

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

Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning <u>01/01/2009</u> and ending <u>12/31/2009</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>ERC RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ► <u>004</u> 1c Effective date of plan <u>01/01/1941</u>
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>GENERAL ELECTRIC CAPITAL CORPORATION</u> <u>3135 EASTON TURNPIKE</u> <u>FAIRFIELD, CT 06828-0002</u>	2b Employer Identification Number (EIN) <u>13-1500700</u> 2c Sponsor's telephone number <u>800-432-3450</u> 2d Business code (see instructions) <u>525990</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/15/2010</u>	<u>DENISE FAGGELLA</u>
	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") GENERAL ELECTRIC CAPITAL CORPORATION 3135 EASTON TURNPIKE FAIRFIELD, CT 06828-0002	3b Administrator's EIN 13-1500700 3c Administrator's telephone number 800-432-3450
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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	
5 Total number of participants at the beginning of the plan year	5	2201
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	328
b Retired or separated participants receiving benefits.....	6b	468
c Other retired or separated participants entitled to future benefits.....	6c	1332
d Subtotal. Add lines 6a , 6b , and 6c	6d	2128
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	36
f Total. Add lines 6d and 6e	6f	2164
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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 3F 3H

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

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
(2) ☐ **I** (Financial Information – Small Plan)
(3) ☐ 0 **A** (Insurance Information)
(4) ☒ **C** (Service Provider Information)
(5) ☒ **D** (DFE/Participating Plan Information)
(6) ☐ **G** (Financial Transaction Schedules)

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

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

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

A Name of plan <u>ERC RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>GENERAL ELECTRIC CAPITAL CORPORATION</u>	D Employer Identification Number (EIN) <u>13-1500700</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2009</u>	
2 Assets:	
a Market value	2a <u>138671428</u>
b Actuarial value	2b <u>152538571</u>
3 Funding target/participant count breakdown	
	(1) Number of participants (2) Funding Target
a For retired participants and beneficiaries receiving payment	3a <u>504</u> <u>84824357</u>
b For terminated vested participants	3b <u>1263</u> <u>35758236</u>
c For active participants:	
(1) Non-vested benefits	3c(1) <u>4646188</u>
(2) Vested benefits	3c(2) <u>17274179</u>
(3) Total active	3c(3) <u>437</u> <u>21920367</u>
d Total	3d <u>2204</u> <u>142502960</u>
4 If the plan is at-risk, check the box and complete items (a) and (b)	☐
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>8.09</u> %
6 Target normal cost	6 <u>750000</u>

Statement by Enrolled Actuary

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

SIGN HERE	<u>10/11/2010</u>
Signature of actuary	Date
<u>JON HAMBERG</u>	<u>08-06624</u>
Type or print name of actuary	Most recent enrollment number
<u>HEWITT ASSOCIATES LLC</u>	<u>847-295-5000</u>
Firm name	Telephone number (including area code)
<u>100 HALF DAY ROAD</u> <u>LINCOLNSHIRE, IL 60069</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)	28333370	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9	Amount remaining (Item 7 minus item 8).....	28333370	0
10	Interest on item 9 using prior year's actual return of <u>-28.25</u> %	-8004177	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		0
b	Interest on (a) using prior year's effective rate of <u>6.16</u> %		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance.....		0
12	Reduction in balances due to elections or deemed elections.....	0	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	20329193	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	92.78 %
15	Adjusted funding target attainment percentage.....	15	107.04 %
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	128.61 %
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	900000	0			
Totals ►			18(b)	900000	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 750000
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☐ Yes ☒ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☐ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	

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

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

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

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

28 Unpaid minimum required contribution for all prior years	28	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	750000
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	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	750000
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement		Total balance
36 Additional cash requirement (item 34 minus item 35).....	36	750000
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	750000
38 Interest-adjusted excess contributions for current year (see instructions).....	38	38258
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 ERC RETIREMENT PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 GENERAL ELECTRIC CAPITAL CORPORATION	D Employer Identification Number (EIN) 13-1500700	

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

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

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

HEWITT ASSOCIATES LLC

100 HALF DAY ROAD
LINCOLNSHIRE, IL 60069

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?
11 13	NONE	324077	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

IVINS, PHILLIPS, & BARKER

1700 PENNSYLVANIA AVENUE, N.W.
SUITE 600
WASHINGTON DC, DC 20006-4723

52-1229560

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	160719	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KPMG, LLP

515 BROADWAY
ALBANY, NY 12207

13-5565207

(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	NONE	36750	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STATE STREET RETIREE SERVICES

CORPORATE HEADQUARTERS
8900 FREEDOM COMMERCE PKWY
JACKSONVILLE, FL 04186-7445

04-1867445

(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?
62 99	NONE	7634	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

(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:

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

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

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

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

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

For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan ERC RETIREMENT PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 GENERAL ELECTRIC CAPITAL CORPORATION		
		D Employer Identification Number (EIN) 13-1500700

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

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	900000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	138671428	142750700
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	138671428	143650700

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	138671428	143650700
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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)	900000	
(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)		900000

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0

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

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		13616013
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		14516013

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	8934316	
(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)		8934316
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)	287403	
(2) Contract administrator fees	2i(2)	234143	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	80879	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		602425
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		9536741

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		4979272
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: KPMG LLP

(2) EIN: 13-5565207

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		90000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)

5b(3) PN(s)

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

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

A Name of plan <u>ERC RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GENERAL ELECTRIC CAPITAL CORPORATION</u>	D Employer Identification Number (EIN) <u>13-1500700</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>14-6015763</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>6</u>

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

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

Part III	Amendments
-----------------	-------------------

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: 51.0% Investment-Grade Debt: 27.0% High-Yield Debt: 4.0% Real Estate: 12.0% Other: 6.0%

- 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):

ERC RETIREMENT PLAN
Financial Statements
December 31, 2009 and 2008
(With Independent Auditors' Report Thereon)

ERC RETIREMENT PLAN

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December 31, 2009 and 2008

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KPMG LLP
345 Park Avenue
New York, NY 10154-0102

Independent Auditors' Report

The ERC Retirement Plan Committee
ERC Retirement Plan:

We have audited the accompanying statements of net assets available for plan benefits and statements of accumulated plan benefits of the ERC Retirement Plan (the Plan) as of December 31, 2009 and 2008, and the related statements of changes in net assets available for plan benefits and of changes in accumulated plan 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 auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes 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 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, as well as 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 as of December 31, 2009 and 2008, and the changes in its financial status for the years then ended in conformity with U.S. generally accepted accounting principles.

KPMG LLP

October 12, 2010

ERC RETIREMENT PLAN
Statements of Net Assets Available for Plan Benefits
December 31, 2009 and 2008
(in thousands)

	<u>2009</u>	<u>2008</u>
Assets		
Investments at fair value (notes 3 and 4)		
Plan interest in GE Pension Trust	\$ 142,751	\$ 138,671
Employer contribution receivable	<u>900</u>	<u>—</u>
Net assets available for plan benefits	<u>\$ 143,651</u>	<u>\$ 138,671</u>

See accompanying notes to financial statements.

ERC RETIREMENT PLAN
Statements of Changes in Net Assets Available for Plan Benefits
Years Ended December 31, 2009 and 2008
(in thousands)

	<u>2009</u>	<u>2008</u>
Additions (reductions) to net assets attributed to:		
Investment income allocated from GE Pension Trust (note 3):		
Interest and dividends	\$ 3,261	\$ 5,281
Net appreciation (depreciation) in fair value of investments	10,816	(60,610)
Investment management fees and other expenses (note 6)	(461)	(512)
Employer contributions	<u>900</u>	<u>-</u>
Total additions (reductions)	<u>14,516</u>	<u>(55,841)</u>
Deductions from plan assets attributed to:		
Benefit payments	8,934	7,882
Administrative expenses (note 6)	<u>602</u>	<u>459</u>
Total deductions	<u>9,536</u>	<u>8,341</u>
Net increase (decrease)	4,980	(64,182)
Net assets available for plan benefits:		
Beginning of year	<u>138,671</u>	<u>202,853</u>
End of year	<u>\$ 143,651</u>	<u>\$ 138,671</u>

See accompanying notes to financial statements.

ERC RETIREMENT PLAN
Statements of Accumulated Plan Benefits
December 31, 2009 and 2008
(in thousands)

	<u>2009</u>	<u>2008</u>
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving payments	\$ 89,383	\$ 86,875
Other participants	<u>57,409</u>	<u>56,483</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 146,792</u>	<u>\$ 143,358</u>

See accompanying notes to financial statements.

ERC RETIREMENT PLAN
Statements of Changes in Accumulated Plan Benefits
Years Ended December 31, 2009 and 2008
(in thousands)

	<u>2009</u>	<u>2008</u>
Actuarial present value of accumulated plan benefits at beginning of year	\$ 143,358	\$ 124,494
Increase (decrease) during the year attributable to:		
Increase for interest due to the decrease in the discount period	11,118	9,650
Benefit payments	(8,934)	(7,882)
Plan amendment (note 9)	—	22,656
Other	<u>1,250</u>	<u>(5,560)</u>
Net increase	<u>3,434</u>	<u>18,864</u>
Actuarial present value of accumulated plan benefits at end of year	<u>\$ 146,792</u>	<u>\$ 143,358</u>

See accompanying notes to financial statements.

ERC RETIREMENT PLAN

Notes to Financial Statements

December 31, 2009 and 2008

(1) Description of the Plan

ERC Retirement Plan (the “Plan”) is a defined benefit pension plan for the benefit of eligible employees of Employers Reinsurance Corporation and its participating affiliated companies. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).

The Plan provides benefits to certain U.S. employees of Employers Reinsurance Corporation and such affiliates based on a) years of service, up to a maximum accrual of 30 years of service prior to normal retirement age, and b) average monthly salary during the highest paid 60 consecutive months of service.

Participating qualified employees are generally entitled to pension benefits (paid monthly) beginning at normal retirement age (65). The Plan also provides for early, unreduced benefit at age 60 with 15 or more years of service.

Effective October 1, 1999, all employees of the Employers Reinsurance Corporation became eligible to participate in the GE Pension Plan. However, due to the differences in the Plan formulas, upon conversion, the Company elected to provide a make-up (“wrap”) benefit through the Plan that delivers a final pension benefit equal to the benefit an employee would have earned solely under the Plan had the transition never occurred. The employee is eligible to participate in the “wrap” if the employee worked at the Company on April 30, 1999 and elected to begin participating in the GE Pension Plan on October 1, 1999. Under this “wrap” provision, the employee will continue to earn benefits under the Plan until his employment ends. At retirement, the employee will receive a benefit from both the Plan and the GE Pension Plan in amounts that, when combined, equal, but do not exceed, the monthly benefit the employee would have received if the employee had continued accruing benefits solely under the Plan. Former Industrial Risk Insurers employees that participate in the Pension Plan for Insurance Organizations (“IRI participants”) are eligible for a different “wrap” benefit based on a distinct benefit structure.

General Electric Company (“GE”) sold Employers Reinsurance Corporation in June 2006. Substantially all of the current employees became employees of Swiss Reinsurance Company (“Swiss Re”) at the time of the sale and are no longer accruing benefits (except for early retirement eligibility). The remaining active employees of GE ceased benefit accruals as of December 31, 2006 (except for early retirement eligibility). Effective June 8, 2006, the Plan sponsorship was transferred to General Electric Capital Corporation (the “Company”).

This description of the Plan is provided for general information purposes only. The complete terms of the Plan are provided in the ERC Retirement Plan document. Information concerning the Plan, including benefits and vesting provisions, is also included in the Summary Plan Description.

The Plan invests its funds in the GE Pension Trust (the “Trust”). State Street Corporation is the Trustee and primary custodian for ERC Trust assets. GE Asset Management Incorporated (“GEAM”), a wholly owned subsidiary of General Electric Company, is investment advisor to the Trust and provides investment management and other services.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

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

ERC RETIREMENT PLAN

Notes to Financial Statements

December 31, 2009 and 2008

(b) Recently Adopted Accounting Pronouncements

The Financial Accounting Standards Board ("FASB") has made the Accounting Standards Codification ("ASC") effective for financial statements issued for interim and annual periods ending after September 15, 2009. The ASC combines all previously issued authoritative U.S. generally accepted accounting principles ("GAAP") into one codified set of guidance organized by subject area. In these financial statements, references to previously issued accounting standards have been replaced with the relevant ASC references. Subsequent revisions to GAAP by the FASB will be incorporated into the ASC through issuance of Accounting Standards Updates ("ASU").

The Plan adopted ASC 855, *Subsequent Events* effective January 2009. ASC 855 establishes principles and requirements for subsequent events, in particular (a) the period after the balance sheet date during which management of a reporting entity shall evaluate events or transactions that may occur for potential recognition or disclosures in the financial statements; (b) the circumstances under which an entity shall recognize events or transactions occurring after the balance sheet date in its financial statements; and (c) the disclosures that an entity shall make about events or transactions that occurred after the balance sheet date.

In January 2010, FASB issued ASU 2010-06, *Improving Disclosures about Fair Value Measurements*. ASU 2010-06 will require reporting entities to make new disclosures about the amounts and reasons for significant transfers in and out of Level 1 and Level 2 fair value measurements and inputs and valuation techniques used to measure fair value for both recurring and nonrecurring fair value measurements that fall in either Level 2 or Level 3, and information on purchases, sales, issuances, and settlements in the roll forward of activity in Level 3 fair value measures. The new disclosures are effective for interim and annual reporting periods beginning after December 15, 2009, except for the disclosures about purchases, sales, issuances, and settlements in the roll forward of activity in Level 3 fair value measurements. Those disclosures are effective for fiscal years beginning after December 15, 2010, and for interim periods within those fiscal years. Management does not believe the adoption of ASU 2010-06 will materially impact the financial statement disclosures.

(c) Investments

All Plan investment assets are held in the Trust. The Trust's investments are carried at fair value. See notes 3 and 4 for additional information.

Investment transactions are recorded by the Trust on a trade date basis. Interest income on such investments is earned from settlement date and is recognized on an accrual basis. Dividend income on such investments is recorded on the ex-dividend date.

Securities for which exchange quotations are readily available are valued at the last sale price, or if no sales occurred on that day, at the quoted bid price. Short-term investments generally maturing within 60 days or less at the time of purchase are valued on the basis of amortized cost, which approximates fair value. Non-publicly traded investments are principally investments in real estate, pooled investment vehicles and private equity securities. The fair value estimates for these non-publicly traded investments

ERC RETIREMENT PLAN

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involve subjective judgments and the actual selling price of these investments can only be determined by negotiations between independent third parties in a sales transaction.

The Trust also invests in collective funds. A collective fund is a pool of investments from various investors to create a diversified fund.

Off-balance-sheet financial instruments and commitments are valued at current market prices and rates are included in receivables and liabilities on the Statement of Net Assets of the Trust. The net realized and unrealized gains or losses are included in net appreciation in value of investments in the Statement of Changes in Net Assets of the Trust.

Investment income and related expenses, including interest and dividend income and net realized gains (losses) on sale and unrealized appreciation (depreciation) in value of investments, is allocated by the Trust to the Plan based upon the Plan's percentage of Trust net assets at the beginning of each month.

(d) Fair Value Measurements

The Trust adopted ASC 820, *Fair Value Measurements and Disclosures*, effective January 1, 2008 for all financial investments accounted for at fair value. This guidance establishes a new framework for measuring fair value and expands related disclosures.

For financial assets and liabilities fair valued on a recurring basis, fair value is the price the Trust would receive to sell an asset or pay to transfer a liability in an orderly transaction with a market participant at the measurement date (an exit price) in the principal or most advantageous market. In the absence of active markets for the identical assets or liabilities, such measurements involve developing assumptions based on market observable data and, in the absence of such data, internal information that is consistent with what market participants would use in a hypothetical transaction that occurs at the measurement date.

Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect GE's market assumptions. Preference is given to observable inputs. These two types of inputs create the following fair value hierarchy:

Level 1 - Quoted prices for identical investments in active markets.

Level 2 - Quoted prices for similar investments in active markets; quoted prices for identical or similar investments in markets that are not active; and model-derived valuations whose significant value drivers are observable.

Level 3 - Significant inputs to the valuation model are unobservable.

GE maintains policies and procedures to value investments using the best and most relevant data available. GE performs periodic reviews of the methodologies used by independent pricing services including obtaining price validation for certain securities. In addition, GE performs annual reviews of the inputs and assumptions used in the valuation of direct investments in private equity securities and real estate investments.

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The following section describes the valuation methodologies used to measure investments at fair value.

When available, quoted market prices are used to determine fair value of investment securities, and they are included in Level 1. Level 1 securities primarily include publicly-traded equity securities.

When quoted market prices are unobservable, pricing information is obtained from independent pricing vendors. The pricing vendors use various pricing models for each asset class that are consistent with what other market participants would use. The inputs and assumptions to the model of the pricing vendors are derived from market observable sources including: benchmark yields, reported trades, broker/dealer quotes, issuer spreads, benchmark securities, bids, offers, and other market-related data. Since many fixed income securities do not trade on a daily basis, the methodology of the pricing vendors use available information as applicable such as benchmark curves, benchmarking of like securities, sector groupings, and matrix pricing. The pricing vendors consider available market observable inputs in determining the evaluation for a security. Thus, certain securities may not be priced using quoted prices, but rather determined from market observable information. These investments are included in Level 2 and primarily comprise the portfolio of corporate fixed income, and government, mortgage and asset backed securities. In infrequent circumstances, pricing vendors may provide valuations that are based on significant unobservable inputs, and in those circumstances the investment securities are classified in Level 3.

The Trust's ownership in the collective funds is carried at fair value based on the investment's net asset value per unit and included in Level 2.

Private equity security valuations are reviewed at the end of each reporting period utilizing available market data to determine whether or not any fair value adjustments are necessary. The market data includes recent transactions in the same or similar instruments, completed or pending third-party transactions in the underlying investment or comparable issuers. Unobservable inputs include company-specific fundamentals and other third-party transactions in that security.

Real estate investments are valued using discounted cash flow techniques on estimated future cash flows generated by the property; market analysis and sales comparison information. Cash flow estimates are based on current market estimates that reflect current and projected lease profiles and available industry information about expected trends in rental, occupancy, and capitalization rates.

The valuation methodology for private equity security and real estate investments is applied consistently, and is included in Level 3.

Private equity and real estate partnerships are valued using net asset values. The net asset values are determined based on the fair values of the underlying investments in the funds. Investments in private equity and real estate funds are generally included in Level 3 because they are not redeemable at the measurement date.

Closing prices for derivatives, which are traded either on exchanges or liquid over-the-counter markets, are included in Level 1. Derivative investments included in Level 2 primarily represent credit default swaps. Derivative investments included in Level 3 primarily represent options and warrants.

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Notes to Financial Statements

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(e) Management Estimates and Assumptions

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

(f) Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, which are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on employees compensation during the sixty highest-paid, consecutive months of credited service. The accumulated plan benefits for active employees are based on historical earnings and actual plan compensation on the date as of which the benefit information is presented (the valuation date). Benefits payable under all circumstances (retirement, death, disability, termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

The actuarial present value of accumulated plan benefits is determined by independent actuaries and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, termination of employment, and retirement) between the valuation date and the expected date of payment. The more significant actuarial assumptions used in the valuations as of December 31, 2009 and 2008 were: (a) expected mortality rates of participants based on mortality tables selected to reflect the demographic characteristics of the participants; (b) retirement age assumptions; the average assumed retirement age is approximately 62; and (c) interest discount assumption of 8.0%.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue indefinitely. If the Plan was expected to be completely terminated, different actuarial assumptions and other factors would be applicable in determining the actuarial present value of accumulated plan benefits. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that certain changes in these estimates and assumptions could be material to the financial statements.

(g) Benefit Payments

Benefit payments to participants are recorded when paid.

(h) Reclassifications

Certain prior year amounts have been reclassified to conform to current year presentation.

ERC RETIREMENT PLAN

Notes to Financial Statements

December 31, 2009 and 2008

(3) Summary of Trust Financial Information

- (a) The Plan's net assets are invested solely in the irrevocable Trust which has been established to receive Company and employee contributions, invest or reinvest such sums, and pay benefits in accordance with specific provisions for participating plans.
- (b) The Plan's net investment in the Trust rounded to less than 1% of the Trust net assets as of December 31, 2009 and 2008. The following tables present the net assets and changes in net assets of the Trust:

Net Assets:	December 31	
	<u>2009</u>	<u>2008</u>
	(in thousands)	
Assets:		
Investments (note 4):		
Public equity securities	\$ 21,182,405	\$ 17,508,419
Private equity securities	5,374,201	4,912,571
Hedge funds	1,532,209	1,516,724
Fixed income securities	9,944,094	7,591,442
Derivatives, interest bearing cash and CDs	1,530,450	5,327,754
Real estate	2,793,919	4,976,985
Securities pledged to creditors	-	651,088
Total investments	<u>42,357,278</u>	<u>42,484,983</u>
Receivables:		
Due from brokers	59,657	643,870
Income receivable	119,379	156,718
Other receivables	<u>357,389</u>	<u>321,951</u>
Total receivables	<u>536,425</u>	<u>1,122,539</u>
Total assets	<u>42,893,703</u>	<u>43,607,522</u>
Liabilities:		
Liability for collateral deposits	-	663,486
Due to brokers	466,636	1,788,411
Accounts payable and accrued expenses	16,915	54,549
Other liabilities	<u>28,323</u>	<u>100,282</u>
Total liabilities	<u>511,874</u>	<u>2,606,728</u>
Net assets of the Trust	<u>\$ 42,381,829</u>	<u>\$ 41,000,794</u>

ERC RETIREMENT PLAN

Notes to Financial Statements

December 31, 2009 and 2008

Changes in Net Assets:	Years Ended December 31	
	<u>2009</u>	<u>2008</u>
	(in thousands)	
Investment Income:		
Interest and dividend income	\$ 972,400	\$ 1,562,652
Net appreciation (depreciation) in value of investments:		
Public equity securities	5,181,808	(14,351,487)
Private equity securities	103,011	(864,992)
Hedge funds	325,510	(651,254)
Fixed income securities	605,987	(1,976,175)
Real estate	(2,239,282)	(626,491)
Other	<u>(915,223)</u>	<u>381,048</u>
Total net appreciation (depreciation)	3,061,811	(18,089,351)
Investment management fees and other expenses	(120,555)	(126,217)
Transfers in:		
Participant contributions	168,225	170,057
Transfers out:		
Benefit payments and employee refunds	(2,676,151)	(2,589,903)
Administrative expenses	<u>(24,695)</u>	<u>(25,683)</u>
Net increase (decrease)	1,381,035	(19,098,445)
Net assets of the Trust:		
Beginning of year	<u>41,000,794</u>	<u>60,099,239</u>
End of year	<u>\$ 42,381,829</u>	<u>\$ 41,000,794</u>

(c) Investments

The Trust invests in U.S. equities, international equities, fixed income securities, private equity securities, real estate, partnerships, and certain other assets. Due to risks associated with certain investments, it is reasonable to expect that changes in the value of investments will occur (including in the near term) and that such changes could materially affect the Trust's investments.

According to the statute, the aggregate holdings of all qualifying employer securities (e.g. General Electric Company common stock) and qualifying employer real property may not exceed 10% of the fair value of trust assets at the time of purchase. General Electric Company securities represented 3.3% and 3.5% of Trust net assets at December 31, 2009 and 2008, respectively.

ERC RETIREMENT PLAN

Notes to Financial Statements

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(d) Security Lending

The Trust may loan securities to certain unrelated third-party brokers. In the event the counterparty does not meet its contracted obligation to return securities used, the Trust may be exposed to the risk of reacquiring the securities at prevailing market prices in order to satisfy its obligations. In a securities loan arrangement, the Trust receives collateral in the form of cash or securities, which may be supplemented by letters of credit, in an amount in excess of the market value of securities loaned. The Trust monitors the market value of the securities loaned on a daily basis and additional collateral is obtained or refunded, as necessary. The value of cash collateral obtained and reinvested in short-term investments is reflected as a liability in the Trust's financial statements. The Trust did not participate in a security lending program at December 31, 2009. The value of loaned securities, primarily U.S. Treasury obligations, amount to \$651 million at December 31, 2008.

(e) Financial Instruments with Off-Balance-Sheet Risk

In the normal course of business, the Trust enters into transactions in various financial instruments with off-balance-sheet risk. These financial instruments involve varying degrees and types of risks, including credit and market risks, which may be in excess of the amounts recognized in the net assets of the Trust.

Credit risk represents the potential loss to the Trust due to possible nonperformance by obligors and counterparties of the terms of their contracts. Market risk represents the potential loss to the Trust due to the decrease in the value of an off-balance-sheet financial instrument caused primarily by changes in interest rates, foreign exchange rates, or a combination thereof.

Forward contracts and futures represent commitments to purchase or sell securities, money market instruments or foreign currencies at a future date and at a specified price. Short sells represent commitments to purchase securities at a future date. Options give the holder the right, but not the obligation, to purchase or sell securities at a future date and at a specified price. Both credit and market risk exist with respect to forward contracts. Market risk exists with respect to futures, short sells and options. These positions are carried at current market value, and the unrealized gain or loss is included in other assets and liabilities in the net assets of the Trust. Financial futures are marked to market and settled with the broker on a daily basis. The Trust does not anticipate that losses, if any, as a result of credit or market risk would materially affect the net asset position of the Trust. The Trust, to a limited extent, enters into transactions involving other financial instruments and commitments as an integral part of the overall management of the investment portfolio.

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Shown below are the derivative contracts entered into by the Trust, summarized by primary risk exposure as of December 31, 2009:

(in thousands)

Description	Notional Amount <u>Long/(Short)</u>	<u>Fair Value</u>	Location in Statement of Net <u>Assets of the Trust</u>
Call Options:			
Equity	\$ (145)	\$ (55,114)	Investments
Put options:			
Equity	2,190	344	Investments
Futures:			
U.S. Treasury	(389,800)	1,493	Other receivables
Equity index	(717,603)	60	Other receivables
U.S Treasury	171,700	5	Other liabilities
Equity index	3,847	219	Other liabilities
Commodity	57,449	232	Other liabilities
Forward contracts:			
Foreign exchange			
commitments to buy	34,197	36,272	Other receivables
Foreign exchange			
commitments to sell	462,713	460,341	Other receivables

Shown below are the effects of derivative instruments on the Statement of Changes in Net Assets of the Trust:

(in thousands)

Activity	Realized <u>gains/(losses)</u>	Change in unrealized appreciation/(depreciation) <u>recognized in income</u>	Location in Statement of Net <u>Assets of the Trust</u>	Total number of futures/contracts <u>purchased/(sold)</u>
Futures	\$ 84,811	\$ 14,915	Net appreciation/(depreciation in the fair value of investments	713/(754)
Forward foreign exchange contracts	23,471	(7)	Net appreciation/(depreciation in the fair value of investment	92/(101)
Options	(786,676)	(142,186)	Net appreciation/(depreciation in the fair value of investment	35/(27)

ERC RETIREMENT PLAN
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The following table describes the type of instrument, the current fair value and the unrealized gain (loss) for such activity as of December 31, 2008:

(in thousands)	2008	
Description	Fair Value/ Notional Amount <u>Long/(Short)</u>	Unrealized Gain (Loss) <u>Gain (Loss)</u>
Call Options:		
Equity	\$ -	\$ -
Put options:		
Equity	75,383	30,801
Commodity	100	(89)
Futures:		
U.S. Treasury	644,800	4,700
Equity index	(212)	(2,240)
Fixed income	(131,000)	2,994
Commodity	(8,661)	(259)
Forward contracts:		
Foreign exchange commitments to buy	89,324	(14,483)
Foreign exchange commitments to sell	101,042	<u>26,202</u>
		<u>\$ 47,626</u>

Net realized gains (losses) for the year ended December 31, 2008 were as follows:

(in thousands)	December 31 2008
<u>Activity</u>	
Futures	\$ 278,758
Forward foreign exchange contracts	<u>(19,392)</u>
Total net realized gains	<u>\$ 259,366</u>

Additionally, the Trust had unfunded commitments of \$3,954 million and \$4,621 million as of December 31, 2009 and 2008, respectively, related to investments in private equity and real estate partnerships.

ERC RETIREMENT PLAN

Notes to Financial Statements

December 31, 2009 and 2008

(4) Fair Value Measurements

The following table presents the Trust's investments measured at fair value on a recurring basis at December 31, 2009:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
	(in thousands)			
Public equity securities	\$ 20,471,694	\$ 710,711	\$ -	\$ 21,182,405
Private equity securities	-	-	5,374,201	5,374,201
Hedge funds	-	-	1,532,209	1,532,209
Fixed income securities	-	9,437,079	507,015	9,944,094
Derivatives, interest bearing cash & CDs	22,245	1,493,561	14,644	1,530,450
Real estate	-	-	2,793,919	2,793,919
Total investments	<u>\$ 20,493,939</u>	<u>\$ 11,641,351</u>	<u>\$ 10,221,988</u>	<u>\$ 42,357,278</u>

The following table presents the Trust's investments measured at fair value on a recurring basis at December 31, 2008:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
	(in thousands)			
Public equity securities	\$ 16,639,768	\$ 434,301	\$ 434,350	\$ 17,508,419
Private equity securities	-	-	4,912,571	4,912,571
Hedge funds	-	-	1,516,724	1,516,724
Fixed income securities	-	7,278,970	312,472	7,591,442
Derivatives, interest bearing cash & CDs	28,210	5,256,494	43,050	5,327,754
Real estate	-	-	4,976,985	4,976,985
Securities pledged to creditors	-	651,088	-	651,088
Total investments	<u>\$ 16,667,978</u>	<u>\$ 13,620,853</u>	<u>\$ 12,196,152</u>	<u>\$ 42,484,983</u>

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Notes to Financial Statements

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The following table presents the changes in Level 3 investments measured on a recurring basis for the year ended December 31, 2009:

	January 1, 2009	Net realized/ unrealized gains (losses) included in earnings	Purchases, issuances and settlements	Transfers in and/or out of Level 3 ^(a)	December 31, 2009	Net change in unrealized gains (losses) relating to investments still held at December 31, 2009 ^(b)
	(in thousands)					
Public equity securities	\$ 434,350	\$ (4,497)	\$ (429,853)	\$ -	\$ -	\$ -
Private equity securities	4,912,571	103,011	358,619	-	5,374,201	19,446
Hedge funds	1,516,724	325,510	(310,025)	-	1,532,209	112,582
Fixed income securities	312,472	24,272	155,610	14,662	507,015	(60,774)
Derivatives, interest bearing cash & CDs	43,050	(132,368)	103,961	-	14,644	(142,467)
Real estate	4,976,985	(2,239,282)	56,216	-	2,793,919	(2,422,971)
Total	\$ 12,196,152	\$ (1,923,354)	\$ (65,472)	\$ 14,662	\$ 10,221,988	\$ (2,494,184)

(a) Transfers out of Level 3 are considered to occur at the beginning of the period. Transfers out of Level 3 were a result of increased use of quotes from independent pricing vendors.

(b) Represented the amount of unrealized gains or losses for the period included in earnings.

The following table presents the changes in Level 3 investments measured on a recurring basis for the year ended December 31, 2008:

	January 1, 2008	Net realized/ unrealized gains (losses) included in earnings	Purchases, issuances and settlements	Transfers in and/or out of Level 3 ^(a)	December 31, 2008	Net change in unrealized gains (losses) relating to investments still held at December 31, 2008 ^(b)
	(in thousands)					
Public equity securities	\$ 553,394	\$ (218,941)	\$ 99,897	\$ -	\$ 434,350	\$ (137,938)
Private equity securities	5,177,125	(864,992)	600,438	-	4,912,571	(635,366)
Hedge funds	1,943,460	(651,254)	224,518	-	1,516,724	(508,675)
Fixed income securities	490,113	(175,877)	(6,049)	4,285	312,472	(171,571)
Derivatives, interest bearing cash & CDs	-	30,801	12,249	-	43,050	30,801
Real estate	5,357,634	(626,491)	245,842	-	4,976,985	(674,222)
Total	\$ 13,521,726	\$ (2,506,754)	\$ 1,176,895	\$ 4,285	\$ 12,196,152	\$ (2,096,971)

(a) Transfers out of Level 3 are considered to occur at the beginning of the period.

(b) Represented the amount of unrealized gains or losses for the period included in earnings.

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(5) Tax Status

The Internal Revenue Service has notified the Company by a letter dated January 21, 2004, that the Plan continues to be qualified under the appropriate sections of the Internal Revenue Code. The Plan has since been amended since that letter was issued. However, counsel for the Plan has no reason to believe that the amendments to the Plan have adversely affected the validity of the determination letter. The Plan satisfies the non-discrimination requirements of Code sections 401(a)(4) and 410(b). To the extent the Trust recognizes any “unrelated business taxable income” as defined in Section 512 of the Code, the Trust is required to pay tax on any such income. The Trust recorded a current income tax expense of \$1.4 million and \$4.4 million and deferred income tax expense of \$30.2 million and \$10.4 million during the years ended December 31, 2009 and 2008, respectively. The Trust recorded a \$5.7 million and \$24.6 million deferred tax liability at December 31, 2009 and 2008, respectively, related to investment in real property and loss carryovers.

The Trust adopted ASC 740, *Income Taxes*, effective January 2009. ASC 740 provides guidance for how uncertain tax positions should be recognized, measured, presented, and disclosed in the financial statements. ASC 740 requires evaluation of tax positions taken or expected to be taken in the course of preparing the Trust’s tax returns to determine whether the tax positions are more likely than not of being sustained by the applicable tax authority. In applying ASC 740, the management of the Trust concluded there was no impact on the Trust’s net assets and financial statements. The Trust’s 2006, 2007, 2008 and 2009 calendar year tax returns are still open to examination by the federal and applicable state tax authorities.

(6) Expenses

Pursuant to the Plan document, the Plan incurs certain administrative expenses and the Plan’s proportionate share of other Trust expenses. Administrative expenses consist primarily of direct recordkeeping and processing costs. The Plan’s proportionate share of the other Trust expenses is primarily associated with investment management fees.

Expenses for the Plan for the years ended December 31, 2009 and 2008 were as follows:

<u>Activity</u>	December 31	
	<u>2009</u>	<u>2008</u>
	(in thousands)	
Administrative expenses	\$ 602	\$ 459
Investment management fees and other expense	<u>461</u>	<u>512</u>
Total expenses	<u>\$ 1,063</u>	<u>\$ 971</u>

(7) Funding

It is the Company’s policy to contribute amounts sufficient to meet minimum funding requirements as set forth in employee benefit and tax laws plus such additional amounts as the Company may determine to be appropriate. The Company contributed \$900,000 in 2010 for the 2009 Plan Year. No Company contributions were made in 2008.

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Notes to Financial Statements

December 31, 2009 and 2008

(8) Plan Termination

Although the Company has not expressed any intent to do so, it has the right to terminate the Plan in accordance with the Plan provisions and the provisions set forth in ERISA.

In the event of complete Plan termination, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide benefits in a prescribed order starting with benefits attributable to employee contributions.

Additionally, the Pension Benefit Guaranty Corporation ("PBGC"), a U.S. government agency, insures certain benefits under the Plan, if the Plan so terminates. Generally, the PBGC guarantees most vested normal retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations.

Whether all participants will receive their benefits should the Plan so terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan sponsor and level of benefits guaranteed by the PBGC. There is a statutory ceiling on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2009, that ceiling, which is adjusted periodically, is \$4,500 per month.

(9) Plan Amendments

The Plan was amended effective January 1, 2009 to provide an annual cost of living adjustment to deferred vested participants who terminated and commenced their benefits prior to 2009.

(10) Subsequent Events

Subsequent events after the balance sheet date through October 12, 2010, have been evaluated in the preparation of the financial statements.

Schedule SB Attachment (Form 5500)—2009 Plan Year
 ERC Retirement Plan
 EIN: 13-1500700 PN: 004

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

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34				3	1					
35-39			1	24	5	1				
40-44			2	46	31	19				
45-49			4	36	28	45	7	1		
50-54			3	19	21	15	17	15	1	
55-59			1	8	11	15	14	12	4	
60-64				8	3	1	5	2	4	1
65-69				1		2				
70+										

N-437

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

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). Sample rates as follows:
Yield Curve	Duration 0—5.45% Duration 5—8.25% Duration 10—8.87% Duration 15—8.65% Duration 20—8.11% Duration 25—7.71% Duration 30—7.46%
Retirement Age	
Active Participants	See Table 1.
Terminated Vested Participants	65.
Mortality Rates	2009 Static Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(e).
Withdrawal Rates	See Table 2.
Disability Rates	See Table 3.
Surviving Spouse Benefit	It is assumed that 80% of males and 60% of females have an eligible spouse, and that males are five years older than their spouses.
Optional Forms	ERC and IRI: 50% assumed to elect a Single Life Annuity, 50% assumed to elect a 50% Joint & Survivor Annuity MedPro: 50% assumed to elect a Lump Sum, 50% assumed to elect a 50% Joint & Survivor Annuity
Valuation of Plan Assets	Smoothed fair market value of assets over the current and prior 2 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 positive expected long-term rates of return.
Actuarial Method	Standard Unit Credit Cost Method.
Valuation Date	January 1, 2009.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Table 1
Retirement Age

Age	ERC and IRI Rate	Med Pro Rate
55	5.0%	2.0%
56	5.0%	2.0%
57	5.0%	2.0%
58	5.0%	2.0%
59	5.0%	3.0%
60	10.0%	3.0%
61	10.0%	3.0%
62	50.0%	3.0%
63	20.0%	3.0%
64	20.0%	3.0%
65	100.0%	100.0%

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
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Table 2
Probability of Withdrawal

Present Age		Present Age	
15	0.065775	40	0.038412
16	0.065775	41	0.037229
17	0.065775	42	0.036139
18	0.065775	43	0.035048
19	0.065775	44	0.033784
20	0.065775	45	0.032149
21	0.062179	46	0.029962
22	0.059081	47	0.027100
23	0.056482	48	0.023544
24	0.054379	49	0.019386
25	0.052704	50	0.015245
26	0.051387	51	0.011813
27	0.050358	52	0.009082
28	0.049547	53	0.006879
29	0.048888	54	0.004987
30	0.048312	55	0.003344
31	0.047756	56	0.002074
32	0.047165	57	0.001172
33	0.046488	58	0.000538
34	0.045687	59	0.000161
35	0.044736	60	0.000000
36	0.043629	61	0.000000
37	0.042376	62	0.000000
38	0.041036	63	0.000000
39	0.039690	64	0.000000

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
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Table 3
ERC and IRI
Probability of Disability

Present Age	Male	Female	Present Age	Male	Female
15	0.00070	0.00070	40	0.00115	0.00200
16	0.00070	0.00070	41	0.00120	0.00220
17	0.00070	0.00070	42	0.00127	0.00240
18	0.00070	0.00070	43	0.00136	0.00260
19	0.00070	0.00070	44	0.00148	0.00280
20	0.00070	0.00070	45	0.00162	0.00310
21	0.00071	0.00070	46	0.00176	0.00340
22	0.00072	0.00080	47	0.00191	0.00380
23	0.00073	0.00080	48	0.00207	0.00420
24	0.00074	0.00080	49	0.00223	0.00470
25	0.00075	0.00090	50	0.00240	0.00520
26	0.00076	0.00090	51	0.00260	0.00580
27	0.00078	0.00090	52	0.00286	0.00660
28	0.00080	0.00100	53	0.00318	0.00750
29	0.00082	0.00100	54	0.00356	0.00860
30	0.00084	0.00100	55	0.00400	0.00990
31	0.00086	0.00110	56	0.00459	0.01130
32	0.00088	0.00110	57	0.00534	0.01280
33	0.00090	0.00120	58	0.00610	0.01430
34	0.00093	0.00130	59	0.00720	0.01580
35	0.00096	0.00140	60	0.00843	0.01740
36	0.00099	0.00150	61	0.00975	0.01910
37	0.00103	0.00160	62	0.01130	0.02110
38	0.00107	0.00170	63	0.01305	0.02330
39	0.00111	0.00180	64	0.01490	0.02580

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

Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

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

▶ **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

ERC Retirement Plan

B Three-digit
plan number (PN) ▶

004

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF

General Electric Capital Corporation

D Employer Identification Number (EIN)

13-1500700

E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B**F** Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500**Part I Basic Information****1** Enter the valuation date: Month 1 Day 1 Year 2009**2** Assets:

	2a	
a Market value.....	138,671,428	
b Actuarial value.....	152,538,571	

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment.....	504	84,824,357
b For terminated vested participants.....	1,263	35,758,236
c For active participants:		
(1) Non-vested benefits.....	437	4,646,188
(2) Vested benefits.....		17,274,179
(3) Total active.....	437	21,920,367
d Total.....	2,204	142,502,960

4 If the plan is at-risk, check the box and complete items (a) and (b) ☐

	4a	4b
a Funding target disregarding prescribed at-risk assumptions.....		
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.....		

5 Effective interest rate..... **5** 8.09 %**6** Target normal cost..... **6** 750,000**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**

Jon Hamberg JH

Signature of actuary

Jon Hamberg

Type or print name of actuary

Hewitt Associates LLC

Firm name

100 Half Day Road

Lincolnshire

IL 60069

Address of the firm

10/11/2010

Date

08-06624

Most recent enrollment number

(847) 295-5000

Telephone number (including area code)

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)	28,333,370	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8)	28,333,370	0
10 Interest on item 9 using prior year's actual return of <u>(28.25)</u> %	(8,004,177)	
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		0
b Interest on (a) using prior year's effective rate of <u>6.16</u> %		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Reduction in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	20,329,193	0

Part III Funding percentages

14 Funding target attainment percentage	14	92.78 %
15 Adjusted funding target attainment percentage	15	107.04 %
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	128.61 %
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	900,000				
Totals ▶			18(b)	900,000	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	750,000

20 Quarterly contributions and liquidity shortfalls:

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

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

Part V Assumptions used to determine funding target and target normal cost**21** Discount rate:**a** Segment rates:

1st segment: %	2nd segment: %	3rd segment: %	☒ N/A, full yield curve used
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b Applicable month (enter code)**21b**

2

22 Weighted average retirement age**22**

62

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute**Part VI Miscellaneous items****24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**26** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**27** If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment. **27****Part VII Reconciliation of unpaid minimum required contributions for prior years****28** Unpaid minimum required contribution for all prior years **28** 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** 750,000**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****34** Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33) **34** 750,000

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** 750,000**37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c) **37** 750,000**38** Interest-adjusted excess contributions for current year (see instructions) **38** 38,258**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
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Schedule SB, Part V—Summary of Plan Provisions
Summary of Plan Provisions—ERC Participants

Eligibility

After completion of 12-month period of employment of not less than 1,000 hours but excluding:

- (a) any person more than half of whose remuneration consists of commissions;
- (b) any person who is a member of any labor organization which has accepted this plan;
- (c) any person who is a leased employee; and
- (d) any person hired after April 30, 1999 or hired prior to May 1, 1999 but has not yet completed the 1,000 hour service requirement by October 1, 1999.

Effective June 9, 2006, the Plan was amended such that plan members that transferred to Swiss Re ceased to accrue new benefits under the plan. However, participants (other than IRI participants) that continue to be employed by Swiss Re will grow into eligibility for the Plan's early retirement benefits by reaching the age and service requirements for such benefits based on their combined service with the Company at GE and Swiss Re.

Effective December 31, 2006, the Plan was amended such that plan members that were still employed by GE ceased to accrue new benefits under the plan. However, they will grow into eligibility for the Plan's early retirement benefits by reaching the age and service requirements for such benefits based on their full service with the Company. In addition, for members who continue to accrue benefits under the GE Pension Plan after December 31, 2006, the GE Pension Plan benefit used for purposes of the offset is the members GE Pension Plan benefit determined as of December 31, 2006.

Normal Retirement

Eligibility

The first day of the month coincident with or next following the attainment of age 65.

Monthly Benefit

1.667% of Average Monthly Compensation up to \$1,300 plus 2.000% of Average Monthly Compensation in excess of \$1,300 for each year of credited service (maximum 30 years) less any benefit payable from the GE Pension Plan for benefit service after October 1, 1999.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—ERC Participants

Early Retirement

Eligibility	Age 55 and 5 years of service.
Benefit Reduction for Early Payment	Less Than 15 Years Of Service: Accrued benefit reduced .25% the first 60 months and .4167% for the next 60 months by which payments precede Normal Retirement Age.
Years Of Service	Accrued benefit reduced .4167% for each month by which payments precede age 60.

Disability Retirement

Eligibility	Five years of service.
Benefit	Accrued benefit payable at age 65 based on earnings of disability and service projected to age 65.

**Preretirement Surviving
Spouse Benefit**

Eligibility	All vested participants.
Benefit	50% of an employee's accrued benefit, payable to a surviving spouse commencing on the date of death.

Vested Termination Benefits

Eligibility	Five years of vesting service.
Benefit	Accrued benefit payable at normal retirement age, or payable at early retirement age reduced .5556% for the first 60 months and .2778% for the next 60 months payments precede normal retirement age.
Cost of Living Adjustments	Adjustments occur on July 1 of each year. The benefit is equal to 100% plus (or minus) the proportionate change in the cost of living index between the two most recent January 1, provided that: (a) No pension will be reduced below its original amount; and (b) The maximum upward adjustment in any year is 2% of the current pension.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—ERC Participants

Definitions

Year of Service	Years of full-time continuous employment to December 31, 1975, rounded up to next full year; plus the number of years beginning with 1976 during which the Employee earns 1,000 or more hours of service. Former employees of companies acquired by ERC receive service for vesting in accordance with the terms of the agreement.
Credited Service	Years and months of continuous full-time employment to December 31, 1983, rounded to nearest month; plus the number of years beginning with 1984 during which the Employee earns 1,000 or more hours of service. Former employees of companies acquired by ERC receive credited service in accordance with the terms of the agreement.
Compensation	Base salary plus overtime.
Average Monthly Compensation	The average monthly compensation for the highest 60 consecutive months.
Normal Form of Benefit	Life annuity or an actuarially equivalent 50% joint and survivor annuity if the participant is married at the date of his retirement.
Employers Included	Employers Reinsurance Corporation, First Excess Reinsurance Corporation, Bates Turner, ERC Life Insurance.
Actuarial Equivalent	A benefit of equivalent value based on the rates from the 1984 Unisex Pension Table and an interest rate of 8% per year.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—IRI Participants

Eligibility

Any former employee of HSB Industrial Risk Insurers hired prior to May 1, 1999, who commenced employment with a GE Controlled Entity as of May 1, 1999 and who participated in the BCG Pension Plan (now known as the PPIO) as of December 31, 2000 and enrolled in the GE Pension Plan as of January 1, 2001.

Normal Retirement

Eligibility

The first day of the month coincident with or next following the attainment of age 65.

Monthly Benefit

Monthly benefit equal to the excess of (1) over (2):

- (1) The GE Pension (comprised of both the Regular Pension and Additional Pension, if applicable, but not including any amounts attributable to the participant's Personal Pension Account or Voluntary Pension Account) based on the participant's Pension Benefit Service and Pension Qualification Service.
- (2) Equals (a) plus (b)
 - (a) the Participant's BCG Accrued Benefit under the BCG Pension Plan as of December 31, 2000;
 - (b) the Participant's GE Pension (comprised of both the Regular Pension and Additional Pension, if applicable, but not including any amounts attributable to the IRI Personal Pension Account or Voluntary Pension Account) under the GE Pension Plan based solely upon the IRI Participant's Pension Benefit Service earned on or after January 1, 2001.

Early Retirement

Eligibility

Age 55 and 5 years of service.

Benefit Reduction for Early Payment Unreduced accrued benefit payable at age 60.

Disability Retirement

Eligibility

Fifteen years of service.

Benefit

Accrued benefit reduced 2% per year below age 60 (maximum 12% reduction) payable immediately.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—IRI Participants

Preretirement Surviving

Spouse Benefit

Eligibility	Age 50 and five years of service, 30 years of service, or age 60.
Benefit	Fifty percent of employee's accrued benefit reduced 1% per year below age 60 and for 50% joint and survivor option payable to a surviving spouse immediately.
Eligibility	Five years of service and not eligible for above benefit.
Benefit	50% of employee's accrued benefit, reduced for the 50% joint and survivor option, payable to a surviving spouse commencing on the later of (a) the date the participant would have attained age 60, or (b) the date of death.

Vested Termination Benefits

Eligibility	Five years of service.
Benefit	Accrued benefit payable at age 60.

Definitions

Actuarial Equivalent	A benefit of equivalent value based on the rates from the 1951 Group Annuity Mortality Table and an interest rate of 4.5% per year. The unisex adjustment for participants is 95% male with one year setback plus 5% male with six year setback. The unisex adjustment for spouses is 5% male with one year setback plus 95% male with six year setback.
Normal Form of Benefit	Life annuity or an actuarially equivalent 50% joint and survivor annuity if the participant is married at the date of his retirement.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—Med Pro Participants

Eligibility

Any former employee of the Medical Protective Corporation hired prior to May 1, 1999 and completed a 12-month period of employment of not less than 1,000 hours.

Effective March 8, 2000, and recognized in the January 1, 2000 valuation, the Plan was amended to include a “gap pension benefit” for former Kemper RE (“KRE”) employees.

The plan was retroactively amended on September 17, 2007, with an effective date of June 9, 2006, to allow former Kemper Reinsurance participants that were part of the sale to Swiss Re to take a distribution of their benefit.

Normal Retirement

Eligibility

The first day of the month coincident with or next following the attainment of age 65.

Monthly Benefit

The sum of (1) and (2) below:

- (1) For plan years beginning after December 31, 1995, 1/12 of 1% of compensation times each year or partial year of benefit service after December 31, 1995 and before October 1, 1999.
- (2) For plan years beginning before December 31, 1995, 40% of average monthly compensation plus 20% of average monthly compensation over covered compensation, the sum prorated for benefit service before January 1, 1996 if less than 35 years.

Postponed Retirement

Eligibility

After attaining eligibility for normal retirement.

Monthly Benefit

The greater of (1) or (2) below:

- (1) The amount that would have been payable if the employee had retired when he or she attained normal retirement age, increased to the actuarial equivalent as of the earlier of the benefit commencement date or the September 30, 1999 freeze date.
- (2) The amount determined as for normal retirement based on compensation and benefit service at the time of termination of employment.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—Med Pro Participants

Early Retirement

Eligibility	Age 55 and 10 years of service.
Benefit Reduction for Early Payment	Reduced to the actuarial equivalent as of the benefit commencement date.

Preretirement Surviving

Spouse Benefit

Eligibility	All vested participants.
Benefit	100% of the amount that would have been payable if the employee had terminated employment on the date of death (if not already terminated) and begun to receive a 100% joint and survivor annuity.

Vested Termination Benefits

Eligibility	Five years of vesting service.
Benefit	The amount determined as for early retirement.

Definitions

Actuarial Equivalent	For benefits other than lump-sum benefits: a benefit of equivalent value based on the male rates from the 1951 Group Annuity Mortality Table projected to 1960 and an interest rate of 6% per annum, compounded annually.
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For lump-sum benefits: a benefit of equivalent value based on the 1983 Group Annuity Mortality Table, weighted 50% male/50% female, and an interest rate equivalent to the rate on 30-year Treasury securities (unrounded) for the November preceding the plan year in which distribution occurs, subject to certain minimum requirements.

Average Monthly Compensation	1/36 of the highest compensation for any three consecutive plan years of employment prior to January 1, 1996.
------------------------------	---

Benefit Service	The sum of (1) and (2) below: (1) 1/12 for each month of employment on or after January 1, 1996. (2) One year for each year of employment (rounded to the nearest whole year) before January 1, 1996.
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Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Summary of Plan Provisions—Med Pro Participants

Compensation	The pay rate in effect on January 1 (or on date of hire in year of hire), determined prior to any reductions for the Company's section 401(k) or 125 plan, subject to the 401(a)(17) limits.
Covered Compensation	1/12 of the average of the taxable wage bases for each calendar year during the 35-year period ending with the last day of the calendar year in which the employee attains (or will attain) Social Security retirement age; determined assuming that future wage bases will be the same as the current wage base, frozen as of December 31, 1995.
Plan Year	Each calendar year.
Vesting Service	The number of years of benefit service, plus service during certain periods of absence.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2009

Date	Amount	Interest Rate	Interest Adjusted Contribution
April 15, 2009	\$ 0	8.09%	\$ 0
July 15, 2009	0	8.09%	0
October 15, 2009	0	8.09%	0
January 15, 2010	0	8.09%	0
September 15, 2010	<u>900,000</u>	8.09%	<u>788,258</u>
Total Contribution	\$ 900,000	8.09%	\$ 788,258

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Schedule SB, line 25—Change in Funding Method

A change in the asset valuation method from a Three-Month Smoothing method to the Two-Year Averaging method as of January 1, 2009.

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

Schedule SB, line 24—Change in Actuarial Assumptions

- A change in the interest rate assumption from the 24-Month Average Segment Rates of 5.31%, 5.92%, and 6.43% to the October 2008 Full Yield Curve.

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).

Schedule SB Attachment (Form 5500)—2009 Plan Year
ERC Retirement Plan
EIN: 13-1500700 PN: 004

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) Product
Age	Rate	Weight	(a) × (b) × (c)
55	5.00%	1.0000	2.78
56	5.00%	0.9500	2.68
57	5.00%	0.9025	2.59
58	5.00%	0.8574	2.51
59	5.00%	0.8145	2.42
60	10.00%	0.7738	4.68
61	10.00%	0.6964	4.28
62	50.00%	0.6268	19.59
63	20.00%	0.3134	3.98
64	20.00%	0.2507	3.23
65	100.00%	0.2006	13.04
Weighted Average			61.78