

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

Part II	Basic Plan Information—enter all requested information
1a	Name of plan DOOSAN PENSION PLAN NUMBER ONE
1b	Three-digit plan number (PN) ▶ 002
1c	Effective date of plan 12/01/2007
2a	Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) DOOSAN INFRACORE INTERNATIONAL, INC 400 PERIMETER CENTER TERRACE ATLANTA, GA 30346 SUITE 750 ATLANTA, GA 30346
2b	Employer Identification Number (EIN) 33-1183569
2c	Sponsor's telephone number 770-353-3800
2d	Business code (see instructions) 333100

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2010	MONTY GARRETT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2010	PATRICK WILLS
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") BENEFIT OVERSIGHT COMMITTEE OF DOOSAN INFRACORE INTERNATIONAL 400 PERIMETER CENTER TERR. STE 750 ATLANTA, GA 30346	3b Administrator's EIN 33-1183569 3c Administrator's telephone number 770-353-3800
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	1456
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	976
b Retired or separated participants receiving benefits.....	6b	140
c Other retired or separated participants entitled to future benefits.....	6c	218
d Subtotal. Add lines 6a , 6b , and 6c	6d	1334
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	40
f Total. Add lines 6d and 6e	6f	1374
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	160

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

A Name of plan <u>DOOSAN PENSION PLAN NUMBER ONE</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>DOOSAN INFRACORE INTERNATIONAL, INC</u>	D Employer Identification Number (EIN) <u>33-1183569</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>26453599</u>
b	Actuarial value 2b <u>26893173</u>
3	Funding target/participant count breakdown
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>186</u> <u>7309634</u>
b	For terminated vested participants 3b <u>190</u> <u>2453129</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>680960</u>
(2)	Vested benefits 3c(2) <u>8580507</u>
(3)	Total active 3c(3) <u>1082</u> <u>9261467</u>
d	Total 3d <u>1458</u> <u>19024230</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>8.08</u> %
6	Target normal cost 6 <u>1084558</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>10/13/2010</u>
Signature of actuary	Date
<u>ANTHONY WAGMAN</u>	<u>08-07407</u>
Type or print name of actuary	Most recent enrollment number
<u>MERCER</u>	<u>404-442-3100</u>
Firm name	Telephone number (including area code)
<u>3560 LENOX ROAD</u> <u>SUITE 2400</u> <u>ATLANTA, GA 30326</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)	3817903	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).....	3817903	0
10	Interest on item 9 using prior year's actual return of <u>4.00</u> %	152716	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>6.11</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).....	3970619	0

Part III Funding percentages			
14	Funding target attainment percentage.....	14	120.49 %
15	Adjusted funding target attainment percentage.....	15	141.36 %
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	126.09 %
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
Totals ►			18(b)	0	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 0
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 63
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

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

<div>SCHEDULE D</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div>		<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>		<div>OMB No. 1210-0110</div> <div>2009</div> <div>This Form is Open to Public Inspection.</div>	
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009					
A Name of plan DOOSAN PENSION PLAN NUMBER ONE				B Three-digit plan number (PN) ▶ 002	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 DOOSAN INFRACORE INTERNATIONAL, INC				D Employer Identification Number (EIN) 33-1183569	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: CLARK EQUIP CO PENSION MASTER TRUST					
b Name of sponsor of entity listed in (a): DOOSAN INFRACORE INTERNATIONAL					
c EIN-PN 26-3077746-004		d Entity code M		e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27007386	
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)	
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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 1	

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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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
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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 DOOSAN PENSION PLAN NUMBER ONE	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 DOOSAN INFRACORE INTERNATIONAL, INC	D Employer Identification Number (EIN) 33-1183569	

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)		
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	26450115	
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)		27007386
(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	26450115	27007386

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	26450115	27007386
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0

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)		4509033
(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		4509033

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3951762	
(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)		3951762
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		3951762

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		557271
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: DIXON HUGHES, PLLC

(2) EIN: 56-0747981

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		10000000
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.).....			
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>DOOSAN PENSION PLAN NUMBER ONE</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>DOOSAN INFRACORE INTERNATIONAL, INC</u>	D Employer Identification Number (EIN) <u>33-1183569</u>

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>26-3077746</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>59</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)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☒ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☒ Yes	☐ No	☐ N/A

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: 100%

- 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):

Independent Auditors' Report

To the Participants and Administrator of the
Doosan Pension Plan Number One

We were engaged to audit the financial statements of the Doosan Pension Plan Number One (the "Plan") as of December 31, 2009 and 2008 and for the years then ended, as listed in the accompanying index. These financial statements are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 6, which was certified by JPMorgan Chase Bank, N.A., the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2009 and 2008 and for the years then ended, that the information provided to the plan administrator by the trustee is complete and accurate.

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

Dixon Hughes PLLC

Charlotte, North Carolina
October 14, 2010

Attachments to Schedule SB Actuarial Information

Plan: Doosan Pension Plan Number One

EIN/PN: 33-1183569/002

We used and relied upon financial data submitted by the trustee without further audit. The market value of assets is the amount reported in the year end trustee statement plus receivable contributions. We have also used and relied on participant data supplied by the plan sponsor; these data would customarily not be verified by a plan's actuary. We have reviewed the participant data for internal consistency and reasonableness and have no reason to doubt its substantial accuracy. Finally, we have also used and relied upon the plan documents, including amendments, as supplied by the plan sponsor. The plan sponsor is solely responsible for the validity and completeness of this information.

The following separate exhibits are attached:

- Schedule SB, Line 22 – Description of weighted average retirement age
- Schedule SB, Part V – Statement of actuarial assumptions/methods
- Schedule SB, Part V – Summary of plan provisions
- Schedule SB, Line 25 – Change in method
- Schedule SB, Line 26 – Schedule of active participant data

Schedule SB, Line 22 – Description of weighted average retirement age

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement is shown below. The average retirement age is 63.

(A)	(B)	(C)	(D)	(E)
Retirement Age	Percent Retiring	Remaining Active	Number of Employees Expected to Retire	(A) X (D)
55	2.00%	1,000	20	1,100
56	2.04%	980	19	1,120
57	2.08%	960	19	1,140
58	2.13%	940	20	1,160
59	2.17%	920	19	1,180
60	0.00%	900	0	0
61	0.00%	900	0	0
62	44.44%	900	400	24,800
63	10.00%	500	50	3,150
64	11.11%	450	50	3,200
65	100.00%	400	400	26,000
Average				63

Schedule SB, Part V – Statement of actuarial assumptions/methods

Actuarial methods

Asset methods – effective January 1, 2009

We used financial data submitted by the trustee as of the valuation date without further audit. Customarily, this information would not be verified by a plan's actuary. We have reviewed the information for internal consistency and we have no reason to doubt its substantial accuracy.

The asset valuation method is an annual average of the adjusted market value over the last 24 months preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110 percent and no less than 90 percent of the fair market value, as defined in IRC Section 430.

Participant methods – effective January 1, 2008

We used the participant data supplied by the plan sponsor. We have reviewed the data and have no reason to doubt its substantial accuracy. Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does not have any insurance contracts.
- **Estimated benefits:** Unavailable deferred vested benefit amounts for participants that terminated during the plan year prior to the valuation date are estimated. For the 2008 plan year, there were 90 such participants.
- **Estimated compensation:** Unavailable compensation amounts for participants hired during the plan year prior to the valuation date are estimated. For the 2008 plan year, there were 151 such participants. Unavailable compensation amounts for participants that were hired in previous years but first reported as participating in the plan at the valuation date are also estimated. There were 12 such participants included in this valuation.

Schedule SB, Part V – Statement of actuarial assumptions/methods

Actuarial methods (continued)

Valuation of lump sums based on Section 417(e) assumptions:

- Annuity substitution for lump sums determined by 417(e) minimum
- No recognition of future mortality table updates
- No recognition of future changes to the phase-out of the 30-year Treasury interest rate basis

Minimum funding method

Target liability for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- An individual's **accrued liability** is the present value of benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **normal cost** is the present value of the benefit deemed to accrue in the plan year. If multiple decrements are used, the accrued liability and the normal cost for an individual are the sum of the component accrued liabilities and normal costs associated with the various anticipated separation dates.
- The plan's **target normal cost** is the sum of the individual normal costs, and the plan's **funding target liability** is the sum of the accrued liabilities for all participants under the plan.

Maximum deductible contribution method

Calculations of maximum deductible contributions include the excess of the accrued liability computed using the projected unit credit method over the minimum funding target liability. The objective of the projected unit credit method is to fund each participant's benefits under the plan as they accrue, taking into consideration future compensation increases. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- An individual's **projected accrued liability** is the present value of benefits based on credited service as of the beginning of the plan year and projected compensation that would be used in the calculation of the benefit on each expected separation date. If multiple decrements are used, the accrued liability for an individual is the sum of the component accrued liabilities associated with the various anticipated separation dates.

The plan's **projected funding target liability** is the sum of the projected accrued liabilities for all participants under the plan.

Schedule SB, Part V -- Statement of actuarial assumptions/methods

Actuarial assumptions

Discount rate elections¹		Full yield curve as of November 1, 2008
▪ Funding		
Mortality elections		
▪ Healthy participants		2009 PPA separate annuitant and non-annuitant mortality tables.
▪ Disabled participants		Same as healthy participants.
417(e) lump sums		
▪ Annuity substitution		Yes, when lump sums determined by 417(e) minimum
▪ Generational mortality option		No
▪ Phase-in option		No
Economic assumptions		
▪ Salary increases		4.50% per year.
▪ Flat-dollar benefit increases		Not applicable.
▪ Social Security wage base		Not applicable.
▪ Expected investment return		7.50%
▪ Expenses		PBGC premiums added to normal cost.
Demographic assumptions		
Withdrawal		See table of sample rates.
Disability incidence		See table of sample rates.
Retirement age	Attained age	Percentage
	Under 55	0.00%
	55	2.00%
	56	2.04%
	57	2.08%
	58	2.13%
	59	2.17%
	60	0.00%
	61	0.00%
	62	44.44%
	63	10.00%
	64	11.11%
	65 and above	100.00%

¹ Based on interest rate methodology elections described below in Appendix C.

Schedule SB, Part V – Statement of actuarial assumptions/methods

Actuarial assumptions

Benefit commencement age for:			
▪ Future vested deferred	65		
▪ Current vested deferred	65		
Spouse assumptions	<u>Male participants</u>	<u>Female participants</u>	
▪ Percentage married	85%	55%	
▪ Spouse age difference	3 years younger	3 years older	
Form of payment	<u>Lump sum</u>	<u>Single life annuity</u>	
▪ Active retirements	67%	33%	
▪ Future vested deferred	67%	33%	
▪ Future disabilities	67%	33%	
▪ Future deaths	100%	0%	
▪ Current vested deferred	0%	100%	
Benefit increases	No projected pay or projected scheduled benefit increases have been assumed for minimum funding purposes. Salary increases are projected for maximum deductible purposes.		
Changes since prior valuation	Mortality rates were updated from 2008 to 2009 in accordance with PPA and sponsor elections.		
	The sponsor elected to change the interest discount assumption from segment rates with no lookback to full yield curve with 2-month lookback.		
	PBGC premiums were added to the 2009 normal cost. PBGC premiums are the only administrative expense paid from the trust.		
	There were no other changes in actuarial assumptions since the last actuarial valuation as of January 1, 2008.		

Schedule SB, Part V – Statement of actuarial assumptions/methods

Actuarial assumptions

Table of sample rates

Attained age	Percentage	
	Ultimate withdrawal*	Disability incidence
20	14.87%	0.030%
25	9.89%	0.043%
30	6.89%	0.064%
35	4.86%	0.098%
40	2.79%	0.158%
45	1.66%	0.259%
50	0.44%	0.448%
55	0.00%	0.845%
60	0.00%	1.204%

* The rates of withdrawal used for the first three years of service are 30%, 25% and 20%, respectively. Thereafter, the rates vary by age, as shown above.

Schedule SB, Part V – Summary of plan provisions

Following is a summary of the major plan provisions used to determine the plan's financial position. It should not be used in determining plan benefits.

Effective date and plan year	The effective date of the Plan is December 2007. The Plan year is the calendar year.
Definitions	
▪ Eligibility	Employees not covered by another retirement plan of the Company and not covered by a collective bargaining agreement
▪ Service considered	<u>Vesting Service</u> : Year or partial year of vesting service provided after completion of requisite employment relationship. <u>Credited Service (CS)</u> : Year or partial year of service as an Employee.
▪ Vesting	5 years of Vesting Service
▪ Compensation considered	Includes: Salary, commissions, bonus, regular pay and tax exempt reductions Excludes: Severance pay, termination, pay for unused vacation, patent awards, deferred compensation and other Executive Awards
▪ Final Average Earnings (FAE)	Highest 5 consecutive years of Pensionable Earnings out of the last 10, expressed as a monthly rate.
Normal retirement	
▪ Eligibility	Age as of the first day of the month following the later of attainment of age 65.

Schedule SB, Part V -- Summary of plan provisions

▪ Benefit	<u>Active after January 1, 2003:</u> Greater of (i) + (ii) + (iii) and (iv):
	(i) December 31, 2002 monthly accrued benefit
	(ii) 0.5% of FAE times CS since December 31, 2002
	(iii) 0.5% of FAE in excess of \$30,000 times CS since December 31, 2002, for active employees that were age 50 and whose age plus service exceeded 60 on January 1, 2003
	(iv) 0.5% of FAE times CS
	<u>Active prior to January 1, 2003:</u> December 31, 1994 frozen accrued benefit plus future annual service accrual of 1/12th of (i) plus (ii):
	(i) ¾% of compensation up to integration level
	(ii) 1½% of compensation in excess of integration level
	The integration level equals two-thirds of the Social Security Taxable Wage Base.
	The frozen accrued benefit as of December 31, 1994 is equal to 1/12th of (i) plus (ii), both multiplied by (iii):
	(i) ¾% of seven year average pay up to \$24,312
	(ii) 1½% of seven year average pay in excess of \$24,312
	(iii) years of credited service prior to December 31, 1994
Early retirement	
▪ Eligibility	<u>Active after January 1, 2003:</u> Upon separation if vested. <u>Active prior to January 1, 2003:</u> Age as of the first day of the month following attainment of age 55 and completion of 15 years of Credited Service.

Schedule SB, Part V – Summary of plan provisions

▪ Benefit	<u>Active after January 1, 2003:</u> Normal retirement benefit reduced by 0.3% for each whole calendar month that the commencement date precedes Normal retirement date, but the reduction cannot exceed 85%. <u>Active prior to January 1, 2003:</u> Normal retirement benefit reduced by 0.3% for each whole calendar month that the commencement date precedes Normal retirement date.
Late retirement	
▪ Eligibility	First of any month after the participant's Normal Retirement Date.
▪ Benefit	Same as normal retirement.
Deferred vested	
▪ Eligibility	Termination for reasons other than death or retirement after completing 5 years of service.
▪ Benefit	<u>Active after January 1, 2003:</u> Same as normal and early retirement benefits. <u>Active prior to January 1, 2003:</u> For employees with 15 years of Vesting Service, Normal retirement benefit reduced by 0.694% per month for the first 60 months and 0.347% per month thereafter for commencement prior to Normal retirement date. Payment cannot commence prior to age 55.
Disability	
▪ Eligibility	Employees with at least 15 years of Vesting Service becoming totally and permanently disabled for a period of 6 months or longer prior to January 1, 2004
▪ Benefit	Normal retirement benefit as of disability retirement date.
Pre-retirement death	
▪ Eligibility	Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.

Schedule SB, Part V – Summary of plan provisions

▪ Benefit	<p><u>Active after January 1, 2003:</u> One-half of Normal retirement benefit calculated as if participant separated from service and elected lump sum benefit (in the case of non-spouse beneficiaries) or a single life annuity (in the case of spousal beneficiaries) immediately prior to death.</p> <p><u>Active prior to January 1, 2003:</u> For employees who prior to August 23, 1984 had (i) reached age 55 with 10 years of service, or (ii) reached age 50 with 20 years of service, or (iii) completed 25 years of service, surviving spouses receive one-half of the single life annuity otherwise payable the first day of the month following death; the benefit is reduced 0.3% per month for commencement prior to age 65, but the reduction will not exceed 50%.</p> <p>For other employees, the QJSA is paid.</p> <p>For terminated vested employees, the benefit is reduced by 1½% for each year the surviving spouse is covered by the death benefit, but the reduction cannot exceed 10%.</p>
Form of benefits	
▪ Automatic form for unmarried participants	<p><u>Active after January 1, 2003:</u> Normal form is a Single Life Annuity, which also provides 120 guaranteed monthly payments for single participants.</p> <p><u>Active prior to January 1, 2003:</u> The normal form is a single life annuity for single participants.</p>
▪ Automatic form for married participants	A 50% joint and survivor annuity
▪ Optional forms	<p>Optional forms include 75% and 100% contingent annuities, a 15-year certain and continuous annuity, a social security level income annuity, and unlimited lump sums (lump sums are limited to \$10,000 for participants that terminated prior to January 1, 2003).</p>
Miscellaneous	
▪ Maximum compensation	<p>Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. For 2008 compensation, the limit is \$230,000.</p>

Schedule SB, Part V – Summary of plan provisions

▪ Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2009, the limit is \$195,000.
▪ Changes since the prior valuation	The IRC Section 415(b)(1)(a) defined benefit annual pension limit was increased from \$185,000 to \$195,000 for benefits commencing in 2009. The Code Section 401(a)(17) salary limit increased from \$225,000 to \$230,000 for purposes of limiting 2008 compensation.

Benefits included or excluded – effective January 1, 2008

Unless noted below, all benefits provided by the plan are included in this valuation.

- **Plan amendments:** Amendments adopted after the valuation date or effective after the current plan year are excluded from the valuation.
- **Late retirement increases:**
 - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement; therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70 ½. This valuation includes increases for current participants over age 70.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued including the late retirement actuarial increase.
- **Shutdown benefits:** We are not aware of any corporate actions that would create shutdown benefits; therefore, they are excluded.
- **IRC Section 415(b):** The limitations of Internal Revenue Code Section 415(b) have been incorporated into our calculations.
- **Benefit restrictions:** Benefit restrictions (if applicable) are ignored in this valuation.

Significant events

To the best of our knowledge, no events occurred during the year that would significantly affect the valuation results.

Schedule SB, Line 25 – Change in method

Method changes since prior valuation

Beginning with the 2009 valuation, expected expenses were added to the normal cost and the asset method was changed from market value to adjusted market value. The funding interest rate was changed from segment rates with no lookback and no phase-in to the full yield curve with a 2 month lookback.

Schedule SB, Line 26 – Schedule of active participant data

	Active participant as of January 1, 2009										
Age	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	Total
< 25	30 39,164	29 40,079									59 39,614
25 - 29	22 39,358	122 52,994	36 59,636								180 52,655
30 - 34	21 40,783	88 59,920	75 69,541	26 98,390							210 66,025
35 - 39	28 40,000	76 68,267	47 77,985	19 **	4 **						174 70,075
40 - 44	15 **	58 66,870	42 103,007	10 **	8 **	2 **					135 82,392
45 - 49	18 **	31 83,200	39 72,743	10 **	6 **	6 **	2 **	1 **			113 72,667
50 - 54	11 **	31 86,248	15 **	9 **	3 **	5 **	2 **	5 **	3 **		84 83,197
55 - 59	7 **	18 **	15 **	8 **	5 **	1 **	4 **	5 **	13 **	4 **	80 84,892
60 - 64	5 **	9 **	8 **	1 **	1 **	2 **	2 **	2 **	6 **	3 **	39 66,619
65 - 69		2 **	3 **						1 **		6 **
70+			1 **							1 **	2 **
TOTAL	157 40,909	464 62,449	281 77,877	83 98,763	27 88,008	16 **	10 **	13 **	23 91,706	8 **	1,082 68,477

In each cell, the number is the count of active participants for each age/service combination and the bottom number is average pay for 2008 limited to \$230,000. Average pay is not shown for cells with fewer than 20 participants.

Doosan Pension Plan Number One

**Financial Statements
December 31, 2009 and 2008**

Doosan Pension Plan Number One

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Note: Schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have not been presented because the Doosan Pension Plan Number One's only investment is in the Clark Equipment Company Pension Master Trust ("Master Trust").	

Doosan Pension Plan Number One
Statements of Net Assets Available for Benefits
December 31, 2009 and 2008

	2009	2008
Assets		
Plan's interest in Master Trust investments, at fair value (Note 6)	\$ 27,007,386	\$ -
Receivable from Ingersoll-Rand plc (Note 1)	<u>-</u>	<u>26,450,115</u>
Net assets available for benefits	<u>\$ 27,007,386</u>	<u>\$ 26,450,115</u>

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

Doosan Pension Plan Number One
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2009 and 2008

	2009	2008
Additions to net assets attributable to:		
Investment Income:		
Plan's interest in income of the		
Master Trust (Note 6)	\$ 4,509,033	\$ 1,041,795
Contributions:		
Employer	<u>-</u>	<u>1,112</u>
Total additions	4,509,033	1,042,907
Deductions from net assets attributable to:		
Benefit payments to pensioners and beneficiaries	<u>3,951,762</u>	<u>1,562,917</u>
Net increase (decrease)	557,271	(520,010)
Net assets available for benefits		
Beginning of year	<u>26,450,115</u>	<u>26,970,125</u>
End of year	<u>\$ 27,007,386</u>	<u>\$ 26,450,115</u>

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

Doosan Pension Plan Number One
Statement of Accumulated Plan Benefits
December 31, 2008*

Actuarial present value of accumulated plan benefits (Note 2)

Vested benefits

Participants currently receiving payments	\$ 7,356,093
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Other participants	10,379,252
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Total vested benefits	17,735,345
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Nonvested benefits	687,142
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Total actuarial present value of accumulated plan benefits	\$ 18,422,487
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*Based on the latest actuarial valuation at January 1, 2009.

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

Doosan Pension Plan Number One
Statement of Changes in Accumulated Plan Benefits
Year Ended December 31, 2008*

Actuarial present value of accumulated plan benefits at January 1, 2008	\$	18,351,567
Increase (decrease) during the year attributable to:		
Increase for interest due to a decrease in the discount period		1,317,716
Benefits accumulated		1,699,876
Change in actuarial assumptions		(1,383,755)
Benefits paid		<u>(1,562,917)</u>
Net increase during the year		<u>70,920</u>
Actuarial present value of accumulated plan benefits at December 31, 2008	\$	<u>18,422,487</u>

*Based on the latest actuarial valuation at January 1, 2009.

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

Doosan Pension Plan Number One

Notes to Financial Statements

December 31, 2009 and 2008

1. Description of the Plan

The following brief description of the Doosan Pension Plan Number One (the “Plan”) is provided for general information purposes. Participants should refer to the Plan document for complete information.

History

On November 30, 2007, Doosan Infracore International, Inc. (the “Company”) purchased from Ingersoll-Rand plc (“IR”) its Bobcat, Utility Equipment, and Attachment businesses. As defined in the purchase agreement, employees and former employees of these IR businesses became employees and former employees of the Company, and the related pension assets and liabilities for these individuals were to be transferred to the Plan. There was a delay between the purchase date and the date the transfer of assets occurred which was not settled until June 2009, at which time approximately \$25 million was transferred into the Plan. Before settlement, the Plan earned interest on the amount it was owed and benefits were paid by IR on behalf of the Plan. No participant was affected by this dispute between IR and the Company.

General

The Plan is a defined benefit plan covering United States employees of most U.S. subsidiary companies of the Company not covered by other defined benefit pension plans. Participation in the Plan begins at the date of employment. As of January 1, 2010, new hires of the Company are no longer eligible to participate in the plan, except for certain hired employees who were previously eligible to participate in the Clark Equipment Company Melroe Division, Bismarck, North Dakota Plan and Hourly-Rate Employees’ Pension Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Pension Benefits

The normal retirement age is 65 with 5 years of vested service, subject to variations for specific subsidiaries. The monthly pension benefit is based on annual compensation, years of credited service, and Social Security benefit. Variations of this formula apply to employees of specific subsidiaries of the Company. Participants are eligible for early retirement at age 55 having completed 15 years of service, subject to variations for specific subsidiaries. Employees electing early retirement receive reduced pension benefits based on the difference between the normal retirement date and the date when pension payments begin. Variation of reduction in benefit payments is dependent on subsidiaries. Employees who become totally and permanently disabled with 15 years of credited service are also eligible for a disability benefit, the calculation of which is subject to variations for specific subsidiaries. The Plan also provides for surviving spousal benefits, in accordance with provisions of the Plan.

Doosan Pension Plan Number One

Notes to Financial Statements

December 31, 2009 and 2008

2. Summary of Significant Accounting Policies

Basis of Accounting

The Plan's financial statements are prepared on the accrual basis of accounting.

Investment Valuation and Income Recognition

The fair value of the Plan's interest in the Clark Equipment Company Pension Trust (the "Master Trust") is based on the beginning of the year value of the Plan's interest in the Master Trust plus actual contributions and allocated investment income or loss, less actual distributions and allocated administrative expenses.

The Master Trust records purchases and sales of securities on a trade date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. Net appreciation/depreciation includes the Plan's proportionate share of the Master Trust's gains and losses on investments bought and sold as well as held during the year.

Expenses

Substantially all expenses of the Plan are paid by the Master Trust and are allocated to the Plan as a reduction to its interest in the earnings of the Master Trust.

Benefit Payments

Benefit payments are recorded when paid.

Actuarial Matters

Accumulated plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries, beneficiaries of employees who have died and present employees or their beneficiaries. Benefits under the Plan are based on employees' highest compensation during their credited service and other factors of credited service in accordance with the terms of the plan document. The accumulated plan benefits for active employees are based on this formula for the five years ending on the date as of which the benefit information is presented (the valuation date). Benefits payable under all circumstances are included to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits at January 1, 2009 and 2008 was determined by the consulting actuary. The actuarial present value 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, withdrawal, or retirement) between the valuation date and the expected date of payment.

Doosan Pension Plan Number One

Notes to Financial Statements

December 31, 2009 and 2008

2. Summary of Significant Accounting Policies (Continued)

The significant actuarial assumptions used in the valuation at January 1, 2009 and 2008 were as follows:

Valuation method	– Projected Unit Credit Method
Life expectancy	– RP-2000 Combined Healthy Mortality Table
Discount rate	– 8.11% for 2009 – 7.5% for 2008
Expected retirement age for active participants	– Various ages from 55 to 65 in 2009 62.9 in 2008

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

Use of Estimates

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

Subsequent Events

The Plan has evaluated subsequent events through October 14, 2010, the date the financial statements were available to be issued.

3. Fair Value Measurements

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

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2 Inputs to the valuation methodology include:
- Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices that are observable for the asset or liability;
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Doosan Pension Plan Number One

Notes to Financial Statements

December 31, 2009 and 2008

3. Fair Value Measurements (Continued)

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

At December 31, 2009 and 2008, all of the Plan's investments are held in the Master Trust. The assets in the Master Trust are recorded at fair value.

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

Common and preferred stock: Valued at the closing price reported on the active market on which the individual securities are traded. These investments are classified as Level 1.

Commingled funds: Valued at the current unit value of the fund at the end of the year as determined by the administrator of the fund. The current unit value is the value of the fund assets based on the closing prices on an active market less fund liabilities divided by the number of shares outstanding. The current unit value is a reasonable exit price, but it is not quoted in an active market. These investments are classified as Level 2.

Short-term investment fund: The fund invests in various high quality short-term debt securities, some of which may not have a quoted market price. The fund manager has valued the fund with a \$1 unit price. These investments are classified as Level 2.

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

Doosan Pension Plan Number One

Notes to Financial Statements

December 31, 2009 and 2008

3. Fair Value Measurements (Continued)

The following table sets forth by level, within the fair value hierarchy, the Master Trust's underlying investments at fair value as of December 31, 2009 and 2008:

Investments at Fair Value as of December 31, 2009

	Level 1	Level 2	Level 3	Total
Commingled funds:				
Fixed income	\$ -	\$ 238,181,482	\$ -	\$ 238,181,482
International equity	-	26,657,925	-	26,657,925
US large cap	-	38,591,191	-	38,591,191
US mid cap	-	10,258,219	-	10,258,219
Short-term investment fund	-	967,753	-	967,753
Common stock and preferred stock	<u>1,462</u>	<u>-</u>	<u>-</u>	<u>1,462</u>
Total	<u>\$ 1,462</u>	<u>\$ 314,656,570</u>	<u>\$ -</u>	<u>\$ 314,658,032</u>

Investments at Fair Value as of December 31, 2008

	Level 1	Level 2	Level 3	Total
Commingled funds	\$ -	\$ 95,865,967	\$ -	\$ 95,865,967
Short-term investment fund	-	1,476,140	-	1,476,140
Common stock and preferred stock	<u>1,615</u>	<u>-</u>	<u>-</u>	<u>1,615</u>
Total	<u>\$ 1,615</u>	<u>\$ 97,342,107</u>	<u>\$ -</u>	<u>\$ 97,343,722</u>

4. Funding Policy

It is the Company's policy to make annual contributions to the Plan in amounts ranging from the minimum necessary to satisfy the funding requirements of ERISA to the maximum tax deductible contributions allowed by the Internal Revenue Code. In accordance with ERISA, minimum funding requirements have been met for the periods presented.

5. Plan Termination

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event the Plan is terminated, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations.

Certain benefits under the plan are insured by the Pension Benefit Guaranty Corporation ("PBGC") if the Plan is terminated. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's benefits. However, the PBGC does not guarantee all types of benefits and the amount of benefit protection is subject to certain limitations.

Doosan Pension Plan Number One
Notes to Financial Statements
December 31, 2009 and 2008

5. Plan Termination (Continued)

Whether all participants receive their benefits should the Plan be terminated will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

6. Investment in Master Trust

At December 31, 2009 and 2008, the assets of several of the Company's separate defined benefit pension plans are included in the Master Trust, for which the Trustee is JPMorgan Chase Bank N.A. (the "Trustee"). The Trustee maintains separate accounting of all contributions, benefit payments and expenses and allocates income received by the Master Trust on the basis of the adjusted value of each plan at year end. Each pension plan has an undivided interest in the assets of the Master Trust except for the receivable from Ingersoll-Rand plc, in which two pension plans each have a specific interest. At December 31, 2009 and 2008, the Plan's interest in the Master Trust was approximately 8.58% and 9.19%, respectively.

The following investments and receivables and the net appreciation (depreciation) in fair value of investments, interest, and dividend income are certified by the Trustee to be complete and accurate. The Trustee has also certified the Plan's proportionate share of such items to be complete and accurate. The Master Trust's financial statements are prepared on the modified cash basis of accounting while the Plan's financial statements are prepared on the accrual basis of accounting.

Assets held by the Master Trust as of December 31 were as follows:

	2009	2008
Investments, at fair value		
Common stock and preferred stock	\$ 1,462	\$ 1,615
Commingled funds	313,688,817	95,865,967
Short term investment fund	967,753	1,476,140
Total investments	<u>314,658,032</u>	<u>97,343,722</u>
Receivables		
Receivable from Ingersoll-Rand plc	-	190,486,477
Other receivables	51,419	43,391
Total receivables	<u>51,419</u>	<u>190,529,868</u>
Total assets	<u>314,709,451</u>	<u>287,873,590</u>
 Net assets available for benefits	 <u>\$ 314,709,451</u>	 <u>\$ 287,873,590</u>

Doosan Pension Plan Number One
Notes to Financial Statements
December 31, 2009 and 2008

6. Investment in Master Trust (Continued)

Net investment income (loss) for the Master Trust for the years ended December 31 was as follows:

	2009	2008
Investment income (loss):		
Net appreciation (depreciation) in fair value of investments		
U.S government agency securities	\$ -	\$ (70,819)
Corporate bonds and notes	-	(374,454)
Commingled funds	41,491,793	(31,675,905)
Common and preferred stocks	(152)	(2,192,602)
Other investments	-	(40,579)
	<u>41,491,641</u>	<u>(34,354,359)</u>
Interest and dividend income	<u>2,197,546</u>	<u>9,531,917</u>
Total investment income (loss)	<u><u>\$ 43,689,187</u></u>	<u><u>\$ (24,822,442)</u></u>

7. Party-in-interest Transactions

Through the Master Trust, certain investments are managed by JPMorgan Chase Bank N.A. JPMorgan Chase Bank N.A. is the Trustee as defined by the Plan and, therefore, these transactions are party-in-interest transactions, but are not deemed prohibited transactions. Through the Master Trust certain investments are managed by Mercer Global Investments, Inc. ("MGI"). MGI is related to the Plan's actuary, Mercer, by common ownership, therefore these transactions are party-in-interest transactions but are not deemed prohibited transactions.

8. Tax Status

The Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (the "IRC"). The Plan will apply for a determination letter according to the schedule published by the Internal Revenue Service. The Company believes that the Plan is being operated in compliance with the applicable requirements of the IRC.

9. Risks and Uncertainties

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

Doosan Pension Plan Number One
Notes to Financial Statements
December 31, 2009 and 2008

9. Risks and Uncertainties (Continued)

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

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 _____ and ending _____

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

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

A Name of plan Doosan Pension Plan Number One	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Doosan Infracore International Inc.	D Employer Identification Number (EIN) 33-1183569
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>1</u> Day <u>1</u> Year <u>2009</u>			
2	Assets:			
a	Market value.....	2a	26,453,599	
b	Actuarial value.....	2b	26,893,173	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Funding Target	
a	For retired participants and beneficiaries receiving payment	3a	186	7,309,634
b	For terminated vested participants	3b	190	2,453,129
c	For active participants:			
	(1) Non-vested benefits.....	3c(1)		680,960
	(2) Vested benefits	3c(2)		8,580,507
	(3) Total active	3c(3)	1,082	9,261,467
d	Total.....	3d	1,458	19,024,230
4	If the plan is at-risk, check the box and complete items (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	8.08 %	
6	Target normal cost.....	6	1,084,558	

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>Anthony Wagman</u> Signature of actuary	<u>APW</u>	<u>10/13/10</u> Date
Anthony Wagman		08-07407	
Type or print name of actuary		Most recent enrollment number	
Mercer		(404) 442-3100	
Firm name		Telephone number (including area code)	
3560 Lenox Road			
Suite 2400			
Atlanta GA 30326			
Address of the firm			

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

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

Schedule SB (Form 5500) 2009
v.092308.1

Part II	Beginning of year carryover and prefunding balances	
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	3,817,903	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)	3,817,903	0
10 Interest on item 9 using prior year's actual return of <u>4.00</u> %	152,716	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>6.11</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)	3,970,619	0

Part III	Funding percentages	
14 Funding target attainment percentage	14	120.49 %
15 Adjusted funding target attainment percentage	15	141.36 %
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	126.09 %
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
Totals ►			18(b)	0	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	0
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 63
23 Mortality table(s) (see instructions)	☐ Prescribed - combined	☒ Prescribed - separate	☐ Substitute
Part VI Miscellaneous items			
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No			
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No			
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment.....	27		
Part VII Reconciliation of unpaid minimum required contributions for prior years			
28 Unpaid minimum required contribution for all prior years	28		0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (item 19a).....	29		0
30 Remaining amount of unpaid minimum required contributions (item 28 minus item 29).....	30		0
Part VIII Minimum required contribution for current year			
31 Target normal cost, adjusted, if applicable (see instructions).....	31		0
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	0		0
b Waiver amortization installment	0		0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33).....	34		0
	Carryover balance	Prefunding balance	Total balance
35 Balances used to offset funding requirement	0	0	0
36 Additional cash requirement (item 34 minus item 35).....	36		0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37		0
38 Interest-adjusted excess contributions for current year (see instructions).....	38		0
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39		0
40 Unpaid minimum required contribution for all years	40		0