

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

Part I	Annual Report Identification Information
For calendar plan year 2009 or fiscal plan year beginning <u>11/01/2009</u> and ending <u>10/31/2010</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>EUROTHERM TARGET BENEFIT PLAN</u>	1b Three-digit plan number (PN) ► <u>001</u> 1c Effective date of plan <u>11/01/1978</u>
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>EUROTHERM, INC.</u> <u>C/O INVENSYS, INC</u> <u>33 COMMERCIAL STREET B51-2C</u> <u>FOXBORO, MA 02035</u>	2b Employer Identification Number (EIN) <u>54-1063099</u> 2c Sponsor's telephone number <u>508-549-6909</u> 2d Business code (see instructions) <u>335310</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>08/02/2011</u>	<u>ALLYN JEROME</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>08/02/2011</u>	<u>ALLYN JEROME</u>
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2009)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") ADMINISTRATIVE COMMITTEE C/O INVENSYS, INC 33 COMMERCIAL STREET B51-2C FOXBORO, MA 02035	3b Administrator's EIN 04-3387605 <hr/> 3c Administrator's telephone number 508-549-6909
--	---

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 <hr/> 4c PN
---	-------------------------------------

5 Total number of participants at the beginning of the plan year	5	166
---	----------	-----

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	81
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	81
d Subtotal. Add lines 6a , 6b , and 6c	6d	162
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	162
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	162
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:
 2B 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 11/01/2009 and ending 10/31/2010		
A Name of plan EUROTHERM TARGET BENEFIT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 EUROTHERM, INC.		D Employer Identification Number (EIN) 54-1063099

Part I	Service Provider Information (see instructions)
---------------	--

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(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 ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

a Name:	CHERRY, BEKAERT, HOLLAND, LLP	b EIN:	56-0574444
c Position:	ACCOUNTANT		
d Address:	1934 OLD GALLOWS ROAD VIENNA, VA 22182	e Telephone:	703-506-4440

Explanation: THE PLAN SPONSOR ELECTED TO CHANGE ACCOUNTANTS FOR BUSINESS REASONS

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan 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 11/01/2009 and ending 10/31/2010

A Name of plan <u>EUROTHERM TARGET BENEFIT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>EUROTHERM, INC.</u>	D Employer Identification Number (EIN) <u>54-1063099</u>	

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: <u>EB GOVT/CREDIT BOND INDEX FUND</u>		
b Name of sponsor of entity listed in (a): <u>MELLON BANK, NA</u>		
c EIN-PN <u>25-6078093-057</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2186688</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB DV ENHANCED LARGE CAP CORE FUND</u>		
b Name of sponsor of entity listed in (a): <u>MELLON BANK, NA</u>		
c EIN-PN <u>25-6078093-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1094538</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB DV ENHANCED MID CAP CORE FUND</u>		
b Name of sponsor of entity listed in (a): <u>MELLON, NA</u>		
c EIN-PN <u>25-6078093-207</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>554241</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB NCML EAFE PLUS FUND</u>		
b Name of sponsor of entity listed in (a): <u>MELLON BANK, NA</u>		
c EIN-PN <u>25-6078093-108</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>552116</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB DO LARGE CAP CORE FUND</u>		
b Name of sponsor of entity listed in (a): <u>MELLON BANK, NA</u>		
c EIN-PN <u>25-6078093-263</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>537669</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BOSTON CO US LARGE CAP 130/30 FUND</u>		
b Name of sponsor of entity listed in (a): <u>THE BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>26-0837106-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>533306</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BOSTON CO US SMALL CAP VALUE EQUITY</u>		
b Name of sponsor of entity listed in (a): <u>THE BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>04-3203152-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>356160</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: **EB INTERMEDIATE BOND FUND****b** Name of sponsor of entity listed in (a): **MELLON BANK, NA**

c EIN-PN 25-6078093-029	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 172001
---------------------------------------	-------------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: **EB TEMPORARY INVESTMENT FUND****b** Name of sponsor of entity listed in (a): **MELLON BANK, NA**

c EIN-PN 25-6078093-023	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34337
---------------------------------------	-------------------------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

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

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

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

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

For calendar plan year 2009 or fiscal plan year beginning 11/01/2009 and ending 10/31/2010		
A Name of plan EUROTHERM TARGET BENEFIT PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 EUROTHERM, INC.	D Employer Identification Number (EIN) 54-1063099	

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

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	596506	632337
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)	20	15
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	4851060	6021056
(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)		
(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	5447586	6653408

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	5447586	6653408
---	-----------	---------	---------

Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	632337	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		632337

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	189	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		189
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		741829
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1374355

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	168533	
(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)		168533
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		0
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		168533

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1205822
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: BOIVIN & ASSOC. CPAS, PLLC

(2) EIN: 27-1516157

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		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 11/01/2009 and ending 10/31/2010

A Name of plan <u>EUROTHERM TARGET BENEFIT 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>EUROTHERM, INC.</u>	D Employer Identification Number (EIN) <u>54-1063099</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>25-1709965</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>4</u>

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☒ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year	6a	<u>632337</u>	
b Enter the amount contributed by the employer to the plan for this plan year	6b	<u>632337</u>	
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	<u>0</u>	
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☒ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☒ N/A

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

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box(es). If no, check the "No" box.....	☒ Increase	☐ Decrease	☐ Both	☐ No
--	--	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

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

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

Schedule R (Form 5500) 2009
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES
Eurotherm Target Benefit Plan
Years Ended October 31, 2010 and 2009**

Eurotherm Target Benefit Plan
Financial Statements and Supplemental Schedules
Years Ended October 31, 2010 and 2009

Table of Contents

Report of Independent Auditors	1
Financial Statements	
Statements of Net Assets Available for Benefits.....	3
Statements of Changes in Net Assets Available for Benefits.....	4
Notes to Financial Statements	5
Supplemental Schedules	
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)	13
Schedule H, Line 4j – Schedule of Reportable Transactions	15

Report of Independent Auditors

The Administrative Committee and Participants Eurotherm Target Benefit Plan

We were engaged to audit the financial statements and supplemental schedules of the Eurotherm Target Benefit Plan as of October 31, 2010, and for the year then ended, as listed in the table of contents. These financial statements and schedules are the responsibility of the Plan's management. The financial statements of the Plan as of and for the year ended October 31, 2009 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 investment information certified by Mellon Bank, N.A., the trustee of the Plan. Their report, dated August 9, 2010, 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 investment 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 investment information summarized in Note 3, which was certified by The Bank of New York Mellon/BNY Mellon, N.A. (formerly Mellon Bank, N.A.), the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. 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 October 31, 2010, 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 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and schedules taken as a whole. The form and content of the information included in the 2010 financial statements and schedules, other than that derived from the investment 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.

Boivin & Associates, CPAs, PLLC

Boivin & Associates, CPAs, PLLC

Merrimack, New Hampshire

August 1, 2011

Eurotherm Target Benefit Plan

Statements of Net Assets Available for Benefits

	October 31	
	2010	2009
Assets		
Investments:		
Common/collective trust funds	\$ 6,021,056	\$ 4,851,060
Receivables		
Employer contributions receivable	632,337	596,506
Interest	15	20
	<u>632,352</u>	<u>596,526</u>
Net assets available for benefits	<u>\$ 6,653,408</u>	<u>\$ 5,447,586</u>

See accompanying notes.

Eurotherm Target Benefit Plan

Statements of Changes in Net Assets Available for Benefits

	Years Ended October 31	
	2010	2009
Additions		
Employer contributions	\$ 632,337	\$ 596,506
Net appreciation in fair value of common/collective trust funds	741,829	515,862
Interest income	189	—
Total additions	<u>1,374,355</u>	<u>1,112,368</u>
Deductions		
Benefit payments directly to participants	168,533	484,050
Total deductions	<u>168,533</u>	<u>484,050</u>
Net increase	1,205,822	628,318
Net assets available for benefits at beginning of year	5,447,586	4,819,268
Net assets available for benefits at end of year	<u><u>\$ 6,653,408</u></u>	<u><u>\$ 5,447,586</u></u>

See accompanying notes.

Eurotherm Target Benefit Plan

Notes to Financial Statements

October 31, 2010

1. Plan Description

The following description of the Eurotherm Target Benefit Plan (Plan) provides only general information. Participants should refer to the Plan agreement, as amended and restated, for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan originally established November 1, 1978, covering all employees of Eurotherm Inc. (Corporation) who have completed one year of service and are age 21 years or older. Effective March 31, 2011, the plan sponsor was changed from the Corporation to Invensys Inc. (Invensys). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Effective November 1, 2009, benefits under the Plan were frozen. As a result, no participant accrues any additional benefits, and no service or period of employment after that date counts as credited service. No new participants are eligible to participate in the Plan after November 1, 2009.

The Plan has appointed The Bank of New York Mellon/BNY Mellon, N.A. (Mellon) to act as trustee of the Plan. The Plan's assets are held in the custody of Mellon. Mercer Human Resources Consulting serves as the plan recordkeeper and actuary.

Certain administrative functions are performed by officers or employees of the Corporation. No such officer or employee receives compensation from the Plan. Administrative expenses are paid by the Plan or directly by the Corporation.

Employer Contributions

The contribution of the Corporation is determined on November 1, for the plan year ending the following October 31, and is funded annually. The annual contribution of the Corporation is actuarially determined on the basis of the target benefit for all of its participating employees. The required minimum funding has been contributed to the Plan. The target is based on 2.25% of a participant's career average compensation (1.46% plus 0.5% of participant's primary Social Security covered compensation prior to November 1, 1994), multiplied by the total number of years of credited service up to a maximum of 40 years (35 years prior to November 1, 1994). Employees are not permitted to make contributions under the Plan.

The annual contribution to the Plan is independently calculated using actuarial assumptions of a 7.5% annual interest rate and the 1984 Unisex Mortality Table.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

1. Plan Description (continued)

Vesting

Vesting for the Plan is determined as follows, with the exception of participants who attain the age of 65 or participants who have become permanently disabled, in which case the participant is 100% vested. The following table is for a participant credited with at least one hour of service on or after January 1, 2007.

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

For those participants who do not earn an hour of service on or after January 1, 2007, the following schedule shall apply.

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 3	0%
3	40%
4	60%
5	80%
6 or more	100%

Participant Accounts

Each participating employee has a separate account that is credited with the participant's share of each annual contribution plus or minus earnings or losses on the investments. The allocation of earnings or losses of the investments held in the Plan is based on the proportion of a participants' account balance at each November 1, to the total of all account balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Eurotherm Target Benefit Plan
Notes to Financial Statements (continued)

1. Plan Description (continued)

Participant Accounts (continued)

Forfeitures of terminated participant's nonvested account balances are used to reduce the Corporation's future contributions. At October 31, 2010 and 2009, forfeited nonvested accounts totaled \$-0- and \$28,111, respectively. These amounts will be used to reduce future Corporation contributions. During the years ended October 31, 2010 and 2009, Corporation contributions were reduced by \$28,111 and \$16,790, respectively, from forfeited nonvested accounts.

Certain participants who are no longer employees of the Corporation (Separated Participants) are included in the Plan. The Separated Participants' accounts are included in the Plan's net assets available for benefits.

Distributions

Upon retirement, early retirement, or termination of service, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or an annuity.

2. Summary of Accounting Policies

Basis of Accounting

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

Investment Valuation

Investments are stated at fair value as reported by the trustee. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). Common/collective trust funds are investment vehicles valued using the net asset value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

2. Summary of Accounting Policies (continued)

Investment Valuation (continued)

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.

The valuation methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while plan management believes the 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.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Reclassifications

Certain 2009 financial statement amounts have been reclassified to conform with 2010 financial statement presentation.

New Accounting Pronouncement

In April 2009, the FASB issued FASB Staff Position 157-4, *Determining Fair Value When the Volume and Level of Activity for the Asset or Liability Have Significantly Decreased and Identifying Transactions That Are Not Orderly* (FSP 157-4). FSP 157-4 supersedes FSP 157-3 and amends SFAS 157 to provide additional guidance on estimating fair value when the volume and level of activity for an asset or liability have significantly decreased in relation to normal market activity for the asset or liability. FSP 157-4 also provides additional guidance or circumstances that may indicate that a transaction is not orderly and on defining major categories of debt and equity securities in meeting the disclosure requirements of SFAS 157. FSP 157-4 is effective for reporting periods ending after June 15, 2009. The Plan adopted the provisions of FSP 157-4 as of October 31, 2009.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

3. Investments

All investment information disclosed in the accompanying financial statements and schedules, including investments held at October 31, 2010, and net appreciation in fair value of common/collective trust funds and interest for the year ended October 31, 2010, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by the trustee.

Individual investments that represent 5% or more of the fair value of assets available for benefits as of October 31, 2010 and 2009 are as follows:

	October 31	
	2010	2009
EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	\$ 2,186,688	\$ 1,648,402
EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	1,094,538	866,479
EB DV Enhanced Mid Cap Core Fund of The Bank of New York Mellon	554,241	391,010
EB NCML EAFE Plus Fund of The Bank of New York Mellon	552,116	413,935
EB DO Large Cap Core Fund of The Bank of New York Mellon	537,669	425,948
The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	533,306	*
The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	356,160	337,210
EB Intermediate Bond Fund of The Bank of New York Mellon	*	301,349
EB Daily Value Active Index Plus Fund	*	408,791

* Less than 5% of plan net assets.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements

ASC Topic 820, "Fair Value Measurements" (ASC Topic 820) defines fair value as the exchange 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. ASC Topic 820 also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs when measuring fair value.

The standard describes three levels of inputs that may be used to measure fair value:

- Level 1 Inputs are quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities;
- Level 2 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;
- Level 3 Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

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

There have been no changes in the valuation methodologies (Note 2) used at October 31, 2010 and 2009.

The following table sets forth by level within the fair value hierarchy the Plan's investment assets and liabilities, if any, as of October 31, 2010 and 2009.

	Level 2	
	2010	2009
Assets:		
Common/collective trust funds:		
Domestic equity investments	\$ 3,075,914	\$ 2,020,647
Fixed income investments	2,358,689	2,358,542
International investments	552,116	413,935
Short-term investments	34,337	57,936
Total assets	\$ 6,021,056	\$ 4,851,060

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

5. Risks and Uncertainties

The Plan provides for various investment options in any combination of domestic equity securities, mutual funds, cash management and corporate obligation investments. Such investments are exposed to various risks, such as interest-rate, market and credit risks. Due to the level of risk associated with certain investments securities and the level of uncertainty related to changes in value of investment securities, it is at least reasonably possible that changes in risks and the value of investments may occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

6. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service dated June 23, 2003, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "Code") and, therefore, the related trust is exempt from taxation. Subsequent to this determination by the Internal Revenue Service, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code, and therefore, believes that the Plan, as amended, is qualified and the related trust is tax exempt.

Accounting standards require recording uncertain income tax positions that exist in the Plan's financial statements. Plan management has determined there are no uncertain tax positions and believes there is no adjustment or disclosure required in the Plan's financial statements.

7. Parties-In-Interest

Section 3(14) of ERISA defines a party-in-interest to include, among others, fiduciaries or employees of the Plan, any person who provides services to the Plan or an employer whose employees are covered by the Plan. Accordingly, the management of investments held by the trustee are considered party-in-interest transactions.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

8. Subsequent Events

Effective May 1, 2011, the plan sponsor agreed to merge the Plan with the Invensys 401(k) Plan, such merger to be effected in compliance with Section 414(1) of the Internal Revenue Code of 1986, as amended. The Plan was merged effective May 1, 2011.

The Plan has evaluated subsequent events through August 1, 2011, in connection with the preparation of these financial statements, which is the date the financial statements were available to be issued. During this period, there have been no material events that would require recognition in the financial statements or disclosures to the financial statements.

Supplemental Schedules

Eurotherm Target Benefit Plan

EIN: 54-1063099/ Plan Number: 001

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

October 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Common/collective trust funds (Mellon Bank, N.A.):				
*	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	4,085.559 units	\$ 1,958,712	\$ 2,186,688
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	7,012.988 units	1,073,233	1,094,538
	EB DV Enhanced Mid Cap Core Fund of The Bank of New York Mellon	3,328.784 units	365,839	554,241
	EB NCML EAFE Plus Fund of The Bank of New York Mellon	56,685.421 units	534,117	552,116
	EB DO Large Cap Core Fund of The Bank of New York Mellon	48,006.175 units	480,662	537,669
	The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	55,322.204 units	501,693	533,306
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	2,482.125 units	335,484	356,160

Eurotherm Target Benefit Plan

EIN: 54-1063099/ Plan Number: 001

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

October 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Common/collective trust funds (Mellon Bank, N.A.) (continued):				
*	EB Intermediate Bond Fund of The Bank of New York Mellon	1,935.860 units	\$ 136,929	\$ 172,001
*	EB Temporary Investment Fund of The Bank of New York Mellon	34,336.920 units	34,337	34,337
			<u>\$ 5,421,006</u>	<u>\$ 6,021,056</u>

* Indicates party-in-interest to the Plan.

Eurotherm Target Benefit Plan

EIN: 54-1063099 / Plan No. 001

Schedule H, Line 4j - Schedule of Reportable Transactions

Year Ended October 31, 2010

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i)—Individual security transactions in excess of 5% of plan assets								
The Bank of New York /Mellon	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	\$ 335,484			\$ 335,484	\$ 335,484	\$ 335,484	
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon		\$ 356,555			322,812	356,555	\$ 33,743
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	284,051				284,051	284,051	
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon		908,338			924,458	908,338	(16,120)
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	325,000				325,000	325,000	
	EB Temporary Investment Fund of The Bank of New York Mellon	596,506				596,506	596,506	
	EB Temporary Investment Fund The Bank of New York Mellon		325,000			325,000	325,000	
	BSDT-Late Money Deposit Account	596,506				596,506	596,506	
	BSDT-Late Money Deposit Account		596,506			596,506	596,506	
	BSDT-Late Money Deposit Account	301,582				301,582	301,582	
	BSDT-Late Money Deposit Account		301,582			301,582	301,582	
	The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	454,169				454,169	454,169	

Eurotherm Target Benefit Plan

EIN: 54-1063099 / Plan No. 001

Schedule H, Line 4j - Schedule of Reportable Transactions (continued)

Year Ended October 31, 2010

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (iii)—A series of securities transactions in excess of 5% of plan assets								
The Bank of New York /Mellon	BSDT-Late Money Deposit Account	\$ 898,088	\$ 898,088			\$ 898,088	\$ 898,088	
	BSDT-Late Money Deposit Account					898,088	898,088	
	EB Temporary Investment Fund of The Bank of New York Mellon	1,418,832				1,418,832	1,418,832	
	EB Temporary Investment Fund of The Bank of New York Mellon		1,391,017			1,391,017	1,391,017	
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	512,158				512,158	512,158	
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	560,331				560,331	560,331	
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon		187,001			171,942	187,001	\$ 15,059
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	15,000				15,000	15,000	
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon		394,555			355,912	394,555	38,643

There were no category (ii) or (iv) reportable transactions for the year ended October 31, 2010.



THE BANK OF NEW YORK MELLON

EIN: 54-1063099 Plan No. 001
Form 5500, Schedule H, Line 4(i)
Schedule of Assets (Held at End of Year)

TRDEUT EUTF97AZ0002 5500 FINAL 112321 5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR
EUT F97AZ00 31 OCTOBER 2010
EUROTHERM CONTROLS
BENEFIT PLAN

2010-10-31 CYCLE 4 15:10:27 RUN DATE: 01-DEC-10
PAGE: 1
M1102E

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
<u>COMMON/COLLECTIVE TRUST</u>					
2,482.1250	SMALL CAP FUND UNIT	335,484.00	143.4900	356,160.12	20,676.12
7,012.9880	EB DV ENH LGE CAP CORE FUND	1,073,233.15	156.0729	1,094,537.82	21,304.67
55,322.2040	LCB-130/30 LOE CAP CORE	501,692.67	9.6400	533,306.05	31,613.38
3,328.7840	EB DV ENH MID CAP CORE FUND	365,839.46	166.4995	554,241.15	188,401.69
34,336.9200	EB TEMPORARY INVESTMENT FUND VAR RT 12/31/2049 DD 11/01/01	34,336.92	1.0000	34,336.92	0.00
1,935.8600	EB INTERMEDIATE BOND FUND	136,928.62	88.8500	172,001.16	35,072.54
4,085.5590	EB GOVT/CREDIT BIF	1,958,711.78	535.2236	2,186,687.98	227,976.20
56,685.4210	EB NCML INTERNATIONAL FUND	534,117.15	9.7400	552,116.00	17,998.85
TOTAL COMMON/COLLECTIVE TRUST		4,940,343.75		5,483,387.20	543,043.45
<u>REGISTERED INVESTMENT COMPANIES</u>					
48,006.1750	EB US LARGE CAPITALIZATION CORE FD	480,661.69	11.2000	537,669.16	57,007.47
TOTAL REGISTERED INVESTMENT COMPANIES		480,661.69		537,669.16	57,007.47
GRAND TOTAL		5,421,005.44		6,021,056.36	600,050.92



THE BANK OF NEW YORK MELLON

EIN: 54-1063099 Plan No. 001
Form 5500, Schedule H, Line 4(j)
Reportable 5% Transactions

TRDEUT EUTF97AZ0002 5500 FINAL 112321 SINGLE TRANSACTIONS IN EXCESS OF FIVE PERCENT
OF THE CURRENT VALUE OF THE PLAN ASSETS
FOR THE PERIOD 01 APRIL 2010 THROUGH 31 OCTOBER 2010
EUT F97AZ00
EUROTHERM CONTROLS
BENEFIT PLAN
2010-10-31 CYCLE 4 15:10:27 RUN DATE: 01-DEC-10
PAGE: 1
16400

TRAN CODE	SHARES/ PAR VALUE	SECURITY DESCRIPTION	5% VALUE:		294,331.89	GAIN/LOSS
			TRANSACTION EXPENSE	COST OF PURCHASES		
B	2,482.12	SMALL CAP FUND UNIT	.00	335,484.00	.00	.00
S	18,555.13	EB DO SMALL CAP CORE FUND	.00	.00	356,555.49	33,743.43
					322,812.06	



THE BANK OF NEW YORK MELLON

EIN: 54-1063099 Plan No. 001
Form 5500, Schedule H, Line 4(j)
Reportable 5% Transactions

TRDEUT EUTF97AZ0002 5500 FINAL 112321 SERIES OF TRANSACTIONS IN EXCESS OF FIVE PERCENT
OF THE CURRENT VALUE OF THE PLAN ASSETS
FOR THE PERIOD 01 APRIL 2010 THROUGH 31 OCTOBER 2010
EUT F97AZ00
EUROTHERM CONTROLS
BENEFIT PLAN
2010-10-31 CYCLE 4 15:10:27 RUN DATE: 01-DEC-10
PAGE: 1
T6500

TRAN COUNI	SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST OF PURCHASES	5% VALUE: PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
18	538,603.98	EB TEMPORARY INVESTMENT FUND VAR RT 12/31/2049 DD 11/01/01	538,603.98	.00	.00	.00
12	504,267.06	EB TEMPORARY INVESTMENT FUND VAR RT 12/31/2049 DD 11/01/01	.00	504,267.06	504,267.06	.00
3	339.27	EB GOVT/CREDIT BIF	178,331.59	.00	.00	.00
2	361.13	EB GOVT/CREDIT BIF	.00	167,000.69	171,941.77	15,058.92
1	871.13	EB DO SMALL CAP CORE FUND	14,999.99	.00	.00	.00
3	20,456.75	EB DO SMALL CAP CORE FUND	.00	394,555.49	355,912.27	38,643.22

THE BANK OF NEW YORK MELLON

EIN: 54-1063099 Plan No. 001
Form 5500, Schedule H, Line 4(j)
Reportable 5% Transactions

BNY MELLON, N.A.

B. DESCRIPTION OF ASSET

5% IND	A. IDENTITY OF PARTY INVOLVED	C. PRICE (BUYS)	D. PRICE (SALES)	E. LEASE RENTAL	F. EXPENSES INCURRED	G. COST OF ASSET	H. CURRENT VALUE	DATE	I. NET GAIN OR LOSS
EB DD EQUITY LARGE CAP CORE FUND									
*	NON-BROKER TRADE		9.16			924,457.96	908,338.37	S 02/01/10	16,119.59-
EB DV ENH LGE CAP CORE FUND									
*	PARTY UNKNOWN					74,999.89	74,999.89	P 01/20/10	
	PARTY UNKNOWN					284,051.48	284,051.48	# 02/04/10	
	PARTY UNKNOWN					153,106.76	153,106.76	P 02/04/10	
**	5 % SERIES TOTAL						512,158.13		
	TOTAL OF					228,106.65	228,106.65		
	TOTAL OF					284,051.48	284,051.48		
	2 PURCHASES						512,158.13		
	1 FREE RECEIPTS								
	SUMMARY TOTAL								
EB GOVT/CREDIT BOND INDEX FUND									
*	PARTY UNKNOWN					6,999.64	6,999.64	P 11/04/09	
	PARTY UNKNOWN					324,999.50	324,999.50	P 01/21/10	
	PARTY UNKNOWN					49,999.55	49,999.55	P 03/09/10	
**	5 % SERIES TOTAL						381,998.69		
	3 PURCHASES						381,998.69		
EB TEMPORARY INVESTMENT FUND									
	MELLON BANK N A	1.00				19.73	19.73	P 11/03/09	
	MELLON BANK N A		1.00			6,999.64	6,999.64	S 11/04/09	
	MELLON BANK N A	1.00				14.42	14.42	P 12/02/09	
	MELLON BANK N A	1.00				14.48	14.48	P 01/05/10	
*	MELLON BANK N A	1.00				596,506.05	596,506.05	P 01/13/10	
	MELLON BANK N A		1.00			125,000.00	125,000.00	S 01/14/10	
	MELLON BANK N A		1.00			149,999.76	149,999.76	S 01/20/10	
*	MELLON BANK N A		1.00			324,999.50	324,999.50	S 01/21/10	
	MELLON BANK N A	1.00				.41	.41	P 02/01/10	
	MELLON BANK N A		1.00			216,807.34	216,807.34	P 02/02/10	
	MELLON BANK N A	1.00				199,751.73	199,751.73	S 02/03/10	
* - SINGLE 5% TRANSACTION ** - SERIES OF 5% TRANSACTIONS INITIAL VALUE - \$4,851,079.82 5% VALUE - \$242,553.99									



THE BANK OF NEW YORK MELLON

EIN: 54-1063099 Plan No. 001
Form 5500, Schedule H, Line 4(j)
Reportable 5% Transactions

BNY MELLON, N.A.

B. DESCRIPTION OF ASSET

5% IND	A. IDENTITY OF PARTY INVOLVED	C. PRICE (BUYS)	D. PRICE (SALES)	E. LEASE RENTAL	F. EXPENSES INCURRED	G. COST OF ASSET	H. CURRENT VALUE	DATE	I. NET GAIN OR LOSS
	MELLON BANK N A	1.00				66,842.59	66,842.59	P 02/18/10	
	MELLON BANK N A		1.00			29,999.79	29,999.79	S 03/01/10	
	MELLON BANK N A	1.00				22.78	22.78	P 03/02/10	
	MELLON BANK N A		1.00			49,999.55	49,999.55	S 03/09/10	
** 5 %	SERIES TOTAL						1,766,977.77		
	7 SALES					886,749.97	886,749.97		
	8 PURCHASES					880,227.80	880,227.80		
	SUMMARY TOTAL						1,766,977.77		

BSDL-LATE MONEY DEPOSIT ACCOUNT
DTD 6/26/97 VAR RT

*	MELLON BANK N A	1.00				596,506.05	596,506.05	P 01/12/10	
*	MELLON BANK N A		1.00			596,506.05	596,506.05	S 01/13/10	
*	MELLON BANK N A	1.00				301,581.78	301,581.78	P 02/01/10	
*	MELLON BANK N A		1.00			301,581.78	301,581.78	S 02/02/10	
** 5 %	SERIES TOTAL						1,796,175.66		
	2 SALES					898,087.83	898,087.83		
	2 PURCHASES					898,087.83	898,087.83		
	SUMMARY TOTAL						1,796,175.66		

EB US LARGE CAPITALIZATION CORE EQUITY
FD

*	PARTY UNKNOWN					454,169.19	454,169.19	P 02/01/10	
---	---------------	--	--	--	--	------------	------------	------------	--

* - SINGLE 5% TRANSACTION	** - SERIES OF 5% TRANSACTIONS	INITIAL VALUE -	5% VALUE -	T
		\$4,851,079.82	-	\$242,553.99

EUROTHERM CONTROLS INC
ACCOUNT 97A-Z00REPORTABLE 5 PERCENT TRANSACTIONS - SINGLE AND SERIES - ACCRUED
FROM 11/01/09 THROUGH 03/31/10PRODUCED ON 04/22/10
PAGE 2

**FINANCIAL STATEMENTS AND
SUPPLEMENTAL SCHEDULES
Eurotherm Target Benefit Plan
Years Ended October 31, 2010 and 2009**

Eurotherm Target Benefit Plan
Financial Statements and Supplemental Schedules
Years Ended October 31, 2010 and 2009

Table of Contents

Report of Independent Auditors	1
Financial Statements	
Statements of Net Assets Available for Benefits.....	3
Statements of Changes in Net Assets Available for Benefits.....	4
Notes to Financial Statements	5
Supplemental Schedules	
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)	13
Schedule H, Line 4j – Schedule of Reportable Transactions	15

Report of Independent Auditors

The Administrative Committee and Participants Eurotherm Target Benefit Plan

We were engaged to audit the financial statements and supplemental schedules of the Eurotherm Target Benefit Plan as of October 31, 2010, and for the year then ended, as listed in the table of contents. These financial statements and schedules are the responsibility of the Plan's management. The financial statements of the Plan as of and for the year ended October 31, 2009 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 investment information certified by Mellon Bank, N.A., the trustee of the Plan. Their report, dated August 9, 2010, 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 investment 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 investment information summarized in Note 3, which was certified by The Bank of New York Mellon/BNY Mellon, N.A. (formerly Mellon Bank, N.A.), the trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. 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 October 31, 2010, 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 2010 financial statements and schedules that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2010 financial statements and schedules taken as a whole. The form and content of the information included in the 2010 financial statements and schedules, other than that derived from the investment 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.

Boivin & Associates, CPAs, PLLC

Boivin & Associates, CPAs, PLLC

Merrimack, New Hampshire

August 1, 2011

Eurotherm Target Benefit Plan

Statements of Net Assets Available for Benefits

	October 31	
	2010	2009
Assets		
Investments:		
Common/collective trust funds	\$ 6,021,056	\$ 4,851,060
Receivables		
Employer contributions receivable	632,337	596,506
Interest	15	20
	<u>632,352</u>	<u>596,526</u>
Net assets available for benefits	<u>\$ 6,653,408</u>	<u>\$ 5,447,586</u>

See accompanying notes.

Eurotherm Target Benefit Plan

Statements of Changes in Net Assets Available for Benefits

	Years Ended October 31	
	2010	2009
Additions		
Employer contributions	\$ 632,337	\$ 596,506
Net appreciation in fair value of common/collective trust funds	741,829	515,862
Interest income	189	—
Total additions	<u>1,374,355</u>	<u>1,112,368</u>
Deductions		
Benefit payments directly to participants	168,533	484,050
Total deductions	<u>168,533</u>	<u>484,050</u>
Net increase	1,205,822	628,318
Net assets available for benefits at beginning of year	5,447,586	4,819,268
Net assets available for benefits at end of year	<u><u>\$ 6,653,408</u></u>	<u><u>\$ 5,447,586</u></u>

See accompanying notes.

Eurotherm Target Benefit Plan

Notes to Financial Statements

October 31, 2010

1. Plan Description

The following description of the Eurotherm Target Benefit Plan (Plan) provides only general information. Participants should refer to the Plan agreement, as amended and restated, for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan originally established November 1, 1978, covering all employees of Eurotherm Inc. (Corporation) who have completed one year of service and are age 21 years or older. Effective March 31, 2011, the plan sponsor was changed from the Corporation to Invensys Inc. (Invensys). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Effective November 1, 2009, benefits under the Plan were frozen. As a result, no participant accrues any additional benefits, and no service or period of employment after that date counts as credited service. No new participants are eligible to participate in the Plan after November 1, 2009.

The Plan has appointed The Bank of New York Mellon/BNY Mellon, N.A. (Mellon) to act as trustee of the Plan. The Plan's assets are held in the custody of Mellon. Mercer Human Resources Consulting serves as the plan recordkeeper and actuary.

Certain administrative functions are performed by officers or employees of the Corporation. No such officer or employee receives compensation from the Plan. Administrative expenses are paid by the Plan or directly by the Corporation.

Employer Contributions

The contribution of the Corporation is determined on November 1, for the plan year ending the following October 31, and is funded annually. The annual contribution of the Corporation is actuarially determined on the basis of the target benefit for all of its participating employees. The required minimum funding has been contributed to the Plan. The target is based on 2.25% of a participant's career average compensation (1.46% plus 0.5% of participant's primary Social Security covered compensation prior to November 1, 1994), multiplied by the total number of years of credited service up to a maximum of 40 years (35 years prior to November 1, 1994). Employees are not permitted to make contributions under the Plan.

The annual contribution to the Plan is independently calculated using actuarial assumptions of a 7.5% annual interest rate and the 1984 Unisex Mortality Table.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

1. Plan Description (continued)

Vesting

Vesting for the Plan is determined as follows, with the exception of participants who attain the age of 65 or participants who have become permanently disabled, in which case the participant is 100% vested. The following table is for a participant credited with at least one hour of service on or after January 1, 2007.

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6 or more	100%

For those participants who do not earn an hour of service on or after January 1, 2007, the following schedule shall apply.

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 3	0%
3	40%
4	60%
5	80%
6 or more	100%

Participant Accounts

Each participating employee has a separate account that is credited with the participant's share of each annual contribution plus or minus earnings or losses on the investments. The allocation of earnings or losses of the investments held in the Plan is based on the proportion of a participants' account balance at each November 1, to the total of all account balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account.

Eurotherm Target Benefit Plan
Notes to Financial Statements (continued)

1. Plan Description (continued)

Participant Accounts (continued)

Forfeitures of terminated participant's nonvested account balances are used to reduce the Corporation's future contributions. At October 31, 2010 and 2009, forfeited nonvested accounts totaled \$-0- and \$28,111, respectively. These amounts will be used to reduce future Corporation contributions. During the years ended October 31, 2010 and 2009, Corporation contributions were reduced by \$28,111 and \$16,790, respectively, from forfeited nonvested accounts.

Certain participants who are no longer employees of the Corporation (Separated Participants) are included in the Plan. The Separated Participants' accounts are included in the Plan's net assets available for benefits.

Distributions

Upon retirement, early retirement, or termination of service, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or an annuity.

2. Summary of Accounting Policies

Basis of Accounting

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

Investment Valuation

Investments are stated at fair value as reported by the trustee. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). Common/collective trust funds are investment vehicles valued using the net asset value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

2. Summary of Accounting Policies (continued)

Investment Valuation (continued)

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.

The valuation methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while plan management believes the 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.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

Reclassifications

Certain 2009 financial statement amounts have been reclassified to conform with 2010 financial statement presentation.

New Accounting Pronouncement

In April 2009, the FASB issued FASB Staff Position 157-4, *Determining Fair Value When the Volume and Level of Activity for the Asset or Liability Have Significantly Decreased and Identifying Transactions That Are Not Orderly* (FSP 157-4). FSP 157-4 supersedes FSP 157-3 and amends SFAS 157 to provide additional guidance on estimating fair value when the volume and level of activity for an asset or liability have significantly decreased in relation to normal market activity for the asset or liability. FSP 157-4 also provides additional guidance or circumstances that may indicate that a transaction is not orderly and on defining major categories of debt and equity securities in meeting the disclosure requirements of SFAS 157. FSP 157-4 is effective for reporting periods ending after June 15, 2009. The Plan adopted the provisions of FSP 157-4 as of October 31, 2009.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

3. Investments

All investment information disclosed in the accompanying financial statements and schedules, including investments held at October 31, 2010, and net appreciation in fair value of common/collective trust funds and interest for the year ended October 31, 2010, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by the trustee.

Individual investments that represent 5% or more of the fair value of assets available for benefits as of October 31, 2010 and 2009 are as follows:

	October 31	
	2010	2009
EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	\$ 2,186,688	\$ 1,648,402
EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	1,094,538	866,479
EB DV Enhanced Mid Cap Core Fund of The Bank of New York Mellon	554,241	391,010
EB NCML EAFE Plus Fund of The Bank of New York Mellon	552,116	413,935
EB DO Large Cap Core Fund of The Bank of New York Mellon	537,669	425,948
The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	533,306	*
The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	356,160	337,210
EB Intermediate Bond Fund of The Bank of New York Mellon	*	301,349
EB Daily Value Active Index Plus Fund	*	408,791

* Less than 5% of plan net assets.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements

ASC Topic 820, "Fair Value Measurements" (ASC Topic 820) defines fair value as the exchange 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. ASC Topic 820 also establishes a fair value hierarchy which requires an entity to maximize the use of observable inputs when measuring fair value.

The standard describes three levels of inputs that may be used to measure fair value:

- Level 1 Inputs are quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities;
- Level 2 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;
- Level 3 Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

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

There have been no changes in the valuation methodologies (Note 2) used at October 31, 2010 and 2009.

The following table sets forth by level within the fair value hierarchy the Plan's investment assets and liabilities, if any, as of October 31, 2010 and 2009.

	Level 2	
	2010	2009
Assets:		
Common/collective trust funds:		
Domestic equity investments	\$ 3,075,914	\$ 2,020,647
Fixed income investments	2,358,689	2,358,542
International investments	552,116	413,935
Short-term investments	34,337	57,936
Total assets	<u>\$ 6,021,056</u>	<u>\$ 4,851,060</u>

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

5. Risks and Uncertainties

The Plan provides for various investment options in any combination of domestic equity securities, mutual funds, cash management and corporate obligation investments. Such investments are exposed to various risks, such as interest-rate, market and credit risks. Due to the level of risk associated with certain investments securities and the level of uncertainty related to changes in value of investment securities, it is at least reasonably possible that changes in risks and the value of investments may occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

6. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service dated June 23, 2003, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "Code") and, therefore, the related trust is exempt from taxation. Subsequent to this determination by the Internal Revenue Service, the Plan was amended. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code, and therefore, believes that the Plan, as amended, is qualified and the related trust is tax exempt.

Accounting standards require recording uncertain income tax positions that exist in the Plan's financial statements. Plan management has determined there are no uncertain tax positions and believes there is no adjustment or disclosure required in the Plan's financial statements.

7. Parties-In-Interest

Section 3(14) of ERISA defines a party-in-interest to include, among others, fiduciaries or employees of the Plan, any person who provides services to the Plan or an employer whose employees are covered by the Plan. Accordingly, the management of investments held by the trustee are considered party-in-interest transactions.

Eurotherm Target Benefit Plan

Notes to Financial Statements (continued)

8. Subsequent Events

Effective May 1, 2011, the plan sponsor agreed to merge the Plan with the Invensys 401(k) Plan, such merger to be effected in compliance with Section 414(1) of the Internal Revenue Code of 1986, as amended. The Plan was merged effective May 1, 2011.

The Plan has evaluated subsequent events through August 1, 2011, in connection with the preparation of these financial statements, which is the date the financial statements were available to be issued. During this period, there have been no material events that would require recognition in the financial statements or disclosures to the financial statements.

Supplemental Schedules

Eurotherm Target Benefit Plan

EIN: 54-1063099/ Plan Number: 001

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

October 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Common/collective trust funds (Mellon Bank, N.A.):				
*	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	4,085.559 units	\$ 1,958,712	\$ 2,186,688
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	7,012.988 units	1,073,233	1,094,538
	EB DV Enhanced Mid Cap Core Fund of The Bank of New York Mellon	3,328.784 units	365,839	554,241
	EB NCML EAFE Plus Fund of The Bank of New York Mellon	56,685.421 units	534,117	552,116
	EB DO Large Cap Core Fund of The Bank of New York Mellon	48,006.175 units	480,662	537,669
	The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	55,322.204 units	501,693	533,306
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	2,482.125 units	335,484	356,160

Eurotherm Target Benefit Plan

EIN: 54-1063099/ Plan Number: 001

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

October 31, 2010

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Common/collective trust funds (Mellon Bank, N.A.) (continued):				
*	EB Intermediate Bond Fund of The Bank of New York Mellon	1,935.860 units	\$ 136,929	\$ 172,001
*	EB Temporary Investment Fund of The Bank of New York Mellon	34,336.920 units	34,337	34,337
			<u>\$ 5,421,006</u>	<u>\$ 6,021,056</u>

* Indicates party-in-interest to the Plan.

Eurotherm Target Benefit Plan

EIN: 54-1063099 / Plan No. 001

Schedule H, Line 4j - Schedule of Reportable Transactions

Year Ended October 31, 2010

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i)—Individual security transactions in excess of 5% of plan assets								
The Bank of New York /Mellon								
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	\$ 335,484			\$ 335,484	\$ 335,484	\$ 335,484	
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon		\$ 356,555			322,812	356,555	\$ 33,743
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	284,051				284,051	284,051	
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon		908,338			924,458	908,338	(16,120)
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	325,000				325,000	325,000	
	EB Temporary Investment Fund of The Bank of New York Mellon	596,506				596,506	596,506	
	EB Temporary Investment Fund The Bank of New York Mellon		325,000			325,000	325,000	
	BSDT-Late Money Deposit Account	596,506				596,506	596,506	
	BSDT-Late Money Deposit Account		596,506			596,506	596,506	
	BSDT-Late Money Deposit Account	301,582				301,582	301,582	
	BSDT-Late Money Deposit Account		301,582			301,582	301,582	
	The Boston Company, Inc. Pooled Employee Funds US Large Capitalization Core 130/30 Equity Fund of The Bank of New York Mellon	454,169				454,169	454,169	

Eurotherm Target Benefit Plan

EIN: 54-1063099 / Plan No. 001

Schedule H, Line 4j - Schedule of Reportable Transactions (continued)

Year Ended October 31, 2010

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (iii)—A series of securities transactions in excess of 5% of plan assets								
The Bank of New York /Mellon	BSDT-Late Money Deposit Account	\$ 898,088	\$ 898,088			\$ 898,088	\$ 898,088	
	BSDT-Late Money Deposit Account					898,088	898,088	
	EB Temporary Investment Fund of The Bank of New York Mellon	1,418,832				1,418,832	1,418,832	
	EB Temporary Investment Fund of The Bank of New York Mellon		1,391,017			1,391,017	1,391,017	
	EB DV Enhanced Large Cap Core Fund of The Bank of New York Mellon	512,158				512,158	512,158	
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon	560,331				560,331	560,331	
	EB Active 1-5 Year Government/Credit Fund of The Bank of New York Mellon		187,001			171,942	187,001	\$ 15,059
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon	15,000				15,000	15,000	
	The Boston Company, Inc. Pooled Employee Funds US Small Capitalization Opportunistic Value Equity Fund of The Bank of New York Mellon		394,555			355,912	394,555	38,643

There were no category (ii) or (iv) reportable transactions for the year ended October 31, 2010.