

<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>☐ a multiemployer plan;</div> <div>☒ a single-employer plan;</div> <div>☐ a multiple-employer plan; or</div> <div>☐ a DFE (specify) ____</div>
B This return/report is:	<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>
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	<div>☒ Form 5558;</div> <div>☐ automatic extension;</div> <div>☐ the DFVC program;</div> <div>☐ special extension (enter description)</div>

Part II	Basic Plan Information—enter all requested information	
1a Name of plan	1b Three-digit plan number (PN) ▶	001
TGH-US, INC 401(K) PLAN	1c Effective date of plan	02/01/2007
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)	2b Employer Identification Number (EIN)	02-0797615
TGH-US, INC.	2c Sponsor's telephone number	713-329-8720
10642 W. LITTLE YORK 100 HOUSTON, TX 77041	2d Business code (see instructions)	339900
10642 W. LITTLE YORK 100 HOUSTON, TX 77041		

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.	11/02/2010	NAOMI J HARDY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")

TGH-US, INC.

10642 W. LITTLE YORK
100
HOUSTON, TX 77041**3b** Administrator's EIN

02-0797615

3c Administrator's telephone number

713-329-8720

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**

201

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**

112

b Retired or separated participants receiving benefits.....**6b**

1

c Other retired or separated participants entitled to future benefits.....**6c**

44

d Subtotal. Add lines **6a**, **6b**, and **6c**.....**6d**

157

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....**6e**

0

f Total. Add lines **6d** and **6e**.....**6f**

157

g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....**6g**

117

h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....**6h**

2

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

2F 2G 2J 2K 2T 3D 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

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)**a Pension Schedules**(1) ☒**R** (Retirement Plan Information)(2) ☐**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary(3) ☐**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary**b General Schedules**(1) ☒**H** (Financial Information)(2) ☐**I** (Financial Information - Small Plan)(3) ☐**A** (Insurance Information)(4) ☒**C** (Service Provider Information)(5) ☒**D** (DFE/Participating Plan Information)(6) ☐**G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2009
		This Form is Open to Public Inspection.
For calendar plan year 2009 or fiscal plan year beginning 01/01/2009 and ending 12/31/2009		
A Name of plan TGH-US, INC 401(K) PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TGH-US, INC.		D Employer Identification Number (EIN) 02-0797615

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
FID.INV.INST.OPS.CO.
04-2647786

(b) Enter name and EIN or address of person who provided you disclosure 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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
64 37 65 60	RECORDKEEPER	4445	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 ☐

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ARTISAN MID CAP INV - BOSTON FINANC 04-2526037	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BARON GROWTH - DST SYSTEMS, INC. 43-1581814	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PIMCO TOT RETURN ADM - BOSTON FINAN 04-2526037	0.25%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ROYCE LOW PR STK SER - BOSTON FINAN 04-2526037	0.45%	
(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:	PROCTOR CROOK AND CROWDER CPAS	b EIN:	59-1556056
c Position:	AUDITOR		
d Address:	33 FLAGLER AVENUE STUART, FL 34994	e Telephone:	772-283-2356

Explanation: WANTED TO HAVE MORE LOCALIZED FIRM.

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:

<div>SCHEDULE D (Form 5500) <div>Department of the Treasury Internal Revenue Service</div><div>Department of Labor Employee Benefits Security Administration</div></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 TGH-US, INC 401(K) PLAN				B Three-digit plan number (PN) ▶ 001	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 TGH-US, INC.				D Employer Identification Number (EIN) 02-0797615	
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: FID MGD INC PORT					
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY					
c EIN-PN 04-3022712-024		d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 883032		
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
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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
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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
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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
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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
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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 TGH-US, INC 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 TGH-US, INC.	D Employer Identification Number (EIN) 02-0797615	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	37609	28418
(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)	217102	177391
(9) Value of interest in common/collective trusts.....	1c(9)	826982	883032
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	5680692	6866188
(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	6762385	7955029

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	6762385	7955029
---	-----------	---------	---------

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) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	432637	
(B) Participants	2a(1)(B)	603895	
(C) Others (including rollovers)	2a(1)(C)	5407	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1041939
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)	15781	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		15781
(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)	148229	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		148229
(3) Rents	2b(3)		
(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)		

		(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)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		42688
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		1565584
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2814221

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1617111	
(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)		1617111
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)	4466	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		4466
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1621577

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1192644
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: UHY LLP

(2) EIN: 20-0694403

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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)

5b(3) PN(s)

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>TGH-US, INC 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TGH-US, INC.</u>	D Employer Identification Number (EIN) <u>02-0797615</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>04-6568107</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	

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

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

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

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

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

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

TGH-US, INC. 401(k) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2009 AND 2008

TGH-US, INC. 401(k) PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

C O N T E N T S

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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	12

All other schedules required by the Employee Retirement Income Security Act of 1974 are not applicable and have been omitted.

Independent Auditors' Report

To the Participants and Plan Administrator of the
TGH-US, Inc. 401(k) Plan
Houston, Texas

We were engaged to audit the financial statements and supplemental schedule of TGH-US, Inc. 401(k) Plan (the "Plan") as of December 31, 2009, and for the year then ended, as listed in the accompanying index. These financial statements and schedule are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2008 were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Management Trust Company, the trustee of the Plan. Their report, dated July 23, 2009, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 C, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the 2009 financial statements and supplemental schedule. 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 and for the year ended December 31, 2009, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2009 financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2009 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the 2009 financial statements and supplemental schedule, 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.

UHY LLP

Houston, Texas
September 8, 2010

TGH-US, INC. 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2009	2008
ASSETS		
INVESTMENTS, at fair value		
Mutual funds	\$ 6,866,188	\$ 5,680,691
Guaranteed investment contract	883,032	826,983
Participant loans	177,391	217,102
TOTAL INVESTMENTS	7,926,611	6,724,776
RECEIVABLES		
Employer	28,418	37,609
TOTAL RECEIVABLES	28,418	37,609
NET ASSETS REFLECTING INVESTMENTS AT FAIR VALUE	7,955,029	6,762,385
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS	16,420	44,609
NET ASSETS AVAILABLE FOR BENEFITS	\$ 7,971,449	\$ 6,806,994

See notes to financial statements.

TGH-US, INC. 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2009

ADDITIONS TO NET ASSETS

INVESTMENT INCOME

Net appreciation in fair value of investments	\$ 1,580,083
Dividend income from mutual funds	148,229
Interest from participant loans	15,781
TOTAL INVESTMENT INCOME	<u>1,744,093</u>

CONTRIBUTIONS

Employee	603,895
Employer	432,637
Rollovers	5,407
TOTAL CONTRIBUTIONS	<u>1,041,939</u>

TOTAL ADDITIONS TO NET ASSETS	2,786,032
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DEDUCTIONS FROM NET ASSETS

Benefits paid to participants	1,617,111
Administrative expenses	4,466
TOTAL DEDUCTIONS FROM NET ASSETS	<u>1,621,577</u>

NET INCREASE	1,164,455
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NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	<u>6,806,994</u>
End of year	<u><u>\$ 7,971,449</u></u>

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE A - DESCRIPTION OF PLAN

The following description of the TGH-US, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of TGH-US, Inc. (the "Company") and its affiliates (collectively referred to as the "Employer") who have three months of service and are age 18 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and Sections 401(a) and 501(a) of the Internal Revenue Code ("IRC"), as amended.

Administration of the Plan: The trustee and recordkeeper for the Plan's participant directed assets is Fidelity Management Trust Company (the "Trustee" or "Fidelity").

Contributions: Participants may elect to make pretax contributions to the Plan in an amount up to 60% of their eligible annual compensation. Participant contributions were limited to \$16,500 for 2009. This limitation is adjusted periodically to reflect cost-of-living increase as prescribed by the Internal Revenue Service ("IRS"). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions (\$5,500 for 2009). Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

The Employer contributes a non-discretionary matching contribution of 100% of a participant's pretax contributions, up to 6% of the participant's eligible compensation.

Participant Accounts: Each participant's account is credited with the participant's contribution and allocations of the Employer's contribution and plan earnings, and, at times, charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan Agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Employer's contribution portion of their accounts is based on years of continuous service. Participants vest 20% after two years of service and 20% for each following year. They are 100% vested after six years of credited service.

Investments: Each participant directs the investment of their account into any of the available investment options offered by the Plan.

Loans to Participants: Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Loan terms range from one to five years or up to ten years for the purchase of a primary residence. Loan repayments are deducted from the participants' payroll over the term of the loan through payroll deductions. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with prevailing rates. When a participant ceases to be an employee or the Plan is terminated, the balance of any outstanding loan is due immediately.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE A - DESCRIPTION OF PLAN (Continued)

Form of Benefits: On termination of service, whether due to death, disability, retirement, or otherwise, participants may elect to receive either a lump sum cash amount or a series of installment payments equal to the value of the vested interest in their Plan accounts. In addition, the Plan permits in-service withdrawals from a participant's Plan account in the event the participant incurs a substantial financial hardship as defined in the Plan Agreement.

Forfeitures: At December 31, 2009 and 2008, forfeited nonvested accounts totaled \$9,099 and \$3,039, respectively. This account will be used to reduce future employer contributions. For the year ended December 31, 2009, forfeitures of \$12,064 were applied to reduce employer contributions.

Administrative Expenses: Administrative expenses consist of all expenses incidental to the administration, termination or protection of the Plan, including, but not limited to, legal, accounting, investment manager and trustee fees. Substantially all administrative expenses were paid by the Employer.

Plan Termination: Although it has not expressed any intent to do so, the Employer has the right under the Plan Agreement to discontinue its contributions at any time and to terminate the Plan, subject to the provisions set forth in ERISA. In the event of termination, the net assets would be allocated among participant and beneficiaries of the Plan in the order provided for by ERISA and participants would become fully vested.

During 2009, the Plan's management determined that there was a partial plan termination under the IRC and applicable IRS rules and related guidance, due to reductions in the Employer's workforce. Accordingly, those participants who were involuntarily terminated as part of the workforce reduction became fully vested in their employer contributions on their termination date.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Accounting Standards Codification: In June 2009, the Financial Accounting Standards Board ("FASB") issued FASB Accounting Standards Codification ("ASC") 105, *Generally Accepted Accounting Principles*, which establishes ASC as the sole source of authoritative guidance for generally accepted accounting principles in the United States of America. Pursuant to the provisions of ASC 105, the Plan has updated its references to generally accepted accounting principles in the United States of America ("GAAP") in its financial statements. The adoption of ASC 105 did not have a material impact on the Plan's financial position or results of operations.

Basis of Accounting: The financial statements of the Plan are prepared under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Reclassifications: Certain amounts in the 2008 financial statements have been reclassified to conform to the 2009 presentation.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition: Investments in mutual funds are stated at fair value, based on quotations obtained from national security exchanges. Investments in guaranteed investment contracts ("GICs") are stated at fair market value as determined by the issuer based on the fair value of the underlying investments. Participant loans are stated at cost, which approximates fair value.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

As described in ASC 962, *Plan Accounting - Defined Contribution Pension Plans*, defined contribution plans holding an investment in a GIC are required to report the investment at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan which are attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. As required by ASC 962, the Statements of Net Assets Available for Benefits present investment contracts at fair value as well as an additional line item showing an adjustment from fair value to contract value for fully benefit-responsive investment contracts. The Statement of Changes in Net Assets Available for Benefits is presented on a contract value basis.

Risks and Uncertainties: The Plan provides for various investments in GICs and mutual funds. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the value 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 and participant account balances.

Payment of Benefits: Benefits are recorded when paid.

Subsequent Events: The Plan evaluates events and transactions that occur after the date of the financial statements but before the financial statements are available to be issued. The Plan evaluated such events and transactions through September 8, 2010, the date the financial statements were available for issuance. No subsequent events occurred which require adjustment or disclosure to the financial statements at December 31, 2009.

NOTE C - INVESTMENTS (UNAUDITED)

As permitted by the rules and regulations of the Department of Labor with respect to reporting and disclosure under ERISA, the trustee has certified to the Plan Administrator that the listing of investments (stated at cost and fair value) together with all other transactions which affect Plan investments, are complete and accurate as of December 31, 2009 and 2008 and for the year ended December 31, 2009.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE C - INVESTMENTS (UNAUDITED) (Continued)

The following represents the fair value of investments, as reported by the trustee. Investments that represent 5% or more of the Plan's net assets available for benefits are separately identified.

	December 31,	
	2009	2008
Fidelity Managed Income Portfolio	\$ 883,032	\$ 826,983
Mutual fund accounts:		
Fidelity Contrafund	1,121,413	906,622
Fidelity Value Fund	445,245	474,908
Fidelity Diversified International Fund	588,044	518,708
PIMCO Total Return Administration Fund	1,386,348	1,108,922
Royce Low Price Stock Service Fund	490,434	400,511
Other	3,012,095	2,488,122
TOTAL INVESTMENTS AT FAIR VALUE	<u>\$ 7,926,611</u>	<u>\$ 6,724,776</u>

For the year ended December 31, 2009, the Plan's investments (including investments bought, sold, and held during the year) appreciated in value as follows:

Mutual funds	\$ 1,565,584
Guaranteed investment contract	<u>14,499</u>
	<u>\$ 1,580,083</u>

NOTE D - PARTY-IN-INTEREST TRANSACTIONS

The Plan invests in various investments offered by the trustee. These investments are considered party-in-interest transactions because Fidelity serves as the trustee and investment custodian of the Plan. The Plan management has approved these investment options.

NOTE E - INCOME TAX STATUS

Effective October 13, 2009, the Employer amended and restated the Plan by adopting the Volume Submitter Profit Sharing/401(k) Plan (the "Volume Submitter Plan") offered by Fidelity. The trustee received an advisory letter dated March 31, 2008 from the IRS that the form of the Volume Submitter Plan is acceptable under Section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. The Employer believes that the Plan is currently designed and being operated in compliance with applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE F - FAIR VALUE MEASUREMENTS

On January 1, 2008, the Plan adopted guidance issued by the FASB for fair value measurements for its investments recognized at fair value. The adoption of the guidance did not have a material impact on the Plan's financial statements. The guidance defines fair value as the price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date.

The guidance establishes a formal fair value hierarchy, which prioritizes the inputs used in measuring fair value into three levels based on the extent to which inputs used in measuring fair value are observable in the market.

The three levels of the fair value hierarchy as defined by the guidance are as follows:

- Level 1: Valuations utilizing quoted, unadjusted prices for identical assets or liabilities in active markets that the Plan has the ability to access. This is the most reliable evidence of fair value and does not require a significant degree of judgment.
- Level 2: Valuations utilizing quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly for substantially the full term of the asset or liability.
- Level 3: Valuations utilizing significant, unobservable inputs. This provides the least objective evidence of fair value and requires a significant degree of judgment. Inputs may be used with internally developed methodologies and should reflect an entity's assumptions using the best information available about the assumptions that market participants would use in pricing an asset or liability.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

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

- *Mutual funds:* (Level 1) are stated at fair value based on quoted market prices for applicable publicly traded mutual and money market funds.
- *Guaranteed investment contract:* (Level 2) are valued at fair value of the underlying investments and then adjusted by the issuer to contract value.
- *Participant loans:* (Level 3) are reported at amortized cost and the fair value cannot be readily determined in an active market or other observable market as it is not practical to estimate the loan's fair value due to restrictions on the transferability of the loans.

The preceding method described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation 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. There have been no changes in techniques used during 2009.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE F - FAIR VALUE MEASUREMENTS (Continued)

The following sets forth by level, within the fair value hierarchy, the Plan's assets:

	Fair Value at December 31, 2009			
	Level 1	Level 2	Level 3	Total
Guaranteed Investment Contract				
Stable value fund	\$ -	\$ 883,032	\$ -	\$ 883,032
Mutual Funds				
Large cap equity funds	1,905,696	-	-	1,905,696
International equity funds	588,044	-	-	588,044
Real estate/specialty funds	258,213	-	-	258,213
Small cap equity funds	490,434	-	-	490,434
Fixed income funds	1,386,348	-	-	1,386,348
Mid cap equity funds	1,129,972	-	-	1,129,972
Blended funds	1,107,481	-	-	1,107,481
Participant Loans	-	-	177,391	177,391
Total	<u>\$ 6,866,188</u>	<u>\$ 883,032</u>	<u>\$ 177,391</u>	<u>\$ 7,926,611</u>

	Fair Value at December 31, 2008			
	Level 1	Level 2	Level 3	Total
Guaranteed Investment Contract				
Stable value fund		\$ 826,983	\$ -	\$ 826,983
Mutual Funds				
Large cap equity funds	1,559,339	-	-	1,559,339
International equity funds	518,708	-	-	518,708
Real estate/specialty funds	340,204	-	-	340,204
Small cap equity funds	400,511	-	-	400,511
Fixed income funds	1,108,922	-	-	1,108,922
Mid cap equity funds	977,757	-	-	977,757
Blended funds	775,250	-	-	775,250
Participant Loans	-	-	217,102	217,102
Total	<u>\$ 5,680,691</u>	<u>\$ 826,983</u>	<u>\$ 217,102</u>	<u>\$ 6,724,776</u>

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2009:

	Participant Loans
Balance, as of January 1, 2009	\$ 217,102
Loan repayments	(53,926)
Loan issuances	64,445
Deemed distributions	(50,230)
Balance, as of December 31, 2009	<u>\$ 177,391</u>

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE G - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	December 31,	
	2009	2008
Net assets available for benefits, per Form 5500	\$ 7,955,029	\$ 6,762,385
Adjustment from fair value to contract value for interest in fully benefit-responsive guaranteed investment contract	<u>16,420</u>	<u>44,609</u>
Net assets available for benefits, per the financial statements	<u>\$ 7,971,449</u>	<u>\$ 6,806,994</u>

The following is a reconciliation of investment income to Form 5500 per the financial statements for the year ended December 31, 2009:

Net investment gain from guaranteed investment contract, per Form 5500	\$ 42,688
Adjustments from fair value to contract value for interest in fully benefit-responsive guaranteed investment contract	<u>(28,189)</u>
Net appreciation from investment contracts, per the financial statements	<u>\$ 14,499</u>

NOTE H - SUBSEQUENT EVENTS

Effective August 2010, Triton Group Holdings, the Plan sponsor, merged into Forum Energy Technologies, Inc. The Plan's provisions and terms remain unchanged for the year ended December 31, 2009.

SUPPLEMENTAL SCHEDULE

TGH-US, INC. 401(k) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
DECEMBER 31, 2009

Plan Sponsor number 02-0797615
Plan number 001

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio	**	\$ 883,032
*	Fidelity Management Trust Company	Fidelity Puritan Fund	**	135,669
*	Fidelity Management Trust Company	Fidelity Contrafund	**	1,121,413
*	Fidelity Management Trust Company	Fidelity Equity Income Fund	**	191,815
*	Fidelity Management Trust Company	Fidelity Growth and Income Portfolio	**	97,671
*	Fidelity Management Trust Company	Fidelity Value Fund	**	445,245
*	Fidelity Management Trust Company	Fidelity Real Estate Investment Portfolio	**	258,213
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund	**	208,607
*	Fidelity Management Trust Company	Fidelity Diversified International Fund	**	588,044
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund	**	17,691
*	Fidelity Management Trust Company	Fidelity Freedom 2000 Fund	**	7,808
*	Fidelity Management Trust Company	Fidelity Freedom 2005 Fund	**	842
*	Fidelity Management Trust Company	Fidelity Freedom 2010 Fund	**	147,778
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	**	8,872
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund	**	183,177
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	**	240,982
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund	**	237,305
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	**	49,210
*	Fidelity Management Trust Company	Fidelity Freedom 2040 Fund	**	40,704
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	**	10,661
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	**	26,782
*	Fidelity Management Trust Company	Spartan US Equity Index Fund	**	286,190
*	Fidelity Management Trust Company	PIMCO Total Return Administration Fund	**	1,386,348
*	Fidelity Management Trust Company	Baron Growth Fund	**	363,129
*	Fidelity Management Trust Company	Artisan Mid Cap Investors Fund	**	321,598
*	Fidelity Management Trust Company	Royce Low Price Stock Service Fund	**	490,434
*	Participant Loans	Varying maturity dates through 2014 and interest rates ranging from 4.25% to 9.25%	-	<u>177,391</u>
	TOTAL INVESTMENTS			<u><u>\$ 7,926,611</u></u>

* Represents Party-in-Interest

** Not applicable as the plan has no nonparticipant directed accounts.

See independent auditors' report.

TGH-US, INC. 401(k) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2009 AND 2008

TGH-US, INC. 401(k) PLAN
FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

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All other schedules required by the Employee Retirement Income Security Act of 1974 are not applicable and have been omitted.

Independent Auditors' Report

To the Participants and Plan Administrator of the
TGH-US, Inc. 401(k) Plan
Houston, Texas

We were engaged to audit the financial statements and supplemental schedule of TGH-US, Inc. 401(k) Plan (the "Plan") as of December 31, 2009, and for the year then ended, as listed in the accompanying index. These financial statements and schedule are the responsibility of the Plan's management. The financial statements of the Plan as of December 31, 2008 were audited by other auditors. 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 the other auditors not to perform, and they did not perform, any auditing procedures with respect to the information certified by Fidelity Management Trust Company, the trustee of the Plan. Their report, dated July 23, 2009, indicated that (a) because of the significance of the information that they did not audit, they were unable to, and did not, express an opinion on the financial statements taken as a whole and (b) the form and content of the information included in the financial statements other than that derived from the information certified by the Trustee, were 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.

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 C, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the 2009 financial statements and supplemental schedule. 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 and for the year ended December 31, 2009, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Because of the significance of the information in the Plan's 2009 financial statements and supplemental schedule that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2009 financial statements and supplemental schedule taken as a whole. The form and content of the information included in the 2009 financial statements and supplemental schedule, 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.

UHY LLP

Houston, Texas
September 8, 2010

TGH-US, INC. 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2009	2008
ASSETS		
INVESTMENTS, at fair value		
Mutual funds	\$ 6,866,188	\$ 5,680,691
Guaranteed investment contract	883,032	826,983
Participant loans	177,391	217,102
TOTAL INVESTMENTS	7,926,611	6,724,776
RECEIVABLES		
Employer	28,418	37,609
TOTAL RECEIVABLES	28,418	37,609
NET ASSETS REFLECTING INVESTMENTS AT FAIR VALUE	7,955,029	6,762,385
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS	16,420	44,609
NET ASSETS AVAILABLE FOR BENEFITS	\$ 7,971,449	\$ 6,806,994

See notes to financial statements.

TGH-US, INC. 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2009

ADDITIONS TO NET ASSETS

INVESTMENT INCOME

Net appreciation in fair value of investments	\$ 1,580,083
Dividend income from mutual funds	148,229
Interest from participant loans	15,781
TOTAL INVESTMENT INCOME	<u>1,744,093</u>

CONTRIBUTIONS

Employee	603,895
Employer	432,637
Rollovers	5,407
TOTAL CONTRIBUTIONS	<u>1,041,939</u>

TOTAL ADDITIONS TO NET ASSETS	2,786,032
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DEDUCTIONS FROM NET ASSETS

Benefits paid to participants	1,617,111
Administrative expenses	4,466
TOTAL DEDUCTIONS FROM NET ASSETS	<u>1,621,577</u>

NET INCREASE	1,164,455
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NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	<u>6,806,994</u>
End of year	<u><u>\$ 7,971,449</u></u>

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE A - DESCRIPTION OF PLAN

The following description of the TGH-US, Inc. 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of TGH-US, Inc. (the "Company") and its affiliates (collectively referred to as the "Employer") who have three months of service and are age 18 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") and Sections 401(a) and 501(a) of the Internal Revenue Code ("IRC"), as amended.

Administration of the Plan: The trustee and recordkeeper for the Plan's participant directed assets is Fidelity Management Trust Company (the "Trustee" or "Fidelity").

Contributions: Participants may elect to make pretax contributions to the Plan in an amount up to 60% of their eligible annual compensation. Participant contributions were limited to \$16,500 for 2009. This limitation is adjusted periodically to reflect cost-of-living increase as prescribed by the Internal Revenue Service ("IRS"). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions (\$5,500 for 2009). Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans.

The Employer contributes a non-discretionary matching contribution of 100% of a participant's pretax contributions, up to 6% of the participant's eligible compensation.

Participant Accounts: Each participant's account is credited with the participant's contribution and allocations of the Employer's contribution and plan earnings, and, at times, charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined in the Plan Agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Employer's contribution portion of their accounts is based on years of continuous service. Participants vest 20% after two years of service and 20% for each following year. They are 100% vested after six years of credited service.

Investments: Each participant directs the investment of their account into any of the available investment options offered by the Plan.

Loans to Participants: Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Loan terms range from one to five years or up to ten years for the purchase of a primary residence. Loan repayments are deducted from the participants' payroll over the term of the loan through payroll deductions. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with prevailing rates. When a participant ceases to be an employee or the Plan is terminated, the balance of any outstanding loan is due immediately.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE A - DESCRIPTION OF PLAN (Continued)

Form of Benefits: On termination of service, whether due to death, disability, retirement, or otherwise, participants may elect to receive either a lump sum cash amount or a series of installment payments equal to the value of the vested interest in their Plan accounts. In addition, the Plan permits in-service withdrawals from a participant's Plan account in the event the participant incurs a substantial financial hardship as defined in the Plan Agreement.

Forfeitures: At December 31, 2009 and 2008, forfeited nonvested accounts totaled \$9,099 and \$3,039, respectively. This account will be used to reduce future employer contributions. For the year ended December 31, 2009, forfeitures of \$12,064 were applied to reduce employer contributions.

Administrative Expenses: Administrative expenses consist of all expenses incidental to the administration, termination or protection of the Plan, including, but not limited to, legal, accounting, investment manager and trustee fees. Substantially all administrative expenses were paid by the Employer.

Plan Termination: Although it has not expressed any intent to do so, the Employer has the right under the Plan Agreement to discontinue its contributions at any time and to terminate the Plan, subject to the provisions set forth in ERISA. In the event of termination, the net assets would be allocated among participant and beneficiaries of the Plan in the order provided for by ERISA and participants would become fully vested.

During 2009, the Plan's management determined that there was a partial plan termination under the IRC and applicable IRS rules and related guidance, due to reductions in the Employer's workforce. Accordingly, those participants who were involuntarily terminated as part of the workforce reduction became fully vested in their employer contributions on their termination date.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Accounting Standards Codification: In June 2009, the Financial Accounting Standards Board ("FASB") issued FASB Accounting Standards Codification ("ASC") 105, *Generally Accepted Accounting Principles*, which establishes ASC as the sole source of authoritative guidance for generally accepted accounting principles in the United States of America. Pursuant to the provisions of ASC 105, the Plan has updated its references to generally accepted accounting principles in the United States of America ("GAAP") in its financial statements. The adoption of ASC 105 did not have a material impact on the Plan's financial position or results of operations.

Basis of Accounting: The financial statements of the Plan are prepared under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Reclassifications: Certain amounts in the 2008 financial statements have been reclassified to conform to the 2009 presentation.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition: Investments in mutual funds are stated at fair value, based on quotations obtained from national security exchanges. Investments in guaranteed investment contracts ("GICs") are stated at fair market value as determined by the issuer based on the fair value of the underlying investments. Participant loans are stated at cost, which approximates fair value.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

As described in ASC 962, *Plan Accounting - Defined Contribution Pension Plans*, defined contribution plans holding an investment in a GIC are required to report the investment at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan which are attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. As required by ASC 962, the Statements of Net Assets Available for Benefits present investment contracts at fair value as well as an additional line item showing an adjustment from fair value to contract value for fully benefit-responsive investment contracts. The Statement of Changes in Net Assets Available for Benefits is presented on a contract value basis.

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Payment of Benefits: Benefits are recorded when paid.

Subsequent Events: The Plan evaluates events and transactions that occur after the date of the financial statements but before the financial statements are available to be issued. The Plan evaluated such events and transactions through September 8, 2010, the date the financial statements were available for issuance. No subsequent events occurred which require adjustment or disclosure to the financial statements at December 31, 2009.

NOTE C - INVESTMENTS (UNAUDITED)

As permitted by the rules and regulations of the Department of Labor with respect to reporting and disclosure under ERISA, the trustee has certified to the Plan Administrator that the listing of investments (stated at cost and fair value) together with all other transactions which affect Plan investments, are complete and accurate as of December 31, 2009 and 2008 and for the year ended December 31, 2009.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE C - INVESTMENTS (UNAUDITED) (Continued)

The following represents the fair value of investments, as reported by the trustee. Investments that represent 5% or more of the Plan's net assets available for benefits are separately identified.

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Fidelity Diversified International Fund	588,044	518,708
PIMCO Total Return Administration Fund	1,386,348	1,108,922
Royce Low Price Stock Service Fund	490,434	400,511
Other	3,012,095	2,488,122
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For the year ended December 31, 2009, the Plan's investments (including investments bought, sold, and held during the year) appreciated in value as follows:

Mutual funds	\$ 1,565,584
Guaranteed investment contract	<u>14,499</u>
	<u>\$ 1,580,083</u>

NOTE D - PARTY-IN-INTEREST TRANSACTIONS

The Plan invests in various investments offered by the trustee. These investments are considered party-in-interest transactions because Fidelity serves as the trustee and investment custodian of the Plan. The Plan management has approved these investment options.

NOTE E - INCOME TAX STATUS

Effective October 13, 2009, the Employer amended and restated the Plan by adopting the Volume Submitter Profit Sharing/401(k) Plan (the "Volume Submitter Plan") offered by Fidelity. The trustee received an advisory letter dated March 31, 2008 from the IRS that the form of the Volume Submitter Plan is acceptable under Section 401 of the Internal Revenue Code for use by employers for the benefit of their employees. The Employer believes that the Plan is currently designed and being operated in compliance with applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE F - FAIR VALUE MEASUREMENTS

On January 1, 2008, the Plan adopted guidance issued by the FASB for fair value measurements for its investments recognized at fair value. The adoption of the guidance did not have a material impact on the Plan's financial statements. The guidance defines fair value as the price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date.

The guidance establishes a formal fair value hierarchy, which prioritizes the inputs used in measuring fair value into three levels based on the extent to which inputs used in measuring fair value are observable in the market.

The three levels of the fair value hierarchy as defined by the guidance are as follows:

- Level 1: Valuations utilizing quoted, unadjusted prices for identical assets or liabilities in active markets that the Plan has the ability to access. This is the most reliable evidence of fair value and does not require a significant degree of judgment.
- Level 2: Valuations utilizing quoted prices in markets that are not considered to be active or financial instruments for which all significant inputs are observable, either directly or indirectly for substantially the full term of the asset or liability.
- Level 3: Valuations utilizing significant, unobservable inputs. This provides the least objective evidence of fair value and requires a significant degree of judgment. Inputs may be used with internally developed methodologies and should reflect an entity's assumptions using the best information available about the assumptions that market participants would use in pricing an asset or liability.

A financial instrument's level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

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

- *Mutual funds*: (Level 1) are stated at fair value based on quoted market prices for applicable publicly traded mutual and money market funds.
- *Guaranteed investment contract*: (Level 2) are valued at fair value of the underlying investments and then adjusted by the issuer to contract value.
- *Participant loans*: (Level 3) are reported at amortized cost and the fair value cannot be readily determined in an active market or other observable market as it is not practical to estimate the loan's fair value due to restrictions on the transferability of the loans.

The preceding method described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation 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. There have been no changes in techniques used during 2009.

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE F - FAIR VALUE MEASUREMENTS (Continued)

The following sets forth by level, within the fair value hierarchy, the Plan's assets:

	Fair Value at December 31, 2009			
	Level 1	Level 2	Level 3	Total
Guaranteed Investment Contract				
Stable value fund	\$ -	\$ 883,032	\$ -	\$ 883,032
Mutual Funds				
Large cap equity funds	1,905,696	-	-	1,905,696
International equity funds	588,044	-	-	588,044
Real estate/specialty funds	258,213	-	-	258,213
Small cap equity funds	490,434	-	-	490,434
Fixed income funds	1,386,348	-	-	1,386,348
Mid cap equity funds	1,129,972	-	-	1,129,972
Blended funds	1,107,481	-	-	1,107,481
Participant Loans	-	-	177,391	177,391
Total	<u>\$ 6,866,188</u>	<u>\$ 883,032</u>	<u>\$ 177,391</u>	<u>\$ 7,926,611</u>

	Fair Value at December 31, 2008			
	Level 1	Level 2	Level 3	Total
Guaranteed Investment Contract				
Stable value fund		\$ 826,983	\$ -	\$ 826,983
Mutual Funds				
Large cap equity funds	1,559,339	-	-	1,559,339
International equity funds	518,708	-	-	518,708
Real estate/specialty funds	340,204	-	-	340,204
Small cap equity funds	400,511	-	-	400,511
Fixed income funds	1,108,922	-	-	1,108,922
Mid cap equity funds	977,757	-	-	977,757
Blended funds	775,250	-	-	775,250
Participant Loans	-	-	217,102	217,102
Total	<u>\$ 5,680,691</u>	<u>\$ 826,983</u>	<u>\$ 217,102</u>	<u>\$ 6,724,776</u>

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2009:

	Participant Loans
Balance, as of January 1, 2009	\$ 217,102
Loan repayments	(53,926)
Loan issuances	64,445
Deemed distributions	(50,230)
Balance, as of December 31, 2009	<u>\$ 177,391</u>

TGH-US, INC. 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2009 AND 2008

NOTE G - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

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

	December 31,	
	2009	2008
Net assets available for benefits, per Form 5500	\$ 7,955,029	\$ 6,762,385
Adjustment from fair value to contract value for interest in fully benefit-responsive guaranteed investment contract	<u>16,420</u>	<u>44,609</u>
Net assets available for benefits, per the financial statements	<u>\$ 7,971,449</u>	<u>\$ 6,806,994</u>

The following is a reconciliation of investment income to Form 5500 per the financial statements for the year ended December 31, 2009:

Net investment gain from guaranteed investment contract, per Form 5500	\$ 42,688
Adjustments from fair value to contract value for interest in fully benefit-responsive guaranteed investment contract	<u>(28,189)</u>
Net appreciation from investment contracts, per the financial statements	<u>\$ 14,499</u>

NOTE H - SUBSEQUENT EVENTS

Effective August 2010, Triton Group Holdings, the Plan sponsor, merged into Forum Energy Technologies, Inc. The Plan's provisions and terms remain unchanged for the year ended December 31, 2009.

SUPPLEMENTAL SCHEDULE

TGH-US, INC. 401(k) PLAN
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)
DECEMBER 31, 2009

Plan Sponsor number 02-0797615
Plan number 001

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
*	Fidelity Management Trust Company	Fidelity Managed Income Portfolio	**	\$ 883,032
*	Fidelity Management Trust Company	Fidelity Puritan Fund	**	135,669
*	Fidelity Management Trust Company	Fidelity Contrafund	**	1,121,413
*	Fidelity Management Trust Company	Fidelity Equity Income Fund	**	191,815
*	Fidelity Management Trust Company	Fidelity Growth and Income Portfolio	**	97,671
*	Fidelity Management Trust Company	Fidelity Value Fund	**	445,245
*	Fidelity Management Trust Company	Fidelity Real Estate Investment Portfolio	**	258,213
*	Fidelity Management Trust Company	Fidelity Capital Appreciation Fund	**	208,607
*	Fidelity Management Trust Company	Fidelity Diversified International Fund	**	588,044
*	Fidelity Management Trust Company	Fidelity Freedom Income Fund	**	17,691
*	Fidelity Management Trust Company	Fidelity Freedom 2000 Fund	**	7,808
*	Fidelity Management Trust Company	Fidelity Freedom 2005 Fund	**	842
*	Fidelity Management Trust Company	Fidelity Freedom 2010 Fund	**	147,778
*	Fidelity Management Trust Company	Fidelity Freedom 2015 Fund	**	8,872
*	Fidelity Management Trust Company	Fidelity Freedom 2020 Fund	**	183,177
*	Fidelity Management Trust Company	Fidelity Freedom 2025 Fund	**	240,982
*	Fidelity Management Trust Company	Fidelity Freedom 2030 Fund	**	237,305
*	Fidelity Management Trust Company	Fidelity Freedom 2035 Fund	**	49,210
*	Fidelity Management Trust Company	Fidelity Freedom 2040 Fund	**	40,704
*	Fidelity Management Trust Company	Fidelity Freedom 2045 Fund	**	10,661
*	Fidelity Management Trust Company	Fidelity Freedom 2050 Fund	**	26,782
*	Fidelity Management Trust Company	Spartan US Equity Index Fund	**	286,190
*	Fidelity Management Trust Company	PIMCO Total Return Administration Fund	**	1,386,348
*	Fidelity Management Trust Company	Baron Growth Fund	**	363,129
*	Fidelity Management Trust Company	Artisan Mid Cap Investors Fund	**	321,598
*	Fidelity Management Trust Company	Royce Low Price Stock Service Fund	**	490,434
*	Participant Loans	Varying maturity dates through 2014 and interest rates ranging from 4.25% to 9.25%	-	177,391
	TOTAL INVESTMENTS			<u>\$ 7,926,611</u>

* Represents Party-in-Interest

** Not applicable as the plan has no nonparticipant directed accounts.

See independent auditors' report.