

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

Part II	Basic Plan Information—enter all requested information
1a	Name of plan PENSION PLAN FOR EMPLOYEES OF FIRSTMERIT CORPORATION AND AFFILIATES
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 11/01/1952
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) FIRSTMERIT CORPORATION 106 SOUTH MAIN STREET, 9TH FLOOR AKRON, OH 44308-1444
2b	Employer Identification Number (EIN) 34-1339938
2c	Sponsor's telephone number 330-384-7114
2d	Business code (see instructions) 522110

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	ANASTASIA WEIHE
	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") FIRSTMERIT CORPORATION 106 SOUTH MAIN STREET, 9TH FLOOR AKRON, OH 44308-1444	3b Administrator's EIN 34-1339938 3c Administrator's telephone number 330-384-7114
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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	4561
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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	1892
b Retired or separated participants receiving benefits.....	6b	584
c Other retired or separated participants entitled to future benefits.....	6c	1866
d Subtotal. Add lines 6a , 6b , and 6c	6d	4342
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	90
f Total. Add lines 6d and 6e	6f	4432
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	245

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 PENSION PLAN FOR EMPLOYEES OF FIRSTMERIT CORPORATION AND AFFILIATES	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF FIRSTMERIT CORPORATION	D Employer Identification Number (EIN) 34-1339938

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2009		
2 Assets:		
a Market value	2a	111115058
b Actuarial value	2b	122226563
3 Funding target/participant count breakdown	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	3a 612	27157740
b For terminated vested participants	3b 1880	25958038
c For active participants:		
(1) Non-vested benefits	3c(1)	4473772
(2) Vested benefits	3c(2)	50179452
(3) Total active	3c(3) 2069	54653224
d Total	3d 4561	107769002
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	8.08 %
6 Target normal cost	6	4411425

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	10/06/2010
Signature of actuary	Date
DAVID A.HENDERSON	08-06905
Type or print name of actuary	Most recent enrollment number
HEWITT ASSOCIATES LLC	216-573-9700
Firm name	Telephone number (including area code)
5005 ROCKSIDE ROAD, SUITE 1000 INDEPENDENCE, OH 44131	
Address of the firm	

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

Part II Beginning of year carryover and prefunding balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	15313642	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	2381377	0
9	Amount remaining (Item 7 minus item 8).....	12932265	0
10	Interest on item 9 using prior year's actual return of <u>-23.32</u> %	-3015804	
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		5125302
b	Interest on (a) using prior year's effective rate of <u>6.14</u> %		-386860
c	Total available at beginning of current plan year to add to prefunding balance		4738442
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).....	9916461	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	104.21 %
15	Adjusted funding target attainment percentage.....	15	113.41 %
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	107.26 %
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
09/14/2010	20000000				
			Totals ►	18(b)	20000000
				18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years.....	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c 17523332
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of Quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

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

21 Discount rate:				
a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
b Applicable month (enter code)				21b 2
22 Weighted average retirement age				22 60
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	0
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	0
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	0
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	0
36 Additional cash requirement (item 34 minus item 35).....	36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	17523332
38 Interest-adjusted excess contributions for current year (see instructions).....	38	17523332
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan PENSION PLAN FOR EMPLOYEES OF FIRSTMERIT CORPORATION AND AFFILIATES	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 FIRSTMERIT CORPORATION	D Employer Identification Number (EIN) 34-1339938	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
SEI INVESTMENTS MANAGEMENT CORP	1 FREEDOM VALLEY DRIVE OAKS, PA 19456-9989

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation	
PIMCO	840 NEWPORT CENTER DRIVE NEWPORT BEACH, CA 92660

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
DODGE & COX	555 CALIFORNIA STREET, 40TH FLOOR SAN FRANCISCO, CA 94104

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
BLACKROCK FUND ADVISORS	400 HOWARD STREET SAN FRANCISCO, CA 94105

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

GABELLI FUNDS, LLC

ONE CORPORATE CENTER
RYE, NY 10580-1422

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

WARBURG DILON READ UBS SECURITIES

13-3873456

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

GOLDMAN SACHS & CO

200 WEST STREET, 29TH FLOOR
NEW YORK, NY 10282

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

MORGAN STANLEY & CO

26-4310632

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

GLOBAL BRIDGE INC

41-1966527

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

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

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

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

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

HEWITT ASSOCIATES LLC

36-2235791

(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?
10 11 17 27 34	NONE	72366	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PROFUND SYSTEMS, INC.

36-4120902

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 40	NONE	25610	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>		
A Name of plan <u>PENSION PLAN FOR EMPLOYEES OF FIRSTMERIT CORPORATION AND AFFILIATES</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>FIRSTMERIT CORPORATION</u>	D Employer Identification Number (EIN) <u>34-1339938</u>	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	<u>10000000</u>	<u>20000000</u>
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	<u>419521</u>	<u>350885</u>
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	<u>4860942</u>	<u>3249553</u>
(2) U.S. Government securities.....	1c(2)	<u>13043795</u>	<u>9973057</u>
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)	<u>7297087</u>	<u>7926332</u>
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	<u>24934874</u>	<u>40288122</u>
(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)	<u>50968630</u>	<u>61011575</u>
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	111524849	142799524

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	111524849	142799524
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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)	20000000	
(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)		20000000

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9934	
(B) U.S. Government securities	2b(1)(B)	448913	
(C) Corporate debt instruments	2b(1)(C)	406975	
(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)		865822

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	893735	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1784661	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2678396

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

(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	63955974	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	65066640	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-1110666

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)	8636228	
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		8636228
(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)		9399120
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		40468900

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	8928713	
(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)		8928713
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)	265512	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		265512
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		9194225

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		31274675
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: ERNST & YOUNG LLP

(2) EIN: 34-6565596

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)

5b(3) PN(s)

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2009 This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan PENSION PLAN FOR EMPLOYEES OF FIRSTMERIT CORPORATION AND AFFILIATES		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 FIRSTMERIT CORPORATION		D Employer Identification Number (EIN) 34-1339938
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): 23-3060382		
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.....		3 104
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: 68% Investment-Grade Debt: 32% High-Yield Debt: 0% Real Estate: 0% Other: 0%

- 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):

Report of Independent Auditors

The Board of Directors
FirstMerit Corporation

We have audited the accompanying statements of net assets available for benefits of the Pension Plan for Employees of FirstMerit Corporation and Affiliates as of December 31, 2009 and 2008, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with the auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. We were not engaged to perform an audit of the Plan's internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the Plan at December 31, 2009 and 2008, and the changes in its financial status for the years then ended, in conformity with accounting principles generally accepted in the United States.

Our audits were performed for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying supplemental schedule of assets (held at end of year) as of December 31, 2009, and reportable transactions for the year then ended, are presented for the purpose of additional analysis and are not a required part of the 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. These supplemental schedules are the responsibility of the Plan's management. The supplemental schedules have been subjected to the auditing procedures applied in our audits of the financial statements and, in our opinion, are fairly stated in all material respects in relation to the financial statements taken as a whole.

Ernst & Young LLP

September 28, 2010

AUDITED FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES

Pension Plan for Employees of
FirstMerit Corporation and Affiliates
Years Ended December 31, 2009 and 2008
With Report of Independent Auditors

Ernst & Young LLP



**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Audited Financial Statements and Supplemental Schedules

Years Ended December 31, 2009 and 2008

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Report of Independent Auditors

The Board of Directors
FirstMerit Corporation

We have audited the accompanying statements of net assets available for benefits of the Pension Plan for Employees of FirstMerit Corporation and Affiliates as of December 31, 2009 and 2008, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with the auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. We were not engaged to perform an audit of the Plan's internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the Plan at December 31, 2009 and 2008, and the changes in its financial status for the years then ended, in conformity with accounting principles generally accepted in the United States.

Our audits were performed for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying supplemental schedule of assets (held at end of year) as of December 31, 2009, and reportable transactions for the year then ended, are presented for the purpose of additional analysis and are not a required part of the 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. These supplemental schedules are the responsibility of the Plan's management. The supplemental schedules have been subjected to the auditing procedures applied in our audits of the financial statements and, in our opinion, are fairly stated in all material respects in relation to the financial statements taken as a whole.

Ernst & Young LLP

September 28, 2010

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Statements of Net Assets Available for Benefits

	December 31	
	2009	2008
Assets		
Cash and cash equivalents	\$ 3,249,553	\$ 4,860,942
Investment, at fair value:		
United States government securities	4,225,155	5,464,490
United States government agency issues	5,747,902	7,579,305
Corporate bonds	7,926,332	7,297,087
Common stocks	33,417,849	24,934,874
Equity and fixed income mutual funds	67,881,848	50,968,630
	<u>119,199,086</u>	<u>96,244,386</u>
Accrued interest and dividends receivable	350,885	419,521
Net assets available for benefits	<u><u>\$ 122,799,524</u></u>	<u><u>\$ 101,524,849</u></u>

See accompanying notes.

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Statements of Changes in Net Assets Available for Benefits

	December 31	
	2009	2008
Additions		
Investment income:		
Interest	\$ 1,092,010	\$ 1,109,219
Dividends	2,452,208	2,898,071
Net realized and unrealized appreciation (depreciation) in fair value of investments	<u>16,924,682</u>	<u>(36,076,538)</u>
	20,468,900	(32,069,248)
Employer cash contribution	<u>10,000,000</u>	-
Total additions	30,468,900	(32,069,248)
Deductions		
Benefits paid directly to participants	8,928,713	8,840,476
Administrative expenses	<u>265,512</u>	<u>273,014</u>
Total deductions	<u>9,194,225</u>	<u>9,113,490</u>
Net increase (decrease)	21,274,675	(41,182,738)
Net assets available for benefits:		
Beginning of the year	<u>101,524,849</u>	<u>142,707,587</u>
End of the year	<u><u>\$ 122,799,524</u></u>	<u><u>\$ 101,524,849</u></u>

See accompanying notes.

Pension Plan for Employees of FirstMerit Corporation and Affiliates

Notes to Financial Statements

December 31, 2009 and 2008

1. Description of the Plan

The following description of the Pension Plan for Employees of FirstMerit Corporation and Affiliates (the Plan) provides only general information. Participants should refer to the plan agreement and summary plan description for a more complete description of the Plan's provisions.

General

The Plan is a defined benefit pension plan sponsored by FirstMerit Corporation (the Sponsor). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 as amended (ERISA).

Effective January 1, 2007, the Sponsor closed the Plan to new participants. Fully vested participants in the Plan as of December 31, 2006 continue to be participants in the Plan. Any participant who was not fully vested in the Plan at December 31, 2006 became a participant in the FirstMerit Corporation and Affiliates Employees' Salary Savings Retirement Plan.

Eligibility and Vesting

Participants in the Plan are eligible for monthly benefits upon reaching age 65 with five years of service, upon age 55 with 15 years of service, or at age 65 if they reached five years of service when a disability occurs. Benefits became fully vested after a participant has completed five years of service.

Benefits

Employees who retire or otherwise terminate employment prior to attaining normal retirement age have benefits calculated using accrued credited years of service. If early retirement benefits are payable before normal retirement age, such benefits are reduced by 3% if 25 or more years of service and 3% for each year back to age 62 and 5% for each year before age 62 if fewer than 25 years of service.

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Notes to Financial Statements (continued)

1. Description of the Plan (continued)

Accumulated plan benefits are those future periodic payments, including lump sum distributions, are attributable under the Plan's provisions to the service employees have rendered to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired and terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. The accumulated plan benefits for active employees based upon their average compensation during the five years preceding 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.

Funding

The Corporation contributes such amounts as are necessary to the Plan sufficient to provide the Plan with assets with which to pay pension benefits to Plan participants. The contributions are designed to fund current service cost on a current basis and to fund over 30 years the established accrued benefit cost arising from qualifying service prior to establishment of the Plan. The minimum funding requirements under ERISA have been met for 2009 and 2008.

Plan Termination

Although it has not expressed an intention to do so, the Corporation reserves the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. Upon termination, the net assets of the Plan will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the plan document.

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

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Notes to Financial Statements (continued)

1. Description of the Plan (continued)

In the event the Plan should terminate, the assets of the Plan, after providing for any administrative expenses, shall be allocated for the purposes of paying benefits to the participants, beneficiaries, and eligible spouses in the following order of precedence:

- i. Provide retirement income for participants, beneficiaries, and eligible spouses who, three years prior to the Plan termination date, were either receiving pension benefits or would have been eligible to receive pension benefits had they then retired;
- ii. Provide all other pension benefits guaranteed under Title IV of ERISA;
- iii. Provide all other pension benefits not guaranteed by ERISA which vest in each participant in accordance with the provisions of the Plan, assuming that the Plan termination date is the participant's termination of employment date; and
- iv. Provide accrued benefits to participants as of the Plan termination date which are not then vested with the provisions of the Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles (GAAP).

Use of Estimates

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

Trustee

Under terms of the Plan, the FirstMerit Wealth Management Services, Private Client Services Division of FirstMerit Bank, N.A., a subsidiary of FirstMerit Corporation, acts as trustee for the Plan and, as such, manages a trust fund which includes all the Plan's assets.

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Cash and Cash Equivalents

Cash and cash equivalents include cash and a money market fund with maturities not in excess of three months from date of purchase.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value, as reported by the trustee. Fair value is defined as 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 (an exit price). See Note 5 for further discussion and disclosures related to fair value measurements. The Plan values securities traded on a national securities exchange at the last reported sales price on the last business day of the plan year. Securities traded in the over-the-counter market and listed securities for which no sale was reported on the last business day of the year are valued by the Plan at the last reported bid and ask price reported by a recognized pricing service. Mutual funds are valued at quoted prices reported on the active market in which the mutual funds are traded. Other investments are valued at fair value using readily available published quotations.

Investment transactions are recognized on the trade date, which is the date the order to buy and sell is executed. Interest income is recorded as earned on the accrual basis. Dividends are recorded on the ex-dividend date. In instances where stocks have been purchased at various times, an average cost is used to determine the realized gain or loss. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefit payments made to participants are recorded upon distribution.

Administrative Expenses

The Plan's expenses are paid by the Plan, as provided by the Plan's provisions. Administrative expenses paid by the Plan include recordkeeping and trustee fees. Expenses relating to purchases, sales or transfers of the Plan's investments are charged to the particular investment fund to which the expenses relate. All other administrative expenses of the Plan are paid by the Sponsor.

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Risk and Uncertainties

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

Plan contributions are made and 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.

New Accounting Pronouncements

FASB ASC Topic 820, Fair Value Measurements and Disclosures (ASC 820): In April 2009, an amendment to the accounting and reporting standards of fair value measurements and disclosures was issued. The amendment provides additional guidance for estimating fair value when the volume and level of activity for the asset or liability have significantly decreased. This amendment also provides guidance on identifying circumstances that indicate a transaction is not orderly. This additional guidance was effective for reporting periods ending after June 15, 2009. The adoption of this guidance did not have a material impact on the Plan's financial statements.

FASB ASC Topic 855, Subsequent Events (ASC 855): In May 2009, the FASB issued FASB Statement No. 165, *Subsequent Events*, which was codified into ASC 855, *Subsequent Events*, to provide general standards of accounting for and disclosure of events that occur after the balance sheet date, but before financial statements are issued or are available to be issued. ASC 855 was amended in February 2010. The Plan has adopted ASC 855, as amended.

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

FASB Accounting Standards Update 2009-12, Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent) (ASU 2009-12): In September 2009, ASU 2009-12 was issued and amended ASC 820 to allow entities to use net asset value (NAV) per share (or its equivalent), as a practical expedient, to measure fair value when the investment does not have a readily determinable fair value and the net asset value is calculated in a manner consistent with investment company accounting. The Plan adopted this guidance in ASU 2009-12 for the reporting period ended December 31, 2009. In addition, as a result of adopting ASU 2009-12, the Plan has provided additional disclosures regarding the nature and risks of investments within the scope of this guidance. Adoption of ASU 2009-12 did not have a material effect on the Plan's net assets available for benefits or its changes in net assets available for benefits.

FASB Accounting Standards Update 2010-06, Improving Disclosures about Fair Value Measurements (ASU 2010-06): In January 2010, the FASB issued new accounting guidance which will require new disclosures regarding certain aspects of an entity's fair value disclosures and clarifies existing fair value disclosure requirements. The new disclosures and clarifications are effective for interim and annual reporting periods beginning after December 31, 2009, except for disclosures regarding purchases, sales, issuances, and settlements in the rollforward of activity in Level 3 fair value measurements, which are effective for interim and annual periods beginning after December 15, 2010. Plan management is currently evaluating the effect that the provisions of ASU 2010-06 will have on the Plan's financial statements.

3. Accumulated Plan Benefits

An actuary estimated the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Notes to Financial Statements (continued)

3. Accumulated Plan Benefits (continued)

The actuarial present value of accumulated plan benefits as of January 1, 2009 is as follows:

Actuarial present value of accumulated plan benefits:	
Vested benefits:	
Participants currently receiving benefits	\$ 28,817,268
Other participants	69,930,853
	<u>98,748,121</u>
Nonvested benefits	5,359,490
Total actuarial present value of accumulated plan benefits	<u><u>\$ 104,107,611</u></u>

The change in the actuarial present value of accumulated plan benefits for the year ended January 1, 2009 is as follows:

Actuarial present value of accumulated plan benefits at beginning of year	\$ 100,803,515
Interest on prior liability	8,200,240
Net benefits accrued	5,689,399
Benefits paid	(8,840,475)
Assumption changes	(1,745,068)
Net increase	<u>3,304,096</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 104,107,611</u></u>

The calculation of the present value of accumulated plan benefits was prepared using the projected unit credit cost allocation method by consulting actuaries. Other significant assumptions used in the valuation are as follows

Assumed rate of return on investments	8.50%
Mortality assumption for healthy living	RP-2000 Combined Health Mortality Table Project to 2009
Weighted-average retirement age	Age 61 if the participant has more than 15 years of vesting service; otherwise age 65

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

3. Accumulated Plan Benefits (continued)

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

4. Investments

Plan investments, including gains and losses on investments bought and sold, as well as held during the year, appreciated (depreciated) in fair value as follows:

	December 31	
	2009	2008
United States government securities	\$ (140,805)	\$ 395,971
United States government agency issues	(321,836)	383,683
Corporate bonds	629,245	(330,553)
Common stocks	5,508,426	(16,196,544)
Equity mutual funds	10,345,393	(19,457,741)
Equity income mutual funds	904,259	(871,354)
	<u>\$ 16,924,682</u>	<u>\$ (36,076,538)</u>

The fair value of individual investments that represent 5% or more of the Plan's net assets available for benefits are as follows:

	December 31	
	2009	2008
Dodge & Cox International Stock Fund	\$ 11,709,161	\$ —
Ishares MSCI EAFE Index Fund	9,021,696	13,556,692
Ishares Midcap Index Fund	5,985,275	5,125,469
Ishares Russell 1000 Index Fund	15,539,633	12,943,708
Ishares Russell 2000 Index Fund	6,870,273	—
PIMCO Total Return Fund	17,727,303	19,342,761

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

5. Fair Value Measurement

Fair value is defined under ASC 820 as 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 (i.e., an exit price). To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy in ASC 820 are described below:

- Level 1 – Unadjusted quoted prices in active markets that are accessible to the reporting entity at the measurement date for identical assets and liabilities.
- Level 2 – Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability. Level 2 inputs include the following:
 - Quoted prices for similar assets and liabilities in active markets
 - Quoted prices for identical or similar assets or liabilities in markets that are not active
 - Observable inputs other than quoted prices that are used in the valuation of the asset or liabilities (e.g., interest rate and yield curve quotes at commonly quoted intervals)
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means
- Level 3 – Unobservable inputs for the asset or liability (i.e., supported by little or no market activity. Level 3 inputs include management's own assumption about the assumptions that market participants would use in pricing the asset or liability (including assumptions about risk).

The level in the fair value hierarchy within which the fair value measurement is classified is determined based the lowest level input that is significant to the fair value measure in its entirety

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

5. Fair Value Measurement (continued)

The following is a description of the valuation methodologies used for assets measured at fair value.

United States government securities: Valued using independent evaluated prices which are based on observable inputs, such as available trade information, spreads, bids and offers, and United States Treasury curves.

United States government agency issues: Valued using independent evaluated prices which are based on observable inputs, such as available trade information, spreads, bids and offers, and United States Treasury curves.

Corporate bonds: Valued based on yields currently available on comparable securities of issuers with similar credit rating.

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

Mutual funds: Valued at quoted prices as reported on the active market in which the mutual funds are traded.

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

**Pension Plan for Employees of
FirstMerit Corporation and Affiliates**

Notes to Financial Statements (continued)

5. Fair Value Measurement (continued)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2009:

	Level 1	Level 2	Level 3	Total
Money market funds	\$ 3,249,553	\$ –	\$ –	\$ 3,249,553
United States government securities	–	4,225,155	–	4,225,155
United States government agency issues	–	5,747,902	–	5,747,902
Corporate bonds	–	7,926,332	–	7,926,332
Common stocks	33,417,849	–	–	33,417,849
Equity and fixed income mutual funds	67,881,848	–	–	67,881,848
Total assets at fair value	<u>\$104,549,250</u>	<u>\$ 17,899,389</u>	<u>\$ –</u>	<u>\$ 122,448,639</u>

6. Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated November 6, 2009, stating that the written form of the underlying prototype plan document is qualified under Section 401(a) of the Internal Revenue Code (Code) and, therefore, the related trust is exempt from taxation. Subsequent to this determination by the IRS the Plan was amended. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code and therefore believes the Plan, as amended, is qualified and the related trust is tax-exempt.

7. Subsequent Events

Management evaluated subsequent events for the Plan through September 28, 2010, the date the financial statements were available to be issued. On September 13, 2010, the Corporation made a contribution to the Plan of \$20 million.

Pension Plan for Employees of
FirstMerit Corporation and Affiliates

Notes to Financial Statements (continued)

8. Related Party Transactions

Certain of the Plan's assets are invested in funds managed by the trustee of the Plan. These transactions qualify as party-in-interest transactions; however, they are exempt from the prohibited transactions rules under ERISA

9. Reconciliation of Financial Statements to the Draft Form 5500

The following is a reconciliation of net assets available for benefits per the accompanying financial statements to draft Form 5500:

	December 31	
	2009	2008
Net assets available for benefits per the accompanying financial statements	\$ 122,799,524	\$ 101,524,899
Add contributions receivable	<u>20,000,000</u>	<u>10,000,000</u>
Net assets available for benefits per the draft Form 5500	<u>\$ 142,799,524</u>	<u>\$ 111,524,849</u>

The following is a reconciliation of contributions per the accompanying financial statements to the draft Form 5500:

	December 31	
	2009	2008
Contributions per the accompanying financial statement	\$ 10,000,000	\$ —
Add employer contribution	<u>10,000,000</u>	<u>10,000,000</u>
Contributions to the Plan per the draft Form 5500	<u>\$ 20,000,000</u>	<u>\$ 10,000,000</u>

The employer contribution of \$20 million made September 13, 2010 is not included in the financial statements for the 2009 Plan year but is recorded in the 2009 Plan year for Form 5500 purposes.

The employer contribution of \$10 million made September 14, 2009 is not included in the financial statements for the 2008 Plan year but is recorded in the 2008 Plan year for Form 5500 purposes.

Supplemental Schedules

Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

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

Year Ended December 31, 2009

DECRICRIPTION	COST	FAIR VALUE
MONEY MARKET FUNDS		
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-00	1,997,057.77	1,997,057.77
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-02	664,156.18	664,156.18
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-03	328,096.59	328,096.59
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-04	165,382.56	165,382.56
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-07	91,312.98	91,312.98
TOTAL MONEY MARKET FUNDS	3,246,006.08	3,246,006.08
U.S. TREASURY OBLIGATIONS		
U.S. TREASURY NOTES 3.875% 9/15/10 CUSIP: 912828EG1 15241-00	998,180.00	1,024,260.00
U.S. TREASURY BONDS 4.250% 1/15/11 CUSIP: 912828ES5 15241-00	987,812.50	1,037,500.00
U.S. TREASURY NOTES 4.375% 8/15/12 CUSIP: 912828AJ9 15241-00	501,875.00	537,930.00
U.S. TREASURY NOTES 4.250% 11/15/13 CUSIP: 912828BR0 15241-00	489,140.62	540,155.00

Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

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

DECRICRIPTION	COST	FAIR VALUE
U.S. TREASURY NOTES 4.750% 5/15/14 CUSIP: 912828CJ7 15241-00	500,000.00	550,155.00
U.S. TREASURY NOTES 4.250% 8/15/15 CUSIP: 912828EE6 15241-00	504,100.00	535,155.00
TOTAL U.S. TREASURY OBLIGATIONS	<u>3,981,108.12</u>	<u>4,225,155.00</u>
U.S. GOVERNMENT AGENCIES		
FHLMC 5.000% 10/18/10 CUSIP: 3128X4QK0 15241-00	500,000.00	516,720.00
FHLMC 5.250% 7/18/11 CUSIP: 3137EAAF6 15241-00	751,815.00	798,982.50
FHLB 5.375% 8/19/11 CUSIP: 3133XGDD3 15241-00	504,488.50	533,750.00
FHLMC 2.000% 9/28/12 CUSIP: 3128X9GK0 15241-00	250,000.00	249,645.00
FNMA 2.050% 10/19/12 CUSIP: 31398AZK1 15241-00	250,000.00	249,452.50
FHLB 3.375% 2/27/13 CUSIP: 3133XP2W3 15241-00	490,000.00	520,470.00
FHLB 4.500% 9/16/13 CUSIP: 3133X1BV8 15241-00	499,687.50	539,845.00
FHLMC 4.875% 11/15/13 CUSIP: 3134A4UK8 15241-00	498,415.00	547,190.00

EIN #34-1339938 Plan #001

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

DECRICRIPTION		COST	FAIR VALUE
FNMA CUSIP: 31359MZC0 15241-00	4.375% 10/15/15	503,500.00	531,875.00
FFCB CUSIP: 31331YHQ6 15241-00	4.625% 12/15/17	761,250.00	770,160.00
FHLMC CUSIP: 3137EACA5 15241-00	3.750% 3/27/19	248,625.00	245,077.50
FHLB V-A CUSIP: 3133XWD48 15241-00	3.125% 12/28/21	250,000.00	244,734.10
		<u>5,507,781.00</u>	<u>5,747,901.60</u>
CORPORATE & FOREIGN BONDS			
WELLS FARGO BANK MTN CUSIP: 949748AF4 15241-00	6.450% 2/1/11	766,492.50	792,037.50
ELI LILLY & CO CUSIP: 532457AU2 15241-00	6.000% 3/15/12	263,250.00	273,057.50
CITIGROUP INC CUSIP: 172967BP5 15241-00	5.625% 8/27/12	517,135.00	514,285.00
CINCINNATI GAS & ELE CUSIP: 172070CN2 15241-00	5.700% 9/15/12	249,747.50	271,132.50
GE COMPANY CO CUSIP: 369604AY9 15241-00	5.000% 2/1/13	512,000.00	528,980.00
WYETH CUSIP: 983024AA8 15241-00	5.500% 3/15/13	1,013,700.00	1,087,290.00

EIN #34-1339938 Plan #001

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

DECRICRIPTION			COST	FAIR VALUE
VERIZON NEW ENGLAND CUSIP: 92344RAB8 15241-00	4.750%	10/1/13	249,400.00	260,015.00
GOLDMAN SACHS GROUP CUSIP: 38143UAB7 15241-00	5.150%	1/15/14	508,535.00	528,930.00
PROCTER & GAMBLE CO CUSIP: 742718DA4 15241-00	4.950%	8/15/14	492,750.00	543,995.00
SBC COMMUNICATIONS CUSIP: 78387GAP8 15241-00	5.100%	9/15/14	503,600.00	537,830.00
DOMINION RESOURCES CUSIP: 25746UAW9 15241-00	5.150%	7/15/15	236,625.00	264,592.50
MERRILL LYNCH & CO CUSIP: 59018YRZ6 15241-00	5.300%	9/30/15	451,669.50	458,221.50
PSEG POWER CUSIP: 69362BAN2 15241-00	5.500%	12/1/15	501,650.00	531,150.00
CATERPILLAR INC CUSIP: 149123BM2 15241-00	5.700%	8/15/16	500,850.00	540,905.00
HEWLETT-PACKARD CO CUSIP: 428236AM5 15241-00	5.400%	3/1/17	506,450.00	533,180.00
NATL RURAL UTILS CUSIP: 637432HT5 15241-00	5.450%	4/10/17	252,230.00	260,730.00
TOTAL CORPORATE & FOREIGN BONDS			<u>7,526,084.50</u>	<u>7,926,331.50</u>

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

DECRICRIPTION	COST	FAIR VALUE
COMMON EQUITY SECURITIES		
MATERIALS		
BEMIS INC	297,048.63	327,217.40
CUSIP: 081437105		
15241-03		
DOW CHEMICAL COMPANY	395,864.27	463,962.96
CUSIP: 260543103		
15241-02		
DU PONT E I DE NEMOURS & CO	425,811.81	423,703.28
CUSIP: 263534109		
15241-03		
FREEPORTMCMORAN COPPERAND GOLD INC	159,405.06	332,561.18
CUSIP: 35671D857		
15241-02		
PACKAGING CORP OF AMERICA	131,531.44	137,714.85
CUSIP: 695156109		
15241-03		
PRAXAIR INC	180,596.79	190,655.94
CUSIP: 74005P104		
15241-02		
TOTAL MATERIALS	1,590,258.00	1,875,815.61
CONSUMER DISCRETIONARY		
CARTERS INC	173,251.57	211,522.50
CUSIP: 146229109		
15241-04		
CBS CORPORATION CLASS B W/I	322,655.18	275,492.40
CUSIP: 124857202		
15241-03		
DIRECTV-CL A	387,631.21	415,207.50
CUSIP: 25490A101		
15241-02		
DISNEY WALT CO NEW	303,453.20	378,195.75
CUSIP: 254687106		
15241-02		

EIN #34-1339938 Plan #001

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

DECRICRIPTION	COST	FAIR VALUE
GENUINE PARTS CO CUSIP: 372460105 15241-03	207,298.43	212,234.36
HEXCEL CORP CUSIP: 428291108 15241-04	122,123.93	196,231.64
HOST HOTELS & RESORTS, INC CUSIP: 44107P104 15241-04	121,962.92	199,335.27
KOHL'S CORP CUSIP: 500255104 15241-02	202,711.57	227,638.53
MATTEL INC CUSIP: 577081102 15241-03	190,103.13	203,416.38
MCDONALDS CORP CUSIP: 580135101 15241-03	178,125.79	183,261.40
ROSS STORES INC CUSIP: 778296103 15241-04	152,814.54	176,349.59
THOMSON CORP CUSIP: 884903105 15241-03	184,052.77	180,374.25
WHIRLPOOL CORP CUSIP: 963320106 15241-03	109,551.42	145,107.34
TOTAL CONSUMER DISCRETIONARY	2,655,735.66	3,004,366.91

EIN #34-1339938 Plan #001

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

DECRIPTION	COST	FAIR VALUE
CONSUMER STAPLES		
CHARLES RIV LABORATORIES INTL INC CUSIP: 159864107 15241-04	111,349.29	126,809.16
CLOROX CO CUSIP: 189054109 15241-03	211,882.83	229,970.00
COCA COLA CO CUSIP: 191216100 15241-03	301,033.34	328,548.00
KIMBERLY CLARK CORP CUSIP: 494368103 15241-03	261,310.15	256,496.46
KROGER CO CUSIP: 501044101 15241-04	135,138.69	130,919.81
PHILIP MORRIS INTERNATIONAL CUSIP: 718172109 15241-02	231,753.63	242,684.84
SUPERVALU INC CUSIP: 868536103 15241-03	422,105.79	290,957.32
TOTAL CONSUMER STAPLES	1,674,573.72	1,606,385.59
HEALTH CARE		
ABBOTT LABS CUSIP: 002824100 15241-03	195,334.08	233,668.72
BAXTER INTL INC CUSIP: 071813109 15241-02	162,282.49	164,480.04
BRISTOL MYERS SQUIBB CO CUSIP: 110122108 15241-03	406,143.06	404,303.00

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

DECRIPTION	COST	FAIR VALUE
CARDINAL HEALTH INC CUSIP: 14149Y108 15241-03	240,031.96	272,524.72
CELGENE CORP CUSIP: 151020104 15241-02	128,099.89	155,681.28
EDWARDS LIFESCIENCES CORP CUSIP: 28176E108 15241-04	126,023.67	173,005.20
EXPRESS SCRIPTS INC CL A CUSIP: 302182100 15241-02	387,063.89	521,026.18
GILEAD SCIENCES INC CUSIP: 375558103 15241-02	273,891.41	246,898.62
JOHNSON & JOHNSON CUSIP: 478160104 15241-03	230,455.42	241,923.96
MEDCO HEALTH SOLUTIONS INC CUSIP: 58405U102 15241-02	266,471.89	442,001.56
MERCK & CO INC CUSIP: 58933Y105 15241-02	324,278.80	509,586.84
OMNICARE INC CUSIP: 681904108 15241-04	147,425.92	145,684.50
PFIZER INC CUSIP: 717081103 15241-02	162,672.09	161,108.83
PFIZER INC CUSIP: 717081103 15241-03	126,528.36	131,404.56

EIN #34-1339938 Plan #001

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

DECRICRIPTION	COST	FAIR VALUE
PHARMACEUTICAL PROD DEV INC CUSIP: 717124101 15241-03	225,143.57	251,276.80
VALEANT PHARMACEUTICALS INTL CUSIP: 91911X104 15241-04	150,253.95	244,846.58
TOTAL HEALTH CARE	3,552,100.45	4,299,421.39
ENERGY		
CENOVUS ENERGY INC CUSIP: 15135U109 15241-03	165,295.13	160,876.80
CHEVRON CORPORATION CUSIP: 166764100 15241-03	307,915.01	306,343.21
CONOCOPHILLIPS CUSIP: 20825C104 15241-03	334,982.60	258,975.97
KEY ENERGY GROUP INC CUSIP: 492914106 15241-04	79,556.07	137,510.76
KINDER MORGAN MANAGEMENT LLC CUSIP: 49455U100 15241-04	138,519.35	188,945.12
OCCIDENTAL PETE CORP CUSIP: 674599105 15241-02	420,674.98	539,269.15
OCCIDENTAL PETE CORP CUSIP: 674599105 15241-03	178,104.68	255,357.65
PIONEER NATURAL RESOURCES CO CUSIP: 723787107 15241-04	80,975.40	183,913.06

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

DECRICRIPTION	COST	FAIR VALUE
ROYAL DUTCH - ADR CUSIP: 780259107 15241-03	144,600.09	120,387.23
TRANSOCEAN LTD CUSIP: H8817H100 15241-02	553,180.90	593,427.60
VALERO ENERGY CORP CUSIP: 91913Y100 15241-03	248,557.81	246,727.50
WEATHERFORD INTNTL LTD CUSIP: H27013103 15241-04	128,389.66	142,796.43
TOTAL ENERGY	2,780,751.68	3,134,530.48
FINANCIALS		
BANK AMERICA CORP CUSIP: 060505104 15241-02	294,069.80	306,681.84
BOK FINANCIAL CORPORATION CUSIP: 05561Q201 15241-03	94,226.20	123,789.60
CAPITAL ONE FINL CORP CUSIP: 14040H105 15241-02	143,092.61	315,154.80
COVANTA HOLDING CORP CUSIP: 22282E102 15241-04	174,877.03	193,707.72
CULLEN FROST BANKERS INC CUSIP: 229899109 15241-03	192,334.28	199,700.00
EURONET WORLDWIDE INC CUSIP: 298736109 15241-04	139,892.05	195,179.40

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

DECRIPTION	COST	FAIR VALUE
GOLDMAN SACHS GROUP INC CUSIP: 38141G104 15241-02	417,646.84	609,681.24
HCC INS HLDGS INC CUSIP: 404132102 15241-04	184,343.96	210,921.77
JP MORGAN CHASE & CO CUSIP: 46625H100 15241-02	409,831.92	654,219.00
MARSH & MCLENNAN COS INC CUSIP: 571748102 15241-03	365,046.72	314,330.88
MERCURY GEN CORP NEW CUSIP: 589400100 15241-03	457,984.85	393,895.58
NYSE EURONEXT INC CUSIP: 629491101 15241-03	255,463.08	253,784.30
PARTNERRE LTD BERMUDA CUSIP: G6852T105 15241-04	203,764.27	234,880.36
PNC FINANCIAL SERVICES GROUP CUSIP: 693475105 15241-03	331,442.80	327,720.32
SEI INVESTMENTS COMPANY CUSIP: 784117103 15241-04	148,796.44	176,408.88
TORONTO DOMINION BANK CUSIP: 891160509 15241-03	123,764.76	126,192.64
US BANCORP NEW CUSIP: 902973304 15241-03	503,239.08	474,600.84

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

DECRIPTION	COST	FAIR VALUE
WADDELL & REED FINL INC CUSIP: 930059100 15241-04	143,602.10	234,486.12
WELLS FARGO & CO CUSIP: 949746101 15241-03	146,618.57	128,445.41
TOTAL FINANCIALS	<u>4,730,037.36</u>	<u>5,473,780.70</u>
INDUSTRIALS		
AVERY DENNISON CORP CUSIP: 053611109 15241-03	101,293.74	134,429.16
BRINKS CO CUSIP: 109696104 15241-04	165,099.12	149,764.02
BRINKS HOME SECURITY HOLDINGS INC CUSIP: 109699108 15241-04	53,287.48	67,173.12
CATERPILLAR INC CUSIP: 149123101 15241-03	215,478.06	338,976.52
CHART INDUSTRIES INC CUSIP: 16115Q308 15241-04	67,657.21	86,036.16
EMERSON ELEC CO CUSIP: 291011104 15241-03	257,208.60	254,364.60
ENCANA CORP CUSIP: 292505104 15241-03	179,137.90	206,777.76
FEDEX CORPORATION CUSIP: 31428X106 15241-02	165,194.82	149,876.20

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

DECRICTION	COST	FAIR VALUE
GENERAL CABLE CORP DEL CUSIP: 369300108 15241-04	102,508.77	115,914.80
GENERAL DYNAMICS CORP CUSIP: 369550108 15241-02	415,765.62	414,200.92
GENERAL ELECTRIC CORP CUSIP: 369604103 15241-03	528,813.06	351,636.33
GLOBAL PMTS INC CUSIP: 37940X102 15241-04	135,990.72	210,269.44
IDEX CORP CUSIP: 45167R104 15241-04	85,269.19	118,961.85
JACOBS ENGR GROUP INC CUSIP: 469814107 15241-04	103,880.44	92,558.21
PRECISION CASTPARTS CORP CUSIP: 740189105 15241-02	360,884.97	365,148.15
ROPER INDS INC NEW CUSIP: 776696106 15241-04	106,126.86	120,503.37
TELEFLEX INC CUSIP: 879369106 15241-03	198,424.56	240,618.85
UNION PAC CORP CUSIP: 907818108 15241-02	390,652.46	499,250.70
UNITED TECHNOLOGIES CORP CUSIP: 913017109 15241-02	392,363.77	491,353.39

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

DECRIPTION	COST	FAIR VALUE
VALE S.A. ADR CUSIP: 91912E105 15241-02	77,999.72	173,802.61
WABTEC CORP CUSIP: 929740108 15241-04	123,991.78	170,507.00
WESTERN UNION-WI CUSIP: 959802109 15241-04	145,147.22	139,942.40
3M CO CUSIP: 88579Y101 15241-02	416,503.80	446,418.00
TOTAL INDUSTRIALS	4,788,679.87	5,338,483.56
INFORMATION TECHNOLOGY		
ADOBE SYS INC CUSIP: 00724F101 15241-02	153,732.29	161,795.22
AMERICAN TOWER CORP CUSIP: 029912201 15241-02	162,956.37	182,864.72
ANALOG DEVICES INC CUSIP: 032654105 15241-03	364,390.74	408,929.42
APPLE INC CUSIP: 037833100 15241-02	513,944.04	927,220.80
AUTOMATIC DATA PROCESSING INC CUSIP: 053015103 15241-03	157,201.37	156,592.74
CISCO SYSTEMS INC CUSIP: 17275R102 15241-02	561,329.58	697,827.06

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

DECRIPTION	COST	FAIR VALUE
GOOGLE INC - CL A CUSIP: 38259P508 15241-02	681,955.69	1,027,926.84
HEWLETT PACKARD CO CUSIP: 428236103 15241-02	666,765.88	810,458.34
INTEL CORP CUSIP: 458140100 15241-03	429,238.17	403,512.00
INTERNATIONAL BUSINESS MACHINES CORP CUSIP: 459200101 15241-02	561,603.01	762,492.50
MICROSOFT CORP CUSIP: 594918104 15241-02	342,432.18	576,011.04
MICROSOFT CORP CUSIP: 594918104 15241-03	195,120.40	303,458.88
NOKIA CORP SPNSD ADR CUSIP: 654902204 15241-03	451,817.71	234,962.25
ORACLE CORPORATION CUSIP: 68389X105 15241-02	330,398.17	360,223.05
TYCO ELECTRONICS LTD CUSIP: H8912P106 15241-03	127,320.37	130,606.00
VISA INC CUSIP: 92826C839 15241-02	283,326.03	351,064.44
TOTAL INFORMATION TECHNOLOGY	5,983,532.00	7,495,945.30

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

DECRICRIPTION	COST	FAIR VALUE
TELECOMMUNICATIONS SERVICES		
NEUSTAR INC-CL A CUSIP: 64126X201 15241-04	180,032.71	218,119.68
VERIZON COMMUNICATIONS CUSIP: 92343V104 15241-03	299,282.61	280,047.89
TOTAL TELECOMMUNICATIONS SERVICES	479,315.32	498,167.57
UTILITIES		
SOUTHERN UNION CO CUSIP: 844030106 15241-04	200,379.21	282,319.90
SPECTRA ENERGY CORP WI CUSIP: 847560109 15241-03	320,531.40	343,993.72
TOTAL UTILITIES	520,910.61	626,313.62
OTHER ASSETS		
BRANDYWINE REALTY TRUST REIT CUSIP: 105368203 15241-04	32,477.03	64,638.00
TOTAL OTHER ASSETS	32,477.03	64,638.00
TOTAL COMMON EQUITY SECURITIES	28,788,371.70	33,417,848.73
EQUITY MUTUAL FUNDS		
ISHARES RUSSELL 2000 INDEX FUND CUSIP: 464287655 15241-07	5,019,741.80	6,870,273.20
DODGE & COX INTERNATIONAL STOCK FD CUSIP: 256206103 15241-00	9,658,084.50	11,709,161.40
GABELLI SMALL CAP GROWTH I CUSIP: 36239T830 15241-00	1,000,823.29	1,028,506.47

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

DECRICRIPTION	COST	FAIR VALUE
ISHARES RUSSELL MIDCAP INDEX FUND CUSIP: 464287465 15241-00	11,743,251.02	9,021,696.00
ISHARES RUSSELL MIDCAP INDEX FUND CUSIP: 464287499 15241-00	5,914,932.85	5,985,275.40
ISHARES RUSSELL 1000 INDEX FUND CUSIP: 464287622 15241-00	15,916,996.74	15,539,632.60
TOTAL EQUITY MUTUAL FUNDS	<u>49,253,830.20</u>	<u>50,154,545.07</u>
FIXED INCOME MUTUAL FUNDS		
PIMCO TOTAL RETURN FUND-INST CUSIP: 693390700 15241-00	17,542,640.32	17,727,303.41
TOTAL FIXED INCOME MUTUAL FUNDS	<u>17,542,640.32</u>	<u>17,727,303.41</u>
CASH		
CASH 15241-00	1,376.60	1,376.60
CASH 15241-03	2,170.56	2,170.56
TOTAL CASH	<u>3,547.16</u>	<u>3,547.16</u>
TOTAL ASSETS	<u>115,849,369.08</u>	<u>122,448,638.55</u>

Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2009

Identity of Party Involved	Date Bought/Sold	Description of Asset	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Category 1 – Single transaction exceeds 5% of value							
**	6/19/2009	Dodge & Cox International	\$ 7,000,000	\$ –	\$ 7,000,000	\$ 7,000,000	\$ –
**	9/15/2009	Federated Government	10,000,000	–	10,000,000	10,000,000	–
Category 2 – Series of transactions with same broker exceeds 5% of value							
Morgan		Ishares MSCI EAFE Index	\$ –	\$ 6,919,322	\$ 11,090,865	\$ 6,919,322	\$ (4,171,543)

There were no category 3 or 4 reportable transactions during 2009

**Transactions made on market

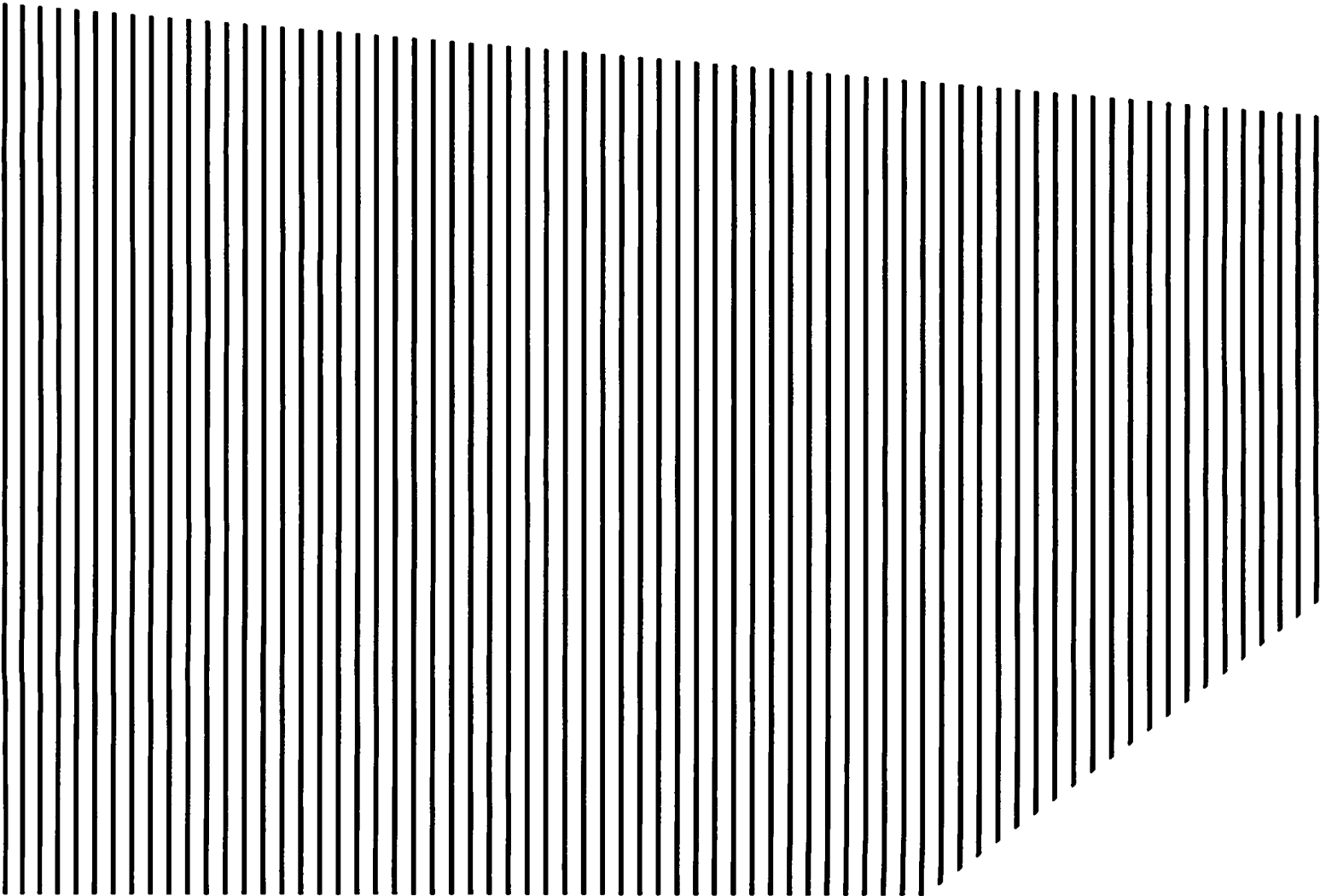
Ernst & Young LLP

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Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

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

Year Ended December 31, 2009

DECRICRIPTION	COST	FAIR VALUE
MONEY MARKET FUNDS		
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-00	1,997,057.77	1,997,057.77
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-02	664,156.18	664,156.18
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-03	328,096.59	328,096.59
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-04	165,382.56	165,382.56
FEDERATED GOVT OBLIG TAX MGD FD #636 CUSIP: 60934N856 15241-07	91,312.98	91,312.98
TOTAL MONEY MARKET FUNDS	3,246,006.08	3,246,006.08
U.S. TREASURY OBLIGATIONS		
U.S. TREASURY NOTES 3.875% 9/15/10 CUSIP: 912828EG1 15241-00	998,180.00	1,024,260.00
U.S. TREASURY BONDS 4.250% 1/15/11 CUSIP: 912828ES5 15241-00	987,812.50	1,037,500.00
U.S. TREASURY NOTES 4.375% 8/15/12 CUSIP: 912828AJ9 15241-00	501,875.00	537,930.00
U.S. TREASURY NOTES 4.250% 11/15/13 CUSIP: 912828BR0 15241-00	489,140.62	540,155.00

Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

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

DECRICRIPTION	COST	FAIR VALUE
U.S. TREASURY NOTES 4.750% 5/15/14 CUSIP: 912828CJ7 15241-00	500,000.00	550,155.00
U.S. TREASURY NOTES 4.250% 8/15/15 CUSIP: 912828EE6 15241-00	504,100.00	535,155.00
TOTAL U.S. TREASURY OBLIGATIONS	3,981,108.12	4,225,155.00
U.S. GOVERNMENT AGENCIES		
FHLMC 5.000% 10/18/10 CUSIP: 3128X4QK0 15241-00	500,000.00	516,720.00
FHLMC 5.250% 7/18/11 CUSIP: 3137EAAF6 15241-00	751,815.00	798,982.50
FHLB 5.375% 8/19/11 CUSIP: 3133XGDD3 15241-00	504,488.50	533,750.00
FHLMC 2.000% 9/28/12 CUSIP: 3128X9GK0 15241-00	250,000.00	249,645.00
FNMA 2.050% 10/19/12 CUSIP: 31398AZK1 15241-00	250,000.00	249,452.50
FHLB 3.375% 2/27/13 CUSIP: 3133XP2W3 15241-00	490,000.00	520,470.00
FHLB 4.500% 9/16/13 CUSIP: 3133X1BV8 15241-00	499,687.50	539,845.00
FHLMC 4.875% 11/15/13 CUSIP: 3134A4UK8 15241-00	498,415.00	547,190.00

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

DECRICRIPTION		COST	FAIR VALUE
FNMA CUSIP: 31359MZC0 15241-00	4.375% 10/15/15	503,500.00	531,875.00
FFCB CUSIP: 31331YHQ6 15241-00	4.625% 12/15/17	761,250.00	770,160.00
FHLMC CUSIP: 3137EACA5 15241-00	3.750% 3/27/19	248,625.00	245,077.50
FHLB V-A CUSIP: 3133XWD48 15241-00	3.125% 12/28/21	250,000.00	244,734.10
		<u>5,507,781.00</u>	<u>5,747,901.60</u>
CORPORATE & FOREIGN BONDS			
WELLS FARGO BANK MTN CUSIP: 949748AF4 15241-00	6.450% 2/1/11	766,492.50	792,037.50
ELI LILLY & CO CUSIP: 532457AU2 15241-00	6.000% 3/15/12	263,250.00	273,057.50
CITIGROUP INC CUSIP: 172967BP5 15241-00	5.625% 8/27/12	517,135.00	514,285.00
CINCINNATI GAS & ELE CUSIP: 172070CN2 15241-00	5.700% 9/15/12	249,747.50	271,132.50
GE COMPANY CO CUSIP: 369604AY9 15241-00	5.000% 2/1/13	512,000.00	528,980.00
WYETH CUSIP: 983024AA8 15241-00	5.500% 3/15/13	1,013,700.00	1,087,290.00

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

DECRIPTION			COST	FAIR VALUE
VERIZON NEW ENGLAND CUSIP: 92344RAB8 15241-00	4.750%	10/1/13	249,400.00	260,015.00
GOLDMAN SACHS GROUP CUSIP: 38143UAB7 15241-00	5.150%	1/15/14	508,535.00	528,930.00
PROCTER & GAMBLE CO CUSIP: 742718DA4 15241-00	4.950%	8/15/14	492,750.00	543,995.00
SBC COMMUNICATIONS CUSIP: 78387GAP8 15241-00	5.100%	9/15/14	503,600.00	537,830.00
DOMINION RESOURCES CUSIP: 25746UAW9 15241-00	5.150%	7/15/15	236,625.00	264,592.50
MERRILL LYNCH & CO CUSIP: 59018YRZ6 15241-00	5.300%	9/30/15	451,669.50	458,221.50
PSEG POWER CUSIP: 69362BAN2 15241-00	5.500%	12/1/15	501,650.00	531,150.00
CATERPILLAR INC CUSIP: 149123BM2 15241-00	5.700%	8/15/16	500,850.00	540,905.00
HEWLETT-PACKARD CO CUSIP: 428236AM5 15241-00	5.400%	3/1/17	506,450.00	533,180.00
NATL RURAL UTILS CUSIP: 637432HT5 15241-00	5.450%	4/10/17	252,230.00	260,730.00
TOTAL CORPORATE & FOREIGN BONDS			<u>7,526,084.50</u>	<u>7,926,331.50</u>

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

DECRIPTION	COST	FAIR VALUE
COMMON EQUITY SECURITIES		
MATERIALS		
BEMIS INC	297,048.63	327,217.40
CUSIP: 081437105		
15241-03		
DOW CHEMICAL COMPANY	395,864.27	463,962.96
CUSIP: 260543103		
15241-02		
DU PONT E I DE NEMOURS & CO	425,811.81	423,703.28
CUSIP: 263534109		
15241-03		
FREEPORTMCMORAN COPPERAND GOLD INC	159,405.06	332,561.18
CUSIP: 35671D857		
15241-02		
PACKAGING CORP OF AMERICA	131,531.44	137,714.85
CUSIP: 695156109		
15241-03		
PRAXAIR INC	180,596.79	190,655.94
CUSIP: 74005P104		
15241-02		
TOTAL MATERIALS	<u>1,590,258.00</u>	<u>1,875,815.61</u>
CONSUMER DISCRETIONARY		
CARTERS INC	173,251.57	211,522.50
CUSIP: 146229109		
15241-04		
CBS CORPORATION CLASS B W/I	322,655.18	275,492.40
CUSIP: 124857202		
15241-03		
DIRECTV-CL A	387,631.21	415,207.50
CUSIP: 25490A101		
15241-02		
DISNEY WALT CO NEW	303,453.20	378,195.75
CUSIP: 254687106		
15241-02		

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

DECRICRIPTION	COST	FAIR VALUE
GENUINE PARTS CO CUSIP: 372460105 15241-03	207,298.43	212,234.36
HEXCEL CORP CUSIP: 428291108 15241-04	122,123.93	196,231.64
HOST HOTELS & RESORTS, INC CUSIP: 44107P104 15241-04	121,962.92	199,335.27
KOHL'S CORP CUSIP: 500255104 15241-02	202,711.57	227,638.53
MATTEL INC CUSIP: 577081102 15241-03	190,103.13	203,416.38
MCDONALDS CORP CUSIP: 580135101 15241-03	178,125.79	183,261.40
ROSS STORES INC CUSIP: 778296103 15241-04	152,814.54	176,349.59
THOMSON CORP CUSIP: 884903105 15241-03	184,052.77	180,374.25
WHIRLPOOL CORP CUSIP: 963320106 15241-03	109,551.42	145,107.34
TOTAL CONSUMER DISCRETIONARY	2,655,735.66	3,004,366.91

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

DECRIPTION	COST	FAIR VALUE
CONSUMER STAPLES		
CHARLES RIV LABORATORIES INTL INC CUSIP: 159864107 15241-04	111,349.29	126,809.16
CLOROX CO CUSIP: 189054109 15241-03	211,882.83	229,970.00
COCA COLA CO CUSIP: 191216100 15241-03	301,033.34	328,548.00
KIMBERLY CLARK CORP CUSIP: 494368103 15241-03	261,310.15	256,496.46
KROGER CO CUSIP: 501044101 15241-04	135,138.69	130,919.81
PHILIP MORRIS INTERNATIONAL CUSIP: 718172109 15241-02	231,753.63	242,684.84
SUPERVALU INC CUSIP: 868536103 15241-03	422,105.79	290,957.32
TOTAL CONSUMER STAPLES	1,674,573.72	1,606,385.59
HEALTH CARE		
ABBOTT LABS CUSIP: 002824100 15241-03	195,334.08	233,668.72
BAXTER INTL INC CUSIP: 071813109 15241-02	162,282.49	164,480.04
BRISTOL MYERS SQUIBB CO CUSIP: 110122108 15241-03	406,143.06	404,303.00

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

DECRICTION	COST	FAIR VALUE
CARDINAL HEALTH INC CUSIP: 14149Y108 15241-03	240,031.96	272,524.72
CELGENE CORP CUSIP: 151020104 15241-02	128,099.89	155,681.28
EDWARDS LIFESCIENCES CORP CUSIP: 28176E108 15241-04	126,023.67	173,005.20
EXPRESS SCRIPTS INC CL A CUSIP: 302182100 15241-02	387,063.89	521,026.18
GILEAD SCIENCES INC CUSIP: 375558103 15241-02	273,891.41	246,898.62
JOHNSON & JOHNSON CUSIP: 478160104 15241-03	230,455.42	241,923.96
MEDCO HEALTH SOLUTIONS INC CUSIP: 58405U102 15241-02	266,471.89	442,001.56
MERCK & CO INC CUSIP: 58933Y105 15241-02	324,278.80	509,586.84
OMNICARE INC CUSIP: 681904108 15241-04	147,425.92	145,684.50
PFIZER INC CUSIP: 717081103 15241-02	162,672.09	161,108.83
PFIZER INC CUSIP: 717081103 15241-03	126,528.36	131,404.56

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

DECRICRIPTION	COST	FAIR VALUE
PHARMACEUTICAL PROD DEV INC CUSIP: 717124101 15241-03	225,143.57	251,276.80
VALEANT PHARMACEUTICALS INTL CUSIP: 91911X104 15241-04	150,253.95	244,846.58
TOTAL HEALTH CARE	3,552,100.45	4,299,421.39
ENERGY		
CENOVUS ENERGY INC CUSIP: 15135U109 15241-03	165,295.13	160,876.80
CHEVRON CORPORATION CUSIP: 166764100 15241-03	307,915.01	306,343.21
CONOCOPHILLIPS CUSIP: 20825C104 15241-03	334,982.60	258,975.97
KEY ENERGY GROUP INC CUSIP: 492914106 15241-04	79,556.07	137,510.76
KINDER MORGAN MANAGEMENT LLC CUSIP: 49455U100 15241-04	138,519.35	188,945.12
OCCIDENTAL PETE CORP CUSIP: 674599105 15241-02	420,674.98	539,269.15
OCCIDENTAL PETE CORP CUSIP: 674599105 15241-03	178,104.68	255,357.65
PIONEER NATURAL RESOURCES CO CUSIP: 723787107 15241-04	80,975.40	183,913.06

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

DECRICPTION	COST	FAIR VALUE
ROYAL DUTCH - ADR CUSIP: 780259107 15241-03	144,600.09	120,387.23
TRANSOCEAN LTD CUSIP: H8817H100 15241-02	553,180.90	593,427.60
VALERO ENERGY CORP CUSIP: 91913Y100 15241-03	248,557.81	246,727.50
WEATHERFORD INTNTL LTD CUSIP: H27013103 15241-04	128,389.66	142,796.43
TOTAL ENERGY	2,780,751.68	3,134,530.48
FINANCIALS		
BANK AMERICA CORP CUSIP: 060505104 15241-02	294,069.80	306,681.84
BOK FINANCIAL CORPORATION CUSIP: 05561Q201 15241-03	94,226.20	123,789.60
CAPITAL ONE FINL CORP CUSIP: 14040H105 15241-02	143,092.61	315,154.80
COVANTA HOLDING CORP CUSIP: 22282E102 15241-04	174,877.03	193,707.72
CULLEN FROST BANKERS INC CUSIP: 229899109 15241-03	192,334.28	199,700.00
EURONET WORLDWIDE INC CUSIP: 298736109 15241-04	139,892.05	195,179.40

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

DECRIPTION	COST	FAIR VALUE
GOLDMAN SACHS GROUP INC CUSIP: 38141G104 15241-02	417,646.84	609,681.24
HCC INS HLDGS INC CUSIP: 404132102 15241-04	184,343.96	210,921.77
JP MORGAN CHASE & CO CUSIP: 46625H100 15241-02	409,831.92	654,219.00
MARSH & MCLENNAN COS INC CUSIP: 571748102 15241-03	365,046.72	314,330.88
MERCURY GEN CORP NEW CUSIP: 589400100 15241-03	457,984.85	393,895.58
NYSE EURONEXT INC CUSIP: 629491101 15241-03	255,463.08	253,784.30
PARTNERRE LTD BERMUDA CUSIP: G6852T105 15241-04	203,764.27	234,880.36
PNC FINANCIAL SERVICES GROUP CUSIP: 693475105 15241-03	331,442.80	327,720.32
SEI INVESTMENTS COMPANY CUSIP: 784117103 15241-04	148,796.44	176,408.88
TORONTO DOMINION BANK CUSIP: 891160509 15241-03	123,764.76	126,192.64
US BANCORP NEW CUSIP: 902973304 15241-03	503,239.08	474,600.84

EIN #34-1339938 Plan #001

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

DECRIPTION	COST	FAIR VALUE
WADDELL & REED FINL INC CUSIP: 930059100 15241-04	143,602.10	234,486.12
WELLS FARGO & CO CUSIP: 949746101 15241-03	146,618.57	128,445.41
TOTAL FINANCIALS	<u>4,730,037.36</u>	<u>5,473,780.70</u>
INDUSTRIALS		
AVERY DENNISON CORP CUSIP: 053611109 15241-03	101,293.74	134,429.16
BRINKS CO CUSIP: 109696104 15241-04	165,099.12	149,764.02
BRINKS HOME SECURITY HOLDINGS INC CUSIP: 109699108 15241-04	53,287.48	67,173.12
CATERPILLAR INC CUSIP: 149123101 15241-03	215,478.06	338,976.52
CHART INDUSTRIES INC CUSIP: 16115Q308 15241-04	67,657.21	86,036.16
EMERSON ELEC CO CUSIP: 291011104 15241-03	257,208.60	254,364.60
ENCANA CORP CUSIP: 292505104 15241-03	179,137.90	206,777.76
FEDEX CORPORATION CUSIP: 31428X106 15241-02	165,194.82	149,876.20

EIN #34-1339938 Plan #001

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

DECRIPTION	COST	FAIR VALUE
GENERAL CABLE CORP DEL CUSIP: 369300108 15241-04	102,508.77	115,914.80
GENERAL DYNAMICS CORP CUSIP: 369550108 15241-02	415,765.62	414,200.92
GENERAL ELECTRIC CORP CUSIP: 369604103 15241-03	528,813.06	351,636.33
GLOBAL PMTS INC CUSIP: 37940X102 15241-04	135,990.72	210,269.44
IDEX CORP CUSIP: 45167R104 15241-04	85,269.19	118,961.85
JACOBS ENGR GROUP INC CUSIP: 469814107 15241-04	103,880.44	92,558.21
PRECISION CASTPARTS CORP CUSIP: 740189105 15241-02	360,884.97	365,148.15
ROPER INDS INC NEW CUSIP: 776696106 15241-04	106,126.86	120,503.37
TELEFLEX INC CUSIP: 879369106 15241-03	198,424.56	240,618.85
UNION PAC CORP CUSIP: 907818108 15241-02	390,652.46	499,250.70
UNITED TECHNOLOGIES CORP CUSIP: 913017109 15241-02	392,363.77	491,353.39

EIN #34-1339938 Plan #001

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

DECRIPTION	COST	FAIR VALUE
VALE S.A. ADR CUSIP: 91912E105 15241-02	77,999.72	173,802.61
WABTEC CORP CUSIP: 929740108 15241-04	123,991.78	170,507.00
WESTERN UNION-WI CUSIP: 959802109 15241-04	145,147.22	139,942.40
3M CO CUSIP: 88579Y101 15241-02	416,503.80	446,418.00
TOTAL INDUSTRIALS	4,788,679.87	5,338,483.56
INFORMATION TECHNOLOGY		
ADOBE SYS INC CUSIP: 00724F101 15241-02	153,732.29	161,795.22
AMERICAN TOWER CORP CUSIP: 029912201 15241-02	162,956.37	182,864.72
ANALOG DEVICES INC CUSIP: 032654105 15241-03	364,390.74	408,929.42
APPLE INC CUSIP: 037833100 15241-02	513,944.04	927,220.80
AUTOMATIC DATA PROCESSING INC CUSIP: 053015103 15241-03	157,201.37	156,592.74
CISCO SYSTEMS INC CUSIP: 17275R102 15241-02	561,329.58	697,827.06

EIN #34-1339938 Plan #001

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

DECRIPTION	COST	FAIR VALUE
GOOGLE INC - CL A CUSIP: 38259P508 15241-02	681,955.69	1,027,926.84
HEWLETT PACKARD CO CUSIP: 428236103 15241-02	666,765.88	810,458.34
INTEL CORP CUSIP: 458140100 15241-03	429,238.17	403,512.00
INTERNATIONAL BUSINESS MACHINES CORP CUSIP: 459200101 15241-02	561,603.01	762,492.50
MICROSOFT CORP CUSIP: 594918104 15241-02	342,432.18	576,011.04
MICROSOFT CORP CUSIP: 594918104 15241-03	195,120.40	303,458.88
NOKIA CORP SPNSD ADR CUSIP: 654902204 15241-03	451,817.71	234,962.25
ORACLE CORPORATION CUSIP: 68389X105 15241-02	330,398.17	360,223.05
TYCO ELECTRONICS LTD CUSIP: H8912P106 15241-03	127,320.37	130,606.00
VISA INC CUSIP: 92826C839 15241-02	283,326.03	351,064.44
TOTAL INFORMATION TECHNOLOGY	5,983,532.00	7,495,945.30

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

DECRICRIPTION	COST	FAIR VALUE
TELECOMMUNICATIONS SERVICES		
NEUSTAR INC-CL A CUSIP: 64126X201 15241-04	180,032.71	218,119.68
VERIZON COMMUNICATIONS CUSIP: 92343V104 15241-03	299,282.61	280,047.89
TOTAL TELECOMMUNICATIONS SERVICES	479,315.32	498,167.57
UTILITIES		
SOUTHERN UNION CO CUSIP: 844030106 15241-04	200,379.21	282,319.90
SPECTRA ENERGY CORP WI CUSIP: 847560109 15241-03	320,531.40	343,993.72
TOTAL UTILITIES	520,910.61	626,313.62
OTHER ASSETS		
BRANDYWINE REALTY TRUST REIT CUSIP: 105368203 15241-04	32,477.03	64,638.00
TOTAL OTHER ASSETS	32,477.03	64,638.00
TOTAL COMMON EQUITY SECURITIES	28,788,371.70	33,417,848.73
EQUITY MUTUAL FUNDS		
ISHARES RUSSELL 2000 INDEX FUND CUSIP: 464287655 15241-07	5,019,741.80	6,870,273.20
DODGE & COX INTERNATIONAL STOCK FD CUSIP: 256206103 15241-00	9,658,084.50	11,709,161.40
GABELLI SMALL CAP GROWTH I CUSIP: 36239T830 15241-00	1,000,823.29	1,028,506.47

EIN #34-1339938 Plan #001

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

DECRICRIPTION	COST	FAIR VALUE
ISHARES RUSSELL MIDCAP INDEX FUND CUSIP: 464287465 15241-00	11,743,251.02	9,021,696.00
ISHARES RUSSELL MIDCAP INDEX FUND CUSIP: 464287499 15241-00	5,914,932.85	5,985,275.40
ISHARES RUSSELL 1000 INDEX FUND CUSIP: 464287622 15241-00	15,916,996.74	15,539,632.60
TOTAL EQUITY MUTUAL FUNDS	<u>49,253,830.20</u>	<u>50,154,545.07</u>
FIXED INCOME MUTUAL FUNDS		
PIMCO TOTAL RETURN FUND-INST CUSIP: 693390700 15241-00	17,542,640.32	17,727,303.41
TOTAL FIXED INCOME MUTUAL FUNDS	<u>17,542,640.32</u>	<u>17,727,303.41</u>
CASH		
CASH 15241-00	1,376.60	1,376.60
CASH 15241-03	2,170.56	2,170.56
TOTAL CASH	<u>3,547.16</u>	<u>3,547.16</u>
TOTAL ASSETS	<u>115,849,369.08</u>	<u>122,448,638.55</u>

Pension Plan for Employees of FirstMerit Corporation and Affiliates

EIN #34-1339938 Plan #001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2009

Identity of Party Involved	Date Bought/Sold	Description of Asset	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Category 1 – Single transaction exceeds 5% of value							
**	6/19/2009	Dodge & Cox International	\$ 7,000,000	\$ –	\$ 7,000,000	\$ 7,000,000	\$ –
**	9/15/2009	Federated Government	10,000,000	–	10,000,000	10,000,000	–
Category 2 – Series of transactions with same broker exceeds 5% of value							
Morgan		Ishares MSCI EAFE Index	\$ –	\$ 6,919,322	\$ 11,090,865	\$ 6,919,322	\$ (4,171,543)

There were no category 3 or 4 reportable transactions during 2009

**Transactions made on market

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

▶ Round off amounts to nearest dollar.

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

A Name of plan Pension Plan for Employees of FirstMerit Corporation and Affiliates	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 FirstMerit Corporation	D Employer Identification Number (EIN) 34-1339938
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B ☐ Other	
F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500	

Part I Basic Information			
1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2009</u>			
2 Assets:			
a Market value.....	2a	111,115,058	
b Actuarial value.....	2b	122,226,563	
3 Funding target/participant count breakdown	(1) Number of participants		(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	3a	612	27,157,740
b For terminated vested participants.....	3b	1,880	25,958,038
c For active participants:			
(1) Non-vested benefits.....	3c(1)		4,473,772
(2) Vested benefits.....	3c(2)		50,179,452
(3) Total active.....	3c(3)	2,069	54,653,224
d Total.....	3d	4,561	107,769,002
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	8.08 %	
6 Target normal cost	6	4,411,425	

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>David A. Henderson</u> <u>DAH</u> Signature of actuary	<u>10/06/2010</u> Date
	<u>David A. Henderson</u> Type or print name of actuary	<u>08-06905</u> Most recent enrollment number
	<u>Hewitt Associates LLC</u> Firm name	<u>(216) 573-9700</u> Telephone number (including area code)
	<u>5005 Rockside Road, Suite 1000</u> Address of the firm	
	<u>Independence</u> <u>OH 44131</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)	15,313,642	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	2,381,377	0
9 Amount remaining (Item 7 minus item 8)	12,932,265	0
10 Interest on item 9 using prior year's actual return of <u>23.32</u> %	(3,015,804)	
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		5,125,302
b Interest on (a) using prior year's effective rate of <u>6.14</u> %		(386,860)
c Total available at beginning of current plan year to add to prefunding balance		4,738,442
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)	9,916,461	0

Part III Funding percentages		
14 Funding target attainment percentage	14	104.21 %
15 Adjusted funding target attainment percentage	15	113.41 %
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	107.26 %
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
09/14/2010	20,000,000				
Totals ▶			18(b)	20,000,000	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years	19a 0
b Contributions made to avoid restrictions adjusted to valuation date	19b 0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 17,523,332
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	

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

Part V Assumptions used to determine funding target and target normal cost**21 Discount rate:****a Segment rates:**1st segment:
%2nd segment:
%3rd segment:
%☒ N/A, full yield curve used**b Applicable month (enter code)****21b**

2

22 Weighted average retirement age**22**

60

23 Mortality table(s) (see instructions)☐

Prescribed - combined

☒

Prescribed - separate

☐

Substitute

Part VI Miscellaneous items**24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment**☒

Yes

☐

No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment☒

Yes

☐

No

26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment☒

Yes

☐

No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment**27****Part VII Reconciliation of unpaid minimum required contributions for prior years****28 Unpaid minimum required contribution for all prior years****28**

0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a)**29**

0

30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29)**30**

0

Part VIII Minimum required contribution for current year**31 Target normal cost, adjusted, if applicable (see instructions)****31**

0

32 Amortization installments:

Outstanding Balance

Installment

a Net shortfall amortization installment

0

0

b Waiver amortization installment

0

0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount**33**

0

34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)**34**

0

Carryover balance

Prefunding balance

Total balance

35 Balances used to offset funding requirement

0

0

0

36 Additional cash requirement (item 34 minus item 35)**36**

0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (item 19c)**37**

17,523,332

38 Interest-adjusted excess contributions for current year (see instructions)**38**

17,523,332

39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)**39**

0

40 Unpaid minimum required contribution for all years**40**

0

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2009

Date	Amount	Interest Rate	Interest Adjusted Contribution
September 14, 2010	\$ 20,000,000	8.08%	\$ 17,523,332
Total Contribution	\$ 20,000,000		\$ 17,523,332

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

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

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

(a)	(b)	(c)	(d)
Age	Rate	Weight	Product (a) × (b) × (c)
55.5	15.00%	1.0000	8.33
56.5	10.00%	0.8500	4.80
57.5	10.00%	0.7650	4.40
58.5	10.00%	0.6885	4.03
59.5	10.00%	0.6197	3.69
60.5	15.00%	0.5577	5.06
61.5	15.00%	0.4740	4.37
62.5	50.00%	0.4029	12.59
63.5	25.00%	0.2015	3.20
64.5	25.00%	0.1511	2.44
65.5	50.00%	0.1133	3.71
66.5	33.00%	0.0567	1.24
67.5	33.00%	0.0380	0.85
68.5	33.00%	0.0254	0.57
69.5	33.00%	0.0170	0.39
70	100.00%	0.0114	0.80
Weighted Average			60.47

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

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

Interest Rates

Based on the full Yield Curve with a two-month look-back (October 2008 yield curve), with sample rates as follows:

Yield Curve

Duration 0.5–5.45%
Duration 5.5–8.25%
Duration 10.5–8.87%
Duration 15.5–8.65%
Duration 20.5–8.11%
Duration 25.5–7.71%
Duration 30.5–7.46%

Salary Increases

Minimum Funding Target Normal Cost
Maximum Tax Expected Benefit Increase

See Table 1.
See Table 1.

Social Security Wage Base Increases

Future wage indices are based on a national wage increase of 3.50% per year.

Optional Payment Form Election Percentage

10% (full) life annuity.
90% partial lump sum/life annuity.

Lump Sum Conversion Interest Rate

Same as funding interest rates above.

Lump Sum Conversion Mortality

Applicable mortality table under IRC section 417(e) for lump sums paid during 2009.

Retirement Age

Active Participants
Terminated Vested Participants

See Table 2.
Age 61 (15+ Vesting Service); otherwise Age 65.

Mortality Rates

Healthy and Disabled

2009 Static Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(e).

Withdrawal Rates

See Table 3.

Disability Rates

None.

Surviving Spouse Benefit

It is assumed that 85% of males and 85% of females have an eligible spouse, and that males are three years older than their spouses.

Valuation Compensation

2008 Pensionable Earnings rolled forward one year with the salary increase assumption.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Benefit and Compensation Limits

Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of \$195,000 and the 401(a)(17) compensation limit of \$245,000.

Valuation of Plan Assets

Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value.

A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Trustee Expenses Included in Target Normal Cost

\$204,626, based on the prior year's actual administrative expenses.

Expected Return on Assets

2007 Plan Year

6.09%.

2008 Plan Year

6.43%.

Actuarial Method

Standard Unit Credit Cost Method.

Valuation Date

January 1, 2009.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Table 1
Salary Merit Increase Rates

Age	Rate	Age	Rate
15	10.00%	45	4.50%
16	10.00%	46	4.50%
17	10.00%	47	4.50%
18	10.00%	48	4.50%
19	10.00%	49	4.50%
20	10.00%	50	3.50%
21	10.00%	51	3.50%
22	10.00%	52	3.50%
23	10.00%	53	3.50%
24	10.00%	54	3.50%
25	8.50%	55	3.00%
26	8.50%	56	3.00%
27	8.50%	57	3.00%
28	8.50%	58	3.00%
29	8.50%	59	3.00%
30	6.75%	60+	3.00%
31	6.75%		
32	6.75%		
33	6.75%		
34	6.75%		
35	5.75%		
36	5.75%		
37	5.75%		
38	5.75%		
39	5.75%		
40	5.25%		
41	5.25%		
42	5.25%		
43	5.25%		
44	5.25%		

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Table 2
Retirement Rates—Funding

Age	Rate
55	15.00%
56	10.00%
57	10.00%
58	10.00%
59	10.00%
60	15.00%
61	15.00%
62	50.00%
63	25.00%
64	25.00%
65	50.00%
66	33.00%
67	33.00%
68	33.00%
69	33.00%
70+	100.00%

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Table 3—Page 1 of 2
Termination Rates

Age	Years of Service					
	0	1	2	3	4	5+
15	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
16	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
17	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
18	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
19	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
20	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
21	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
22	33.50%	33.50%	33.50%	33.50%	33.50%	33.50%
23	33.30%	31.70%	31.70%	31.70%	31.70%	31.70%
24	33.30%	29.90%	29.90%	29.90%	29.90%	29.90%
25	33.30%	29.60%	28.10%	28.10%	28.10%	28.10%
26	33.30%	29.60%	26.40%	26.40%	26.40%	26.40%
27	33.30%	29.60%	26.20%	24.80%	24.80%	24.80%
28	33.30%	29.60%	26.20%	23.20%	23.20%	23.20%
29	33.30%	29.60%	26.20%	23.00%	21.70%	21.70%
30	33.30%	29.60%	26.20%	23.00%	20.30%	20.30%
31	33.30%	29.60%	26.20%	23.00%	20.10%	18.90%
32	33.30%	29.60%	26.20%	23.00%	20.10%	17.50%
33	33.30%	29.60%	26.20%	23.00%	20.10%	16.30%
34	33.30%	29.60%	26.20%	23.00%	20.10%	15.10%
35	33.30%	29.60%	26.20%	23.00%	20.10%	13.90%
36	33.30%	29.60%	26.20%	23.00%	20.10%	12.80%
37	33.30%	29.60%	26.20%	23.00%	20.10%	11.80%
38	33.30%	29.60%	26.20%	23.00%	20.10%	10.80%
39	33.30%	29.60%	26.20%	23.00%	20.10%	9.90%
40	33.30%	29.60%	26.20%	23.00%	20.10%	9.00%
41	33.30%	29.60%	26.20%	23.00%	20.10%	8.20%
42	33.30%	29.60%	26.20%	23.00%	20.10%	7.50%
43	33.30%	29.60%	26.20%	23.00%	20.10%	6.80%
44	33.30%	29.60%	26.20%	23.00%	20.10%	6.20%

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Table 3—Page 2 of 2
Termination Rates

Age	Years of Service					
	0	1	2	3	4	5+
45	33.30%	29.60%	26.20%	23.00%	20.10%	5.60%
46	33.30%	29.60%	26.20%	23.00%	20.10%	5.10%
47	33.30%	29.60%	26.20%	23.00%	20.10%	4.70%
48	33.30%	29.60%	26.20%	23.00%	20.10%	4.30%
49	33.30%	29.60%	26.20%	23.00%	20.10%	4.00%
50	33.30%	29.60%	26.20%	23.00%	20.10%	3.70%
51	33.30%	29.60%	26.20%	23.00%	20.10%	3.50%
52	33.30%	29.60%	26.20%	23.00%	20.10%	3.40%
53	33.30%	29.60%	26.20%	23.00%	20.10%	3.30%
54	33.30%	29.60%	26.20%	23.00%	20.10%	3.30%
55+	33.30%	29.60%	26.20%	23.00%	20.10%	3.30%

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Schedule SB, Part V—Summary of Plan Provisions

Effective Date

January 1, 1952.

Date of Participation

One year of 1,000 hours of service and age 21.

**Normal Retirement
Eligibility**

Age 65 with five years of service.

Monthly Benefit

The sum of:

- (a) 1% of Average Final Earnings $\times$ years of Credited Service after January 1, 2005 (maximum of 40 years total Credited Service);

plus

- (b) 1.35% of Average Final Earnings $\times$ years of Credited Service through January 1, 2005 (maximum of 40 years);

plus

- (c) 0.55% of Average Final Earnings in excess of Covered Compensation $\times$ years of Credited Service through January 1, 2005 (maximum of 35 years).

There is a minimum pension amount equal to the participant's accrued pension as of December 31, 1988.

Several participants have grandfathered benefits from plans that were merged into the FirstMerit plan.

Effective January 1, 2007, participants who were not vested as of January 1, 2007 will no longer earn future benefits under the plan.

**Early Retirement
Eligibility**

Age 55 with 15 years of service.

Monthly Benefit

Normal Retirement Benefit reduced 3.0% annually for each year prior to age 65 for participants with 25 or more years of service; and reduced 3.0% annually for each year prior to age 65 but after age 62, 5.0% annually prior to age 62 for participants with less than 25 years of service.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Deferred Vested Retirement

Eligibility

Five years of service.

Monthly Benefit

The accrued benefit as of the date of termination payable at the participant's Normal Retirement Age or a reduced benefit commencing on or after attaining age 55 if the participant completed 15 years of service.

Disability Retirement

Eligibility

Participant becomes totally and permanently disabled, and has completed five years of service.

Monthly Benefit

Accrued Benefit based on service to Normal Retirement Age commencing at participant's Normal Retirement Age.

Note: Effective July 1, 1993, the disability benefit has been removed from the plan.

Preretirement

Surviving Spouse Benefit

Eligibility

Five years of service.

Monthly Benefit

Accrued Benefit reduced for Joint and 50% Survivor form and early retirement payment.

Normal Forms of Payment

For unmarried employees: life annuity.

For married employees: the actuarial equivalent 50% joint and survivor annuity.

Optional Forms of Payment

For unmarried employees: lump sum; 5-, 10-, and 15-year certain and life. Benefit accruals after June 1, 2004, are not eligible to be taken as a lump sum.

For married employees: same optional forms as an unmarried employee, plus life annuity; 66-2/3%, 75% and 100% joint and survivor annuity.

Actuarial equivalence for this purpose is based on a 6.50% interest rate and the 1984 Unisex Pensioner Table with a four year age setback.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Definitions

Accrued Benefit

The amount which a participant is entitled to commencing on his Normal Retirement Date in the form of a straight life annuity based on his Average Final Compensation, Social Security Covered Compensation, and Credited Years of Service as of the valuation date.

Average Final Compensation

Average compensation of four highest consecutive Plan Years out of the last ten.

Compensation

Wages paid, excluding overtime, bonuses, and other incentive earnings. If a participant works less than 2,080 hours in a Plan Year other than the Plan Year of termination of service, compensation is annualized by increasing actual compensation by the ratio of 2,080 over actual compensated hours.

Credited Years of Service

After December 31, 1988, one year of service for each calendar year an employee completes 1,800 hours of service. Fractional service is computed for 1,000–1,799 hours. No service for less than 1,000 hours.

Prior to January 1, 1989, the total of a participant's continuous years of full-time employment through December 31, 1988.

Effective January 1, 2007, participants who were not vested as of January 1, 2007 will no longer earn future benefits under the plan.

Participating Service

After December 31, 1988, any Plan Year in which an employee completes at least 1,000 hours of service.

Prior to January 1, 1989, the total of a participant's continuous years of full-time employment through December 31, 1988.

Effective January 1, 2007, participants who were not vested as of January 1, 2007 will no longer earn future benefits under the plan.

Plan Year

Calendar year.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Social Security Covered Compensation

The average of the maximum taxable wage bases for the 35 calendar years ending with the year an individual attains (or will attain) Social Security Retirement Age. In determining an individual's covered compensation in any given year, the current year's wage base is assumed to remain level in future years.

Year of Service

A Plan Year during which an employee completes at least 1,000 hours of service.

Plan Changes

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

- An increase in the annual pay limit under IRC section 401(a)(17) from \$230,000 in 2008 to \$245,000 in 2009.
- An increase in the annual maximum benefit limit under IRC section 415 from \$185,000 in 2008 to \$195,000 in 2009.

Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

- The target liability was calculated using the full yield curve based on corporate bonds rates for October. As such, "2" was entered on line 21b as the applicable look-back month.
- Line 11a does not match the amount reported on line 38 of the 2008 SB because the amount reported on line 38 did not reflect the modified determination of excess contributions provided in final regulations 1.430(f)-1(b)(1)(ii)(B).
- Line 35 does not reflect separate elections by the plan sponsor during 2009 to apply available carryover balance to preliminary April 15, 2009 and July 15, 2009 quarterly contribution requirements. The amounts elected to be applied by the plan sponsor as of January 1, 2009 were \$1,549,837 and \$1,519,915, respectively. These amounts will be adjusted with the plan's actual investment return during 2009 and subtracted from the carryover balance as of the beginning of the 2010 plan year (and reported in line 12 of the 2010 SB).

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
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Schedule SB, line 24—Change in Actuarial Assumptions

The funding valuation reflects the following changes:

- The mortality assumption changed from the 2008 Static Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(e) to the 2009 Static Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(e).
- A change in the salary increase assumption from 5.50% to the age-graded salary scale found in Table 1.
- A change in the retirement rates for active participants.
- A change in lump-sum conversion from the IRC section 417(e) mortality table for lump sums payable in 2008 to the IRC section 417(e) Mortality Table for lump sums payable in 2009.

These changes were made to better reflect the anticipated plan experience. These assumption changes did not reduce the funding shortfall, as such approval of the Commissioner is not required.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

Schedule SB, line 25—Change in Funding Method

The implementation of PPA required certain changes to the methods used in the funding valuation:

- A change in the asset valuation method from a Market Value method to a two-year smoothed value method as of January 1, 2009.
- A change in the interest rate assumption from segment rates to the full yield curve with a two-month look-back (October 2008 yield curve).
- An addition to the Target Normal Cost for assumed expenses payable from the trust, as required by WRERA.

These changes have automatic approval under final regulations, Notice 2009-22 or other IRS guidance.

Schedule SB Attachment (Form 5500)—2009 Plan Year
Pension Plan for Employees of FirstMerit Corporation and Affiliates
EIN: 34-1339938 PN: 001

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

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		44 \$22,861	7							
25-29		122 \$30,759	93 \$34,200	9						
30-34		71 \$37,874	97 \$35,299	70 \$37,670	6					
35-39		50 \$41,977	82 \$44,864	64 \$43,239	49 \$47,680	3				
40-44		44 \$52,395	64 \$45,795	49 \$46,038	51 \$49,922	44 \$46,906	3			
45-49		48 \$50,674	63 \$43,007	49 \$51,431	48 \$54,725	36 \$49,720	37 \$47,142	9		
50-54		50 \$53,151	59 \$50,486	51 \$55,278	43 \$40,587	21 \$42,724	31 \$53,104	36 \$58,581	5	
55-59		29 \$63,982	50 \$50,689	51 \$44,436	50 \$56,816	26 \$58,431	17	32 \$58,061	25 \$55,406	2
60-64		17	31 \$48,786	28 \$50,336	20 \$36,525	7	16	8	10	5
65-69		6	4	9		5	2			
70+		1	4	1	1		2	1		1

N-2069

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**OMB Nos. 1210-0110
1210-0089**2009****This Form is Open to Public Inspection****Part I Annual Report Identification Information**

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

- A** This return/report is for: ☐ a multiemployer plan; ☐ a multiple-employer plan; or
☒ a single-employer plan; ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first return/report; ☐ the final return/report;
☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
- C** If the plan is a collectively-bargained plan, check here. ☐
- D** Check box if filing under: ☒ Form 5558; ☐ automatic extension; ☐ the DFVC program;
☐ special extension (enter description) _____

Part II Basic Plan Information—enter all requested information**1a** Name of plan PENSION PLAN FOR EMPLOYEES OF
FIRSTMERIT CORPORATION AND AFFILIATES**1b** Three-digit plan number (PN) ▶ 001**1c** Effective date of plan 11/01/1952**2a** Plan sponsor's name and address (employer, if for a single-employer plan)
(Address should include room or suite no.)
FIRSTMERIT CORPORATION**2b** Employer Identification Number (EIN).
34-1339938**2c** Sponsor's telephone number
(330) 384-7114

106 SOUTH MAIN STREET, 9TH FLOOR

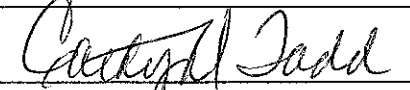
2d Business code (see instructions)
522110

AKRON

OH 44308-1444

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	CATHY D. TODD, VICE PRESIDENT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") SAME		3b Administrator's EIN
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:		4b EIN
a Sponsor's name		4c PN
5 Total number of participants at the beginning of the plan year		5 4,561
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 1,892	
b Retired or separated participants receiving benefits.....	6b 584	
c Other retired or separated participants entitled to future benefits.....	6c 1,866	
d Subtotal. Add lines 6a, 6b, and 6c.....	6d 4,342	
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e 90	
f Total. Add lines 6d and 6e.....	6f 4,432	
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 245	
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)	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	(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	b General 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	(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)