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	3,292,972	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	1,501,344	0
9 Amount remaining (Item 7 minus item 8)	1,791,628	0
10 Interest on item 9 using prior year's actual return of <u>(21.09)%</u>	(377,801)	
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		0
b Interest on (a) using prior year's effective rate of <u>6.00 %</u>		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Reduction in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (Item 9 + Item 10 + Item 11d - Item 12)	1,413,827	0

Part III Funding percentages

14 Funding target attainment percentage	14	95.88 %
15 Adjusted funding target attainment percentage	15	99.77 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	103.25 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/12/2010	500,000				
06/11/2010	1,234,728				
08/20/2010	2,400,000				
Totals ▶			18(b)	4,134,728	18(c) 0

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

a Contributions allocated toward unpaid minimum required contribution from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3,665,247

20 Quarterly contributions and liquidity shortfalls:

- a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c If 20a is "Yes," see instructions and complete the following table as applicable:

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

Part V Assumptions used to determine funding target and target normal cost			
21 Discount rate:			
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: % ☒ N/A, full yield curve used
b Applicable month (enter code)			21b 3
22 Weighted average retirement age			22 62
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute		
Part VI Miscellaneous items			
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No			
26 Is the plan required to provide a Schedule of Active Participants? If "Yes" see instructions regarding required attachment. ☒ Yes ☐ No			
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.			27
Part VII Reconciliation of unpaid minimum required contributions for prior years			
28 Unpaid minimum required contribution for all prior years			28
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a)			29
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)			30 0
Part VIII Minimum required contribution for current year			
31 Target normal cost, adjusted, if applicable (see instructions)			31 1,245,538
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		0	0
b Waiver amortization installment			
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount			33
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)			34 1,245,538
		Carryover balance	Prefunding balance
35 Balances used to offset funding requirement		1,120,984	0
36 Additional cash requirement (item 34 minus item 35)			36 124,554
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)			37 3,665,247
38 Interest-adjusted excess contributions for current year (see instructions)			38 3,540,693
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)			39 0
40 Unpaid minimum required contribution for all years			40 0