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

2010

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] 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:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN

1b Three-digit plan number (PN) ▶ 007

1c Effective date of plan 01/01/1982

2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.)
YORK INTERNATIONAL CORPORATION

5757 N GREEN BAY AVENUE
GLENDALE, WI 53209

2b Employer Identification Number (EIN)
13-3473472

2c Sponsor's telephone number
414-524-1200

2d Business code (see instructions)
333410

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2011	SHERRY WEINBERG
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2011	SHERRY WEINBERG
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5757 N. GREEN BAY AVENUE
MILWAUKEE, WI 53209-4408

3b Administrator's EIN
38-3406010

3c Administrator's telephone number
414-524-1200

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	1127
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**	661
b	Retired or separated participants receiving benefits	**6b**	166
c	Other retired or separated participants entitled to future benefits	**6c**	321
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1148
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	12
f	Total. Add lines **6d** and **6e**	**6f**	1160
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	5
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:
1B 1G 3D 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:
4A

9a Plan funding arrangement (check all that apply)

(1)		Insurance
(2)		Code section 412(e)(3) insurance contracts
(3)	X	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)	X	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)	X	**R** (Retirement Plan Information)
(2)		**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)	X	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

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

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

A Name of plan
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN

B Three-digit plan number (PN) ▶ 007

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

D Employer Identification Number (EIN)
13-3473472

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1	Enter the valuation date: Month 01 Day 01 Year 2010			
2	Assets:			
a	Market value	**2a**		20415368
b	Actuarial value	**2b**		20415368
3	Funding target/participant count breakdown		**(1)** Number of participants	**(2)** Funding Target
a	For retired participants and beneficiaries receiving payment	**3a**	166	5433990
b	For terminated vested participants	**3b**	310	4038644
c	For active participants:			
	(1) Non-vested benefits	**3c(1)**		57965
	(2) Vested benefits	**3c(2)**		10932714
	(3) Total active	**3c(3)**	651	10990679
d	Total	**3d**	1127	20463313
4	If the plan is at-risk, check the box and complete items (a) and (b) [ ]			
a	Funding target disregarding prescribed at-risk assumptions	**4a**		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	**4b**		
5	Effective interest rate	**5**		6.73 %
6	Target normal cost	**6**		696802

Statement by Enrolled Actuary

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

SIGN HERE

	08/30/2011
Signature of actuary	Date
MARK K. FRIEDMAN	11-06405
Type or print name of actuary	Most recent enrollment number
HEWITT ASSOCIATES	847-295-5000
Firm name	Telephone number (including area code)
100 HALF DAY ROAD LINCOLNSHIRE, IL 60069	
Address of the firm	

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	2092891	1938981
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	184555	0
9	Amount remaining (Item 7 minus item 8)	1908336	1938981
10	Interest on item 9 using prior year's actual return of 20.48 %	390827	397103
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		827998
b	Interest on (a) using prior year's effective rate of 8.00 %		89272
c	Total available at beginning of current plan year to add to prefunding balance		917270
d	Portion of (c) to be added to prefunding balance		0
12	Reduction in balances due to elections or deemed elections	1204848	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12)	1094315	2336084

Part III Funding percentages

14	Funding target attainment percentage	14	83.00 %
15	Adjusted funding target attainment percentage	15	99.76 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.94 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/23/2010	200000				
09/28/2010	3200000				
06/23/2010	200000				
09/29/2010	540000				
			Totals ► 18(b)	4140000	18(c)

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contribution from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3955037

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
5.03 %	6.73 %	6.82 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)	**31**		696802
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment			
b Waiver amortization installment			
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**		
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33)	**34**		696802
		Carryover balance	Prefunding balance / Total balance
35 Balances used to offset funding requirement			
36 Additional cash requirement (item 34 minus item 35)	**36**		696802
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)	**37**		3955037
38 Interest-adjusted excess contributions for current year (see instructions)	**38**		3258235
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	**39**		
40 Unpaid minimum required contribution for all years	**40**		

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2010** **This Form is Open to Public Inspection.**

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan	**B** Three-digit plan number (PN) ▶	
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN		007
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
YORK INTERNATIONAL CORPORATION	13-3473472	

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

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(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)

AON HEWITT

36-2235791

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	ACTUARY	83767	Yes [ ] No [X]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

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

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN

B Three-digit plan number (PN) ▶ 007

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
YORK INTERNATIONAL CORPORATION

D Employer Identification Number (EIN)
13-3473472

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: JOHNSON CONTROLS MASTER PENSION TRU

b Name of sponsor of entity listed in (a): JOHNSON CONTROLS, INC.

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)
39-0380010-024	M	26608224

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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

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

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN

B Three-digit plan number (PN) ▶ 007

C Plan sponsor's name as shown on line 2a of Form 5500
YORK INTERNATIONAL CORPORATION

D Employer Identification Number (EIN)
13-3473472

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)	1050000	
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	343	499
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	19428930	26608224
(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)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(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	20479273	26608723
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h	8940	3964
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	8940	3964
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	20470333	26604759

Part II Income and Expense Statement

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

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	4140000	
	(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)		4140000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		
	(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)		
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		2708141
(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		6848141
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	590439	
(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)		590439
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)	78791	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	44485	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		123276
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		713715
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		6134426
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) [X] Disclaimer (4) [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: COLEMAN & WILLIAMS, LTD. (2) EIN: 39-1658905

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.)	**4a**		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.)	**4b**		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.)	**4c**		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.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		20000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		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?	**4g**		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?	**4h**		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.)	**4i**	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.)	**4j**		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?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		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.	**4n**		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)

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

2010

This Form is Open to Public Inspection.

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

A Name of plan
YORK INT.CORPORATION PENSION PLAN NUMBER SEVEN

B Three-digit plan number (PN) ▶ 007

C Plan sponsor's name as shown on line 2a of Form 5500
YORK INTERNATIONAL CORPORATION

D Employer Identification Number (EIN)
13-3473472

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1**

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 41-6571370

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** 4

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☒ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

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):

---

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):

COLEMAN & WILLIAMS, LTD.
A Professional Services Firm

INDEPENDENT AUDITORS' REPORT

To the Participants and Administrator of the
Johnson Controls, Inc. Pension Plans:

We were engaged to audit the accompanying statements of net assets available for benefits of the Johnson Controls, Inc. Pension Plans (the "Plans" as defined in Note 1) as of December 31, 2010 and 2009, and the related statement of changes in net assets available for benefits for the year ended December 31, 2010 and the supplemental schedules as listed in the table of contents. These financial statements and supplemental schedules are the responsibility of the Plans' management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended, the Plans' administrator instructed us not to perform, and we did not perform any auditing procedures with respect to the information summarized in Note 11 as of and for the years ended December 31, 2010 and 2009, which was certified by U.S. Bank, N.A., the "Trustee" of the Plans, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plans' administrator that the Trustee holds the Plans' investment assets and executes investment transactions. The Plans' administrator obtained certifications from the Trustee as of December 31, 2010 and 2009 and for the year ended December 31, 2010 that the information provided to the Plans' administrator by the Trustee is complete and accurate.

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

Coleman & Williams, Ltd.

Milwaukee, Wisconsin
September 16, 2011

316 North Milwaukee Street, Suite 350
Milwaukee, Wisconsin 53202
Telephone 414.278.0170
Facsimile 414.278.1169

York International Corporation Pension Plan Number Seven (Norman Plant)
Plan # 007, EIN # 13-3473472
Schedule H Line 4i- Schedule of Assets (Held at end of Year)
December 31, 2010

Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment (Including Maturity Date, Rate of Interest, Par or Maturity Value)	Current Value
Master Trust	Johnson Controls Master Pension Trust	$ 26,608,224
Total investments		$ 26,608,224

* Indicates party-in-interest.

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Schedule SB, line 26—Schedule of Active Participant Data as of January 1, 2010

Number of Participants

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		7								
25-29		21	2							
30-34		17	11	13	1					
35-39		26	14	43	8					
40-44		24	13	38	19	12				
45-49		26	21	28	25	14	12			
50-54		12	14	19	26	20	20			
55-59		11	7	18	17	12	23			
60-64		6	3	4	16	7	15			
65-69					1	1	1			
70+				1			2			

N-651

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

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

Interest Rates	Based on segment rates with a four-month lookback.
1st Segment Rate	5.03%.
2nd Segment Rate	6.73%.
3rd Segment Rate	6.82%.
Optional Payment Form Election Percentage	80% Single Life Annuity. 20% Joint and 50% Survivor.
Retirement Age	
Active Participants	See Table 1.
Terminated Vested Participants	
Less Than Ten Years of Service at Termination	65.
Ten or More Years of Service at Termination	62.
Mortality Rates	
Healthy and Disabled	2010 Static Mortality Table for Annuitants and Non-Annuitants Per §1.430(h)(3)-1(e).
Withdrawal Rates	See Table 2.
Disability Rates	None.
Surviving Spouse Benefit	It is assumed that 80% of males and 80% of females have an eligible spouse, and that males are three years older than their spouses.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of $195,000.
Valuation of Plan Assets	Fair market value.
Trust Expenses Included in Target Normal Cost	Based on the prior year actual plan administrative expenses. $105,143 for 2010.
Actuarial Method	Standard Unit Credit Cost Method.
Valuation Date	January 1, 2010.

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Table 1

Retirement Rates

Age	Rate
55	2.00%
56	2.00%
57	4.00%
58	4.00%
59	4.00%
60	4.00%
61	4.00%
62	30.00%
63	15.00%
64	10.00%
65	50.00%
66	50.00%
67	50.00%
68	50.00%
69	50.00%
70+	100.00%

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Table 2—Page 1 of 2

Withdrawal Rates

	Years of Service				
Age	**0**	**1**	**2**	**3**	**4+**
20	90.00%	75.00%	60.00%	45.00%	30.00%
21	84.60%	70.50%	56.40%	42.30%	28.20%
22	79.20%	66.00%	52.80%	39.60%	26.40%
23	73.80%	61.50%	49.20%	36.90%	24.60%
24	69.00%	57.50%	46.00%	34.50%	23.00%
25	64.20%	53.50%	42.80%	32.10%	21.40%
26	60.00%	50.00%	40.00%	30.00%	20.00%
27	55.80%	46.50%	37.20%	27.90%	18.60%
28	52.20%	43.50%	34.80%	26.10%	17.40%
29	48.60%	40.50%	32.40%	24.30%	16.20%
30	45.00%	37.50%	30.00%	22.50%	15.00%
31	42.00%	35.00%	28.00%	21.00%	14.00%
32	39.00%	32.50%	26.00%	19.50%	13.00%
33	36.00%	30.00%	24.00%	18.00%	12.00%
34	33.60%	28.00%	22.40%	16.80%	11.20%
35	31.20%	26.00%	20.80%	15.60%	10.40%
36	28.80%	24.00%	19.20%	14.40%	9.60%
37	26.40%	22.00%	17.60%	13.20%	8.80%
38	24.60%	20.50%	16.40%	12.30%	8.20%
39	22.80%	19.00%	15.20%	11.40%	7.60%
40	21.00%	17.50%	14.00%	10.50%	7.00%
41	9.60%	8.00%	6.40%	4.80%	3.20%
42	9.00%	7.50%	6.00%	4.50%	3.00%
43	8.40%	7.00%	5.60%	4.20%	2.80%
44	7.80%	6.50%	5.20%	3.90%	2.60%
45	7.20%	6.00%	4.80%	3.60%	2.40%
46	6.60%	5.50%	4.40%	3.30%	2.20%
47	6.00%	5.00%	4.00%	3.00%	2.00%
48	5.40%	4.50%	3.60%	2.70%	1.80%
49	4.80%	4.00%	3.20%	2.40%	1.60%

Table 2—Page 2 of 2

Withdrawal Rates

	Years of Service				
Age	**0**	**1**	**2**	**3**	**4+**
50	4.20%	3.50%	2.80%	2.10%	1.40%
51	3.60%	3.00%	2.40%	1.80%	1.20%
52	3.00%	2.50%	2.00%	1.50%	1.00%
53	2.40%	2.00%	1.60%	1.20%	0.80%
54	2.10%	1.75%	1.40%	1.05%	0.70%
55	1.80%	1.50%	1.20%	0.90%	0.60%
56	1.50%	1.25%	1.00%	0.75%	0.50%
57	1.20%	1.00%	0.80%	0.60%	0.40%
58	0.90%	0.75%	0.60%	0.45%	0.30%
59	0.60%	0.50%	0.40%	0.30%	0.20%
60+	0.30%	0.25%	0.20%	0.15%	0.10%

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Schedule SB, line 19—Discounted Employer Contributions

Year applied for contributions: 2010

Date	Amount	Interest Rate	Interest Adjusted Contribution
March 23, 2010	$ 200,000	6.73%	$ 197,130
June 23, 2010	200,000	6.73%	193,920
September 28, 2010	3,200,000	6.73%	3,049,479
September 29, 2010	540,000	6.73%	514,508
Total Contribution	$ 4,140,000		$ 3,955,037

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Schedule SB, line 25—Change in Funding Method

The funding valuation reflects the following method changes:

- A change in the interest rate basis from the full yield curve with a two-month lookback to segment rates with a four-month lookback.
- A change in the asset valuation method from using a two-year (three-point) smoothed value method to using the market value.

Note that these changes will affect the comparability of the funding valuation results for the 2010 plan year and the funding valuation results for prior plan years.

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

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

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

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

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55.5	2.00%	1.0000	1.11
56.5	2.00%	0.9800	1.11
57.5	4.00%	0.9604	2.21
58.5	4.00%	0.9220	2.16
59.5	4.00%	0.8851	2.11
60.5	4.00%	0.8497	2.06
61.5	4.00%	0.8157	2.01
62.5	30.00%	0.7831	14.68
63.5	15.00%	0.5482	5.22
64.5	10.00%	0.4659	3.01
65.5	50.00%	0.4193	13.73
66.5	50.00%	0.2097	6.97
67.5	50.00%	0.1048	3.54
68.5	50.00%	0.0524	1.80
69.5	50.00%	0.0262	0.91
70	100.00%	0.0131	0.92
		Weighted Average	63.55

Schedule SB Attachment (Form 5500)—2010 Plan Year
York Plan 7
EIN: 13-3473472 PN: 007

Schedule SB, Part V—Summary of Plan Provisions

Effective Date	The effective date of adoption is January 1, 1982.
Covered Employees	Norman hourly employees.
Status of Plan	Ongoing.
Participation	Age 21 and one year of service.
Normal Retirement	
Eligibility	Age 65.
Benefit	$27.00 per month multiplied by years of credited service.
Early Retirement	
Eligibility	Age 55 with ten years of service.
Benefit	The normal retirement benefit based on service to date of retirement, but reduced by 0.6% multiplied by the number of months by which the early retirement date precedes the participant's normal retirement date.
Total and Permanent Disability Retirement	
Eligibility	Ten years of service.
Benefit	Normal retirement benefit based on service to date of disability.
Deferred Vested	
Eligibility	Five years of service.
Benefit	The accrued normal retirement benefit payable at age 65. Benefits may commence early with ten years of service. Benefits are reduced for early commencement.
Preretirement Surviving Spouse Benefit	
Eligibility	Eligible for a vested benefit.
Benefit	Early Retirement Eligible—50% of 95% of the benefit the participant was entitled to receive under the early retirement provisions had he terminated employment as of the date of death. This benefit is payable for the life of the spouse.

	Not Early Retirement Eligible—50% of 95% of the benefit to which the participant was entitled under the plan provisions had the participant terminated employment on the date of death, survived to his earliest retirement age, and begun to receive an immediate life annuity at his early retirement date. This benefit is payable for the remaining lifetime of the spouse, beginning when the participant would have been eligible to retire early.
Optional Payment Form	
Conversion Interest Rate	6.00%.
Conversion Mortality	1951 Group Annuity Mortality Table (Males) with ages set back one year for participants and six years for beneficiaries.
Definitions	
Credited Service	Based on elapsed time.
Vesting Service	One year of vesting service is credited for each year a participant completes 1,000 or more hours of service.
Normal Form of Payment	
Single Participant	Life Annuity.
Married Participant	50% Joint and Survivor Annuity. This benefit is the actuarial equivalent of the benefit payable as a life annuity.

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

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

COLEMAN & WILLIAMS, LTD.
A Professional Services Firm

JOHNSON CONTROLS, INC.
PENSION PLANS

FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

COLEMAN & WILLIAMS, LTD.
A Professional Services Firm

JOHNSON CONTROLS, INC.
PENSION PLANS
FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

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*Note: Other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income and Security Act of 1974 as amended have been omitted because they are not applicable.

COLEMAN & WILLIAMS, LTD.
A Professional Services Firm

INDEPENDENT AUDITORS' REPORT

To the Participants and Administrator of the
Johnson Controls, Inc. Pension Plans:

We were engaged to audit the accompanying statements of net assets available for benefits of the Johnson Controls, Inc. Pension Plans (the "Plans" as defined in Note 1) as of December 31, 2010 and 2009, and the related statement of changes in net assets available for benefits for the year ended December 31, 2010 and the supplemental schedules as listed in the table of contents. These financial statements and supplemental schedules are the responsibility of the Plans' management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended, the Plans' administrator instructed us not to perform, and we did not perform any auditing procedures with respect to the information summarized in Note 11 as of and for the years ended December 31, 2010 and 2009, which was certified by U.S. Bank, N.A., the "Trustee" of the Plans, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the Plans' administrator that the Trustee holds the Plans' investment assets and executes investment transactions. The Plans' administrator obtained certifications from the Trustee as of December 31, 2010 and 2009 and for the year ended December 31, 2010 that the information provided to the Plans' administrator by the Trustee is complete and accurate.

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

Coleman & Williams, Ltd.

Milwaukee, Wisconsin
September 16, 2011

316 North Milwaukee Street, Suite 350
Milwaukee, Wisconsin 53202
Telephone 414.278.0170
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JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2010

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Techno Trim (046)	ASG Production (006)	York Plan 4 (018)	York Plan 6 (019)
ASSETS							
Investment in Johnson Controls, Inc. Master Pension Trust	$ 1,851,283,072	$ 343,393,473	$ 155,551,067	$ 3,861,579	$ 6,095,537	$ 103,965,023	$ 3,173,919
Pension overpayments receivable	108,365	5,181	2,452	-	-	3,840	-
Total assets	1,851,391,437	343,398,654	155,553,519	3,861,579	6,095,537	103,968,863	3,173,919
LIABILITIES							
Accrued administrative expenses	167,443	19,518	19,805	320	2,879	3,541	800
Total liabilities	167,443	19,518	19,805	320	2,879	3,541	800
Net assets available for benefits	$ 1,851,223,994	$ 343,379,136	$ 155,533,714	$ 3,861,259	$ 6,092,658	$ 103,965,322	$ 3,173,119

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2010

	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)
ASSETS							
Investment in Johnson Controls, Inc. Master Pension Trust	$ 26,608,224	$ 10,409,587	$ 19,833,885	$ 5,950,783	$ 17,559,820	$ 15,155,506	$ 20,916,920
Pension overpayments receivable	499	110	1,594	134	-	121	-
Total assets	26,608,723	10,409,697	19,835,479	5,950,917	17,559,820	15,155,627	20,916,920
LIABILITIES							
Accrued administrative expenses	3,964	1,353	1,758	2,122	1,740	967	5,136
Total liabilities	3,964	1,353	1,758	2,122	1,740	967	5,136
Net assets available for benefits	$ 26,604,759	$ 10,408,344	$ 19,833,721	$ 5,948,795	$ 17,558,080	$ 15,154,660	$ 20,911,784

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2010

	York Plan 23 (031)	Participating Plans' Total
ASSETS		
Investment in Johnson Controls, Inc. Master Pension Trust	$ 10,716,451	$ 2,594,474,846
Pension overpayments receivable	91	122,387
Total assets	10,716,542	2,594,597,233
LIABILITIES		
Accrued administrative expenses	1,407	232,753
Total liabilities	1,407	232,753
Net assets available for benefits	$ 10,715,135	$ 2,594,364,480

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Techno Trim (046)	ASG Production (006)	York Plan 4 (018)	York Plan 6 (019)
ASSETS							
Investment in Johnson Controls, Inc Master Pension Trust	$ 1,364,736,855	$ 242,387,474	$ 129,508,465	$ 3,206,419	$ 3,761,927	$ 82,331,651	$ 2,071,597
Employer contribution receivable	136,000,000	26,650,000	13,560,000	10,000	200,000	5,100,000	450,000
Pension overpayments receivable	13,777	3,779	14,020	-	-	3,854	-
Total assets	1,500,750,632	269,041,253	143,082,485	3,216,419	3,961,927	87,435,505	2,521,597
LIABILITIES							
Accrued administrative expenses	393,504	42,084	57,951	3,712	7,554	10,352	2,662
Total liabilities	393,504	42,084	57,951	3,712	7,554	10,352	2,662
Net assets available for benefits	$ 1,500,357,128	$ 268,999,169	$ 143,024,534	$ 3,212,707	$ 3,954,373	$ 87,425,153	$ 2,518,935

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009

	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)
ASSETS							
Investment in Johnson Controls, Inc Master Pension Trust	$ 19,428,930	$ 6,443,518	$ 18,506,246	$ 3,756,553	$ 11,880,539	$ 11,517,609	$ 12,903,013
Employer contribution receivable	1,050,000	1,450,000	-	620,000	1,925,000	675,000	2,100,000
Pension overpayments receivable	343	-	154	-	26	-	-
Total assets	20,479,273	7,893,518	18,506,400	4,376,553	13,805,565	12,192,609	15,003,013
LIABILITIES							
Accrued administrative expenses	8,940	3,902	4,962	4,493	4,394	2,858	12,176
Total liabilities	8,940	3,902	4,962	4,493	4,394	2,858	12,176
Net assets available for benefits	$ 20,470,333	$ 7,889,616	$ 18,501,438	$ 4,372,060	$ 13,801,171	$ 12,189,751	$ 14,990,837

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2009

	York Plan 23 (031)	Participating Plans' Total
ASSETS		
Investment in Johnson Controls, Inc Master Pension Trust	$ 6,859,725	$ 1,919,300,521
Employer contribution receivable	1,390,000	191,180,000
Pension overpayments receivable	-	35,953
Total assets	8,249,725	2,110,516,474
LIABILITIES		
Accrued administrative expenses	3,725	563,269
Total liabilities	3,725	563,269
Net assets available for benefits	$ 8,246,000	$ 2,109,953,205

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2010

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Techno Trim (046)	ASG Production (006)	York Plan 4 (018)	York Plan 6 (019)
ADDITIONS							
Additions to plan assets attributed to:							
Investment income							
Plan interest in Johnson Controls, Inc Master Pension Trust	$ 192,343,619	$ 36,142,942	$ 16,799,271	$ 397,164	$ 588,350	$ 11,343,560	$ 346,751
Employer contributions	250,900,000	52,020,000	4,775,000	472,000	1,695,000	14,660,000	480,000
Total additions	443,243,619	88,162,942	21,574,271	869,164	2,283,350	26,003,560	826,751
DEDUCTIONS							
Deductions from plan assets attributed to:							
Benefits paid to participants	89,101,700	13,292,171	8,539,944	196,427	46,069	9,333,130	128,603
Administrative expenses	3,275,053	490,804	525,147	24,185	98,996	130,261	43,964
Total deductions	92,376,753	13,782,975	9,065,091	220,612	145,065	9,463,391	172,567
Net increase	350,866,866	74,379,967	12,509,180	648,552	2,138,285	16,540,169	654,184
Net assets available for benefits, beginning of year	1,500,357,128	268,999,169	143,024,534	3,212,707	3,954,373	87,425,153	2,518,935
Net assets available for benefits, end of year	$ 1,851,223,994	$ 343,379,136	$ 155,533,714	$ 3,861,259	$ 6,092,658	$ 103,965,322	$ 3,173,119

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2010

	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)
ADDITIONS							
Additions to plan assets attributed to:							
Investment income							
Plan interest in Johnson Controls, Inc. Master Pension Trust	$ 2,708,141	$ 1,087,584	$ 2,248,404	$ 617,670	$ 1,855,693	$ 1,584,290	$ 2,145,432
Employer contributions	4,140,000	1,666,000	-	1,095,000	2,560,000	1,885,000	4,270,000
Total additions	6,848,141	2,753,584	2,248,404	1,712,670	4,415,693	3,469,290	6,415,432
DEDUCTIONS							
Deductions from plan assets attributed to:							
Benefits paid to participants	590,439	177,291	846,146	70,464	589,531	455,303	366,579
Administrative expenses	123,276	57,565	69,975	65,471	69,253	49,078	127,906
Total deductions	713,715	234,856	916,121	135,935	658,784	504,381	494,485
Net increase	6,134,426	2,518,728	1,332,283	1,576,735	3,756,909	2,964,909	5,920,947
Net assets available for benefits, beginning of year	20,470,333	7,889,616	18,501,438	4,372,060	13,801,171	12,189,751	14,990,837
Net assets available for benefits, end of year	$ 26,604,759	$ 10,408,344	$ 19,833,721	$ 5,948,795	$ 17,558,080	$ 15,154,660	$ 20,911,784

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2010

	York Plan 23 (031)	Participating Plans' Total
ADDITIONS		
Additions to plan assets attributed to:		
Investment income		
Plan interest in Johnson Controls, Inc. Master Pension Trust	$ 1,129,285	$ 271,338,156
Employer contributions	1,766,000	342,384,000
Total additions	2,895,285	613,722,156
DEDUCTIONS		
Deductions from plan assets attributed to:		
Benefits paid to participants	372,352	124,106,149
Administrative expenses	53,798	5,204,732
Total deductions	426,150	129,310,881
Net increase	2,469,135	484,411,275
Net assets available for benefits, beginning of year	8,246,000	2,109,953,205
Net assets available for benefits, end of year	$ 10,715,135	$ 2,594,364,480

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2010

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Techno Trim (046)	ASG Production (006)	York Plan 4 (018)	York Plan 6 (019)
Actuarial present value of accumulated plan benefits							
Vested benefits							
Participants currently receiving payments	$ 501,113,980	$ 119,359,538	$ 67,459,010	$ 1,195,671	$ 176,228	$ 59,486,888	$ 985,162
Participants with deferred benefits	307,894,347	36,071,157	41,353,552	1,020,151	1,278,948	6,952,918	730,297
Other participants	461,928,848	75,524,916	565,182	593,779	1,334,885	11,201,080	344,298
	1,270,937,175	230,955,611	109,377,744	2,809,601	2,790,061	77,640,886	2,059,757
Nonvested benefits	71,861,056	6,767,913	490,812	51,073	343,224	3,212,714	130,380
Actuarial present value of accumulated plan benefits	$ 1,342,798,231	$ 237,723,524	$ 109,868,556	$ 2,860,674	$ 3,133,285	$ 80,853,600	$ 2,190,137

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2010

	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)
Actuarial present value of accumulated plan benefits							
Vested benefits							
Participants currently receiving payments	$ 4,897,077	$ 1,295,857	$ 5,432,802	$ 523,543	$ 4,531,442	$ 4,128,549	$ 2,975,483
Participants with deferred benefits	3,284,159	1,806,520	1,938,710	832,253	2,021,005	2,189,441	1,662,976
Other participants	8,875,346	3,339,948	5,003,395	2,103,805	5,020,868	4,102,961	7,443,788
	17,056,582	6,442,325	12,374,907	3,459,601	11,573,315	10,420,951	12,082,247
Nonvested benefits	66,024	68,386	196,520	67,206	169,130	50,829	819,576
Actuarial present value of accumulated plan benefits	$ 17,122,606	$ 6,510,711	$ 12,571,427	$ 3,526,807	$ 11,742,445	$ 10,471,780	$ 12,901,823

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2010

	York Plan 23 (031)	Participating Plans' Total
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	$ 2,712,299	$ 776,273,529
Participants with deferred benefits	1,031,480	410,067,914
Other participants	3,173,675	590,556,774
	6,917,454	1,776,898,217
Nonvested benefits	64,614	84,359,457
Actuarial present value of accumulated plan benefits	$ 6,982,068	$ 1,861,257,674

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2009

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Cadiz (030)	Greenfield (032)	Techno Trim (046)	Shelbyville (053)
Actuarial present value of accumulated plan benefits							
Vested benefits							
Participants currently receiving payments	$ 466,727,088	$ 109,850,573	$ 53,411,220	$ 5,275,261	$ 5,836,106	$ 1,046,855	$ -
Participants with deferred benefits	284,769,483	38,920,552	25,642,225	2,688,101	1,844,322	900,725	97,451
Other participants	408,355,679	68,374,246	1,133,098	8,992,672	4,126,423	704,893	520,496
	1,159,852,250	217,145,371	80,186,543	16,956,034	11,806,851	2,652,473	617,947
Nonvested benefits	70,505,021	9,433,688	117,435	2,609	642,877	54,693	11,176
Actuarial present value of accumulated plan benefits	$ 1,230,357,271	$ 226,579,059	$ 80,303,978	$ 16,958,643	$ 12,449,728	$ 2,707,166	$ 629,123

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2009

	ASG Production (006)	West Carrollton (130)	York Plan 4 (018)	York Plan 6 (019)	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)
Actuarial present value of accumulated plan benefits							
Vested benefits							
Participants currently receiving payments	$ 127,274	$ 136,815	$ 58,404,366	$ 778,604	$ 4,403,960	$ 1,019,522	$ 5,533,006
Participants with deferred benefits	1,481,078	1,835,149	6,668,998	872,945	2,820,614	1,147,435	1,720,869
Other participants	1,165,194	21,564	11,977,077	294,629	8,544,404	3,506,220	4,827,923
	2,773,546	1,993,528	77,050,441	1,946,178	15,768,978	5,673,177	12,081,798
Nonvested benefits	158,625	742	3,527,086	134,978	310,164	135,759	264,234
Actuarial present value of accumulated plan benefits	$ 2,932,171	$ 1,994,270	$ 80,577,527	$ 2,081,156	$ 16,079,142	$ 5,808,936	$ 12,346,032

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF ACCUMULATED PLAN BENEFITS
JANUARY 1, 2009

	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)	York Plan 23 (031)	Participating Plans' Total
Actuarial present value of accumulated plan benefits						
Vested benefits						
Participants currently receiving payments	$ 435,549	$ 4,341,219	$ 3,667,068	$ 2,478,483	$ 2,606,796	$ 726,079,765
Participants with deferred benefits	689,522	951,894	2,281,028	2,393,357	951,844	378,677,592
Other participants	2,053,530	5,677,717	4,258,487	5,879,318	2,806,320	543,219,890
	3,178,601	10,970,830	10,206,583	10,751,158	6,364,960	1,647,977,247
Nonvested benefits	139,185	200,586	72,749	1,143,074	268,346	87,123,027
Actuarial present value of accumulated plan benefits	$ 3,317,786	$ 11,171,416	$ 10,279,332	$ 11,894,232	$ 6,633,306	$ 1,735,100,274

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS
YEAR ENDED JANUARY 1, 2010

	Johnson Controls Pension (001)	Battery Division Hourly (016)	Battery Division Owosso UAW (017)	Techno Trim (046)	ASG Production (006)	York Plan 4 (018)	York Plan 6 (019)
Actuarial present value of accumulated plan benefits at January 1, 2009	$ 1,230,357,271	$ 226,579,059	$ 80,303,978	$ 2,707,166	$ 2,932,171	$ 80,577,527	$ 2,081,156
Increase (decrease) attributed to:							
Interest accumulation	95,987,905	17,638,323	6,162,994	212,150	232,679	6,141,952	161,554
Benefits paid	(62,213,791)	(12,439,349)	(6,661,257)	(112,762)	(48,288)	(7,755,446)	(125,880)
Assumption changes	3,223,248	474,848	(36,116)	3,985	6,118	151,031	4,451
Plan amendments	23,162,010	458,952	-	120,337	7,698	1,372,486	-
Plan merger (Note 9)	622,879	-	31,329,979	-	-	-	-
Other*	51,658,709	5,011,691	(1,231,022)	(70,202)	2,907	366,050	68,856
Net increase	112,440,960	11,144,465	29,564,578	153,508	201,114	276,073	108,981
Actuarial present value of accumulated plan benefits at January 1, 2010	$ 1,342,798,231	$ 237,723,524	$ 109,868,556	$ 2,860,674	$ 3,133,285	$ 80,853,600	$ 2,190,137

* The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefit accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS
YEAR ENDED JANUARY 1, 2010

	York Plan 7 (020)	York Plan 12 (023)	York Plan 13 (024)	York Plan 14 (025)	York Plan 15 (026)	York Plan 18 (028)	York Plan 19 (029)
Actuarial present value of accumulated plan benefits at January 1, 2009	$ 16,079,142	$ 5,808,936	$ 12,346,032	$ 3,317,786	$ 11,171,416	$ 10,279,332	$ 11,894,232
Increase (decrease) attributed to:							
Interest accumulation	1,265,838	459,412	960,757	262,638	872,922	804,640	939,215
Benefits paid	(522,395)	(135,182)	(686,354)	(70,988)	(529,974)	(451,343)	(314,132)
Assumption changes	30,645	12,633	23,313	6,705	20,302	18,882	(272,973)
Plan amendments	-	-	-	-	104,022	-	-
Plan merger (Note 9)	-	-	-	-	-	-	-
Other*	269,376	364,912	(72,321)	10,666	103,757	(179,731)	655,481
Net increase	1,043,464	701,775	225,395	209,021	571,029	192,448	1,007,591
Actuarial present value of accumulated plan benefits at January 1, 2010	$ 17,122,606	$ 6,510,711	$ 12,571,427	$ 3,526,807	$ 11,742,445	$ 10,471,780	$ 12,901,823

* The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefit accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS
YEAR ENDED JANUARY 1, 2010

	York Plan 23 (031)	Participating Plans' Total
Actuarial present value of accumulated plan benefits at January 1, 2009	$ 6,633,306	$ 1,703,068,510
Increase (decrease) attributed to:		
Interest accumulation	518,787	132,621,766
Benefits paid	(302,750)	(92,369,891)
Assumption changes	13,668	3,680,740
Plan amendments	-	25,225,505
Plan merger (Note 9)	-	31,952,858
Other*	119,057	57,078,186
Net increase	348,762	158,189,164
Actuarial present value of accumulated plan benefits at January 1, 2010	$ 6,982,068	$ 1,861,257,674

* The "Other" component represents the normal operation of the pension plan. It consists primarily of the increase due to ongoing benefit accruals (if any) and those items of plan experience that are not associated with plan asset performance.

See the notes to the financial statements.

JOHNSON CONTROLS, INC.
PENSION PLANS
NOTES TO THE FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

NOTE 1 – DESCRIPTION OF PLANS

The following description of Johnson Controls, Inc. pension plans (the "Plans") provides only general information. Participants should refer to the plan documents provided to all participants for a more complete description of the Plans' provisions.

GENERAL

The Plans are defined benefit pension plans that cover eligible employees of Johnson Controls, Inc. and designated affiliates ("Company"). The Plans are subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Plans are administered by the Employee Benefit Policy Committee appointed by the Company. Hewitt Associates LLC contracts to be responsible for plan administration and is the third-party administrator.

Plans included in the financial statements are as follows (Plan numbers indicate Master Trust account numbers, not Plan numbers filed with the Internal Revenue Service ("IRS")). Refer to Note 9 for a discussion of Plan mergers occurring at December 31, 2009.

Name of Plan	Eligible Employees (Subject to Other Plan Requirements)
Johnson Controls Pension Plan (Johnson Controls Pension – Plan 001)	Salaried, nonunion production employees of the Company; certain salaried employees of the East York, Pennsylvania and Albany, New York plants; Employees subject to the terms and conditions of the Collective Bargaining Agreement between the Company and the Yorkco Salaried Employees' Association; Union production employees of the Company's Shelbyville, Kentucky plant
Johnson Controls Pension Plan Battery Division Hourly Employees (Battery Division Hourly – Plan 016)	Hourly employees of the Company's Power Solutions business

JOHNSON CONTROLS, INC.
PENSION PLANS
NOTES TO THE FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

Name of Plan	Eligible Employees (Subject to Other Plan Requirements)
Johnson Controls Pension Plan Battery Division Owosso UAW Employees (Battery Division Owosso UAW – Plan 017)	Hourly employees of the Company's Power Solutions business Owosso, Michigan plant; Building Efficiency plant in Lexington, Kentucky; Hoover's Automotive Systems Group's Adrian, Michigan, Chester, Pennsylvania, and Vincennes, Indiana plants, Whitmore Lake, Michigan plant; Hoover's Engineered Plastics Division Erie, Pennsylvania plant; Production employees of the Company's Milwaukee, Wisconsin production facilities, except production employees of the Company's Power Solutions business, who are covered by another defined benefit pension plan; Production hourly employees of the Company's Building Efficiency business Goshen, Indiana plant; Production hourly employees of the Company's Building Efficiency business Watertown, Wisconsin plant; Union hourly production and maintenance employees of the Mt. Clemens, Michigan facility; Union hourly production and maintenance employees of the Plymouth, Michigan seating facility; Hourly employees of Hoover's Automotive Systems Group, Oberlin, Ohio plant; Hourly employees of Hoover's Automotive Systems Group, Johns Creek, Georgia plant; Union and nonunion hourly employees of the Madisonville, Kentucky and Medina, Ohio plants; Elyria and Miller Picking for employees represented by the United Steelworkers plants; Hourly employees of Hoover's Automotive Systems Group Cadiz, Kentucky plant; Hourly employees of Hoover's Automotive Systems Group Greenfield, Ohio plant; and Union production employees of the Company's West Carrollton, Ohio plant
TechnoTrim, Inc. Pension Plan for Salaried Employees (TechnoTrim – Plan 046)	Salaried employees of TechnoTrim
Johnson Controls Automotive Systems Group Production Employees Pension Plan (ASG Production – Plan 006)	Hourly employees of the Battle Creek, Michigan; Oklahoma City, Oklahoma; Earth City, Missouri; and Shreveport, Louisiana plants
York International Corporation Pension Plan Number Four (UAW) (York Plan 4 – Plan 018)	Employees subject to the terms and conditions of the Collective Bargaining Agreement between the Company and the International Union, United Automobile, Aerospace, and Agricultural Implement Workers of America, UAW and Local Union No. 1872

JOHNSON CONTROLS, INC.
PENSION PLANS
NOTES TO THE FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

Name of Plan	Eligible Employees (Subject to Other Plan Requirements)
York International Corporation Pension Plan Number Six (Field Wage) (York Plan 6 – Plan 019)	Certain nonunion field wage employees of the Engineered Systems Division
York International Corporation Pension Plan Number Seven (Norman Plant) (York Plan 7 – Plan 020)	Nonunion hourly employees of the Norman, Oklahoma plant
York International Corporation Pension Plan Number Twelve (York Plan 12 – Plan 023)	Nonunion employees of the Frigid Coil East division, Tempmaster and former salaried employees of the Portland, Oregon and Salisbury, Maryland facilities
York International Corporation Pension Plan Number Thirteen (York Plan 13 – Plan 024)	Non-bargaining employees in the Frigid Coil West, Imeco and Frick divisions
York International Corporation Pension Plan Number Fourteen (York Plan 14 – Plan 025)	Nonunion employees at the Engineered Systems and the RECO Refrigeration San Antonio, Texas plants
York International Corporation Pension Plan Number Fifteen (York Plan 15 – Plan 026)	Union employees of the Frick Factory
York International Corporation Pension Plan Number Eighteen (York Plan 18 – Plan 028)	Salaried employees of Evcon Industries, Inc.
York International Corporation Pension Plan Number Nineteen (York Plan 19 – Plan 029)	Hourly employees of Evcon Industries, Inc., including employees covered by the Collective Bargaining Agreement with the International Association of Machinists and Aerospace Workers AFL-CIO District 70, Local 2799
York International Corporation Miller-Picking Pension Plan (York Plan 23 – Plan 031)	Nonunion employees of the Miller-Picking division

VESTING

One year of vesting service is credited each year a participant completes 1,000 or more hours of service. A participant receives a year of vesting service for each 12 months of employment by the Company or an affiliated company beginning on the first day of the month of hiring and ending on the severance date. The participant also receives partial vesting service for less than a 12-month period. A break in service of less than 12 months also counts as vesting service. The participant is fully vested after five years of vesting service. For employees hired by Johnson Controls after the acquisition of Findlay Industries West Carrollton, Ohio facility, the hire date with Findlay Industries is used to credit vesting service.

FUNDING POLICY

The Company's funding policy is to make contributions to the Plans in amounts that meet or exceed the minimum amounts required by ERISA. The Company's contributions for the years ended December 31, 2010 and 2009 met or exceeded the ERISA required minimum amounts.

Although it has not expressed any intention to do so, the Company has the right under the Plans to discontinue its contributions at any time and to terminate the Plans subject to the provisions set forth in ERISA.

ADMINISTRATIVE EXPENSES

Administrative expenses are paid by the Plans, as allowed by the Plans' provisions, with all remaining expenses paid by the Company.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF PRESENTATION

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

USE OF ESTIMATES

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

JOHNSON CONTROLS, INC. MASTER PENSION TRUST

The Company has entered into a Master Pension Trust agreement (the "Master Trust") with U.S. Bank, N.A. (the "Trustee"). Under the agreement, the Plans participate under a master trust arrangement whereby all the assets of the plans are pooled and invested in one or more investment accounts.

The Master Trust holds investments in short-term securities, U.S. government securities, bonds, mutual and pooled equity funds and common stocks as of December 31, 2010 and 2009.

The Company requires collateral at a minimum of 102% of the value of any securities lending transactions.

Each Plan's interest in the investments of the Master Trust is evidenced by units of participation, as no Plan has a right, title or ownership of any of the specific assets in the Master Trust. In accordance with the Master Trust agreement, net investment income of the Master Trust is prorated to each participating Plan in proportion to the number of units held by each Plan. Plan participation in the Master Trust is adjusted as required to reflect benefit payments to the Plans' participants and for Company contributions.

The following represents the percentage interest in the Master Trust by Plan:

	December 31,	
	2010	2009
Johnson Controls Pension (001)	71.1%	71.0%
Battery Division Hourly (016)	13.2%	12.6%
Battery Division Owosso UAW (017)	6.0%	6.7%
TechnoTrim (046)	0.2%	0.2%
ASG Production (006)	0.2%	0.2%
JCIM US, LLC (035)*	0.3%	0.2%
York Plan 4 (018)	4.0%	4.3%
York Plan 6 (019)	0.1%	0.1%
York Plan 7 (020)	1.0%	1.0%
York Plan 12 (023)	0.4%	0.3%
York Plan 13 (024)	0.8%	1.0%
York Plan 14 (025)	0.2%	0.2%
York Plan 15 (026)	0.7%	0.6%
York Plan 18 (028)	0.6%	0.6%
York Plan 19 (029)	0.8%	0.7%
York Plan 23 (031)	0.4%	0.3%
Total	100.0%	100.0%

*The JCIM US, LLC plan, which is included in the Master Trust, has a June 30 year end. As such, a separate report is prepared for each plan year.

The Statements of Financial Position as of December 31, 2010 and 2009 and the Statement of Operations and Changes in Participating Plans' Equity of the Johnson Controls, Inc. Master Pension Trust for the year ended December 31, 2010 are presented in Note 10.

DATE OF MANAGEMENT'S REVIEW

Management has evaluated subsequent events through September 16, 2011, the date which the financial statements were available to be issued.

NOTE 3 – INVESTMENTS

Assets of the Plans, with the exception of the employer contribution receivable and accrued administrative expenses, as shown in the Statements of Net Assets Available for Benefits, investment income as shown in the Statements of Changes in Net Assets Available for Benefits, and the Master Trust financial information appearing in Note 10, have been derived from information prepared and certified as complete and accurate by the Trustee, in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

NOTE 4 – ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments that are attributable under the Plans' benefit provisions based on employees' years of service. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits. The actuarial present value of accumulated plan benefits is determined by an actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment. The actuarial assumptions used for the January 1, 2010 and 2009 valuations are based on the Standard Unit Credit Cost Method for all Plans. The current actuarial assumptions are based on the presumption that the Plans will continue. If the Plans were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The actuarial present value of accumulated plan benefits is determined by an actuary from Hewitt Associates LLC.

The significant actuarial assumptions used in the valuations at January 1, 2010 and 2009 were:

Description	Assumption	
Retirement Age	Varies based on the probability of retirement at social security retirement age of 65 to 67, with 100% at age 70.	
Mortality Rates	2010: 2010 Static Mortality Table for annuitants and non-annuitants. 2009: 2009 Static Mortality Table for annuitants and non-annuitants.	
Withdrawal Rates	A graduated scale from higher to lower as years of service increase.	
Disability Rates	A graduated scale from lower to higher as age advances.	
Interest Rates	2010: Based on segment rates with a four month lookback, as follows: 1st Segment Rate – 5.03% 2nd Segment Rate – 6.73% 3rd Segment Rate – 6.82%	2009: Based on the full Yield Curve with a two month lookback (October 2008 yield curve), with sample rates as follows: Duration 0.5 – 5.45% Duration 5.5 – 8.25% Duration 10.5 – 8.87% Duration 15.5 – 8.65% Duration 20.5 – 8.11 % Duration 25.5 – 7.71% Duration 30.5 – 7.46%

NOTE 5 – TAX STATUS

The Company has received favorable determination letters from the IRS as to the qualified status of the Plans under the Internal Revenue Code ("IRC") and these Plans are, therefore, exempt from federal income taxes. Some of the Plans have been amended since receiving the determination letters. However, the Plan administrator believes that all the Plans are currently designed and being operated in compliance with applicable requirements of the IRC.

NOTE 6 – PLAN TERMINATION

The Company anticipates and believes the Plans will continue without interruption but reserves the right to discontinue any Plan at any time in accordance with the respective plan provisions and provisions set forth in ERISA. In the event of a Plan termination or permanent discontinuance of contributions to a Plan, the assets of the Plan will be distributed in accordance with the requirements of 29 CFR 4044 of ERISA.

Certain benefits under the Plans are insured by the Pension Benefit Guaranty Corporation ("PBGC"), a U.S. government agency, in the event of Plan termination. The net assets of the Plans will be allocated as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Benefits attributable to employee contributions, taking into account those paid out before termination.
2. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plans. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
3. Other vested benefits insured by the PBGC up to the applicable limitations.
4. All other vested benefits (not insured by the PBGC).
5. All non-vested benefits.

Certain benefits under the Plans are insured by the PBGC if the Plans terminate. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plans, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plans are guaranteed at the level in effect on the date of the Plans' termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For Plan terminations occurring during 2011, that ceiling is $4,500 per month. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or Plan termination (whichever comes later). For younger annuitants, or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

Whether all participants receive their benefits should a Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan's sponsor and the level of benefits guaranteed by the PBGC.

NOTE 7 – PARTY-IN-INTEREST TRANSACTIONS

Transactions involving the account administered by the Trustee and the funds of the investment managers for the Plans are considered party-in-interest transactions. These transactions are not, however, considered prohibited transactions under 29 CFR 408(b) of the ERISA regulations.

NOTE 8 – RISKS AND UNCERTAINTIES

The Plans' investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the values of investments, it is at least reasonably possible that changes in risks in the near term would materially affect the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

The actuarial present value of accumulated plan benefits is reported based on certain assumptions pertaining to interest rates, inflation rates and employee compensation and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term and due to the uncertainties inherent in setting assumptions, that the effect of such changes could be material to the value of accumulated plan benefits.

NOTE 9 – PLAN MERGER

Effective December 31, 2009, the Shelbyville Union Pension Plan merged into the Johnson Controls Pension Plan. Also, the Automotive Systems Group Cadiz Retirement Income Plan, the Automotive Systems Group Greenfield Plant Retirement Income Plan and the Johnson Controls Pension Plan Automotive Systems Group/West Carrollton Production Employees merged into the Johnson Controls Pension Plan Battery Division Owosso UAW Employees.

As a result of the December 31, 2009 Plan mergers, the actuarial present value of accumulated plan benefits for the Johnson Controls Pension Plan at January 1, 2010 increased by $622,879 because of the transfer of accumulated plan benefits from the Shelbyville Union Pension Plan, and the Johnson Controls Pension Plan Battery Division Owosso UAW Employees increased by $31,329,979 because of the transfer of accumulated plan benefits from the remaining three merged Plans.

JOHNSON CONTROLS, INC.
PENSION PLANS
NOTES TO THE FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

NOTE 10 – JOHNSON CONTROLS, INC. MASTER PENSION TRUST

The Statements of Financial Position as of December 31, 2010 and 2009 and the Statement of Operations and Changes in Participating Plans' Equity for the year ended December 31, 2010 for the Master Trust are presented in the following tables.

JOHNSON CONTROLS, INC.
MASTER PENSION TRUST
STATEMENTS OF FINANCIAL POSITION

	December 31,	
	2010	2009
Assets		
Cash & cash equivalents	$ 146,640,510	$ 69,194,853
U.S. government and federal agency securities	231,237,899	231,451,189
Corporate issues	243,055,676	176,230,541
Municipal issues	6,981,989	907,006
Foreign issues	38,108,436	33,287,700
Total fixed income fund	666,024,510	511,071,289
Domestic stocks	1,397,291,447	500,294,189
Foreign stocks	256,062,926	413,961,832
Domestic growth and value stocks	-	309,145,202
Total equity investments	1,653,354,373	1,223,401,223
Investment in real estate	193,021,453	89,857,772
Hedge fund	93,722,876	88,655,565
Due from brokers for securities sold	7,639,846	8,086,821
Accrued dividends and interest receivable	5,042,020	4,007,134
	$ 2,618,805,078	$ 1,925,079,804
Liabilities and Participating Plans' Equity		
Due to brokers for securities purchased	$ 16,671,932	$ 1,683,004
Participating plans' equity	2,594,474,846	1,919,300,521
JCIM US, LLC Pension Plan's equity*	7,658,300	4,096,279
Total equity	2,602,133,146	1,923,396,800
	$ 2,618,805,078	$ 1,925,079,804

* The JCIM US, LLC plan, which is included in the Master Trust, has a June 30 year end. As such, a separate report is prepared for each plan year.

JOHNSON CONTROLS, INC.
PENSION PLANS
NOTES TO THE FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2010 AND 2009

JOHNSON CONTROLS, INC.
MASTER PENSION TRUST
STATEMENT OF OPERATIONS AND CHANGES IN PARTICIPATING PLANS' EQUITY

	Year Ended December 31, 2010
Investment income	
Net gain on fixed income fund	$ 37,286,881
Net gain on equity investments	221,831,042
Net gain on hedge fund	5,067,311
Net gain on investment in real estate	6,735,972
	270,921,206
Contributions received from participating plans	533,564,000
Total increases	804,485,206
Withdrawals by participating plans for benefit payments, asset transfers and plan expenses	124,106,149
Administrative expenses	5,204,732
Total decreases	129,310,881
Net increase in participating plans' equity	675,174,325
Participating plans' equity	
Beginning of year	1,919,300,521
End of year	$ 2,594,474,846

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Investments that represent 5% or more of the fair value of the Plans' net assets as of December 31, 2010 and 2009 are:

Investments	December 31, 2010	December 31, 2009
JP Morgan 500 Index, 5,167,738 and 1,514,129 units, respectively	$628,802,646	$163,446,916
Goldman Sachs, 2,505,039 and 1,866,773 units, respectively	343,085,063	237,214,370
Dodge & Cox, 2,775,579 units	299,473,608	*
Thornburg, 2,306,935 units	242,803,113	*
Baird Fixed Income, 1,564,867 and 1,585,735 units, respectively	233,725,535	219,699,274
JP Morgan Enhanced Index, 1,933,980 and 1,808,243 units, respectively	190,058,610	155,039,303
Thompson, Siegel & Walmsley LLC, 1,185,593 and 922,755 units, respectively	156,628,589	103,301,208
Columbus, 944,239 and 922,755 units, respectively	153,869,282	107,308,423
Russell Non-U.S. Equity, 2,694,499 units	*	397,695,398
Russell Tacoma Growth Fund, 1,457,321units	*	154,671,612
Russell U.S. Value Fund, 1,495,515 units	*	154,473,590

* Asset was not greater than 5% in the respective year.

NOTE 11 – FAIR VALUE MEASUREMENTS

ASC 820, "Fair Value Measurements and Disclosures," defines fair value 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. ASC 820 also establishes a three-level fair value hierarchy that prioritizes information used in developing assumptions when pricing an asset or liability as follows:

Level 1: Observable inputs such as quoted prices in active markets;

Level 2: Inputs, other than quoted prices in active markets, that are observable either directly or indirectly; and

Level 3: Unobservable inputs where there is little or no market data, which requires the reporting entity to develop its own assumptions.

ASC 820 requires the use of observable market data, when available, in making fair value measurements. When inputs used to measure fair value fall within different levels of the hierarchy, the level within which the fair value measurement is categorized is based on the lowest level input that is significant to the fair value measurement.

The following table sets forth by level, within the fair value hierarchy, the Master Trust's assets at fair value as of December 31, 2010 and 2009:

	Assets at Fair Value as of December 31, 2010			
	Level 1	Level 2	Level 3	Total
Fixed Income Fund	$ 666,024,510	$ -	$ -	$ 666,024,510
Equity Investments	1,653,354,373	-	-	1,653,354,373
Investment in Real Estate	-	-	193,021,453	193,021,453
Hedge Fund	-	-	93,722,876	93,722,876
Total assets at fair value	$ 2,319,378,883	$ -	$ 286,744,329	$ 2,606,123,212

	Assets at Fair Value as of December 31, 2009			
	Level 1	Level 2	Level 3	Total
Fixed Income Fund	$ 511,071,289	$ -	$ -	$ 511,071,289
Equity Investments	1,223,401,223	-	-	1,223,401,223
Investment in Real Estate	-	-	89,857,772	89,857,772
Hedge Fund	-	-	88,655,565	88,655,565
Total assets at fair value	$ 1,734,472,512	$ -	$ 178,513,337	$ 1,912,985,849

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

Fixed Income Fund: The fair value for the Fixed Income Fund is determined by indirect quoted market prices. The value of the fund is not published, but the investment manager reports daily the underlying holdings. The underlying holdings are direct quoted market prices on liquid and regulated financial exchanges.

Equity Investments: The fair value for the Equity Investments is determined by indirect quoted market prices. The value of the fund is not published, but the investment manager reports daily the underlying holdings. The underlying holdings are direct quoted market prices on liquid and regulated financial exchanges.

Investment in Real Estate: The fair value for the investments in the Russell Real Estate Fund is valued by a fund manager, Russell Private Real Estate. Russell values the investment the same way as other stocks that trade on organized public exchanges. The prices of the shares represent the present values of expected future rent income. Assumptions used to revalue the properties are updated every quarter and independent valuations are obtained to support valuation models. Rockwood Real Estate is in the early stages of funding, and therefore properties are currently recorded at cost. The partnership manager regularly updates valuations to ensure the carrying value approximates the fair value. The Company believes this is the appropriate methodology to obtain the fair value of the assets. In determining the value of the interest in real estate properties of the Invesco Core Real Estate Fund and the Morgan Stanley Prime Property Fund, all properties are valued on a quarterly basis by independent appraisers.

Hedge Fund: The fair value of the Hedge Fund is accounted for by Union Bancaire Privée's custodian, Citibank. Citibank obtains valuation from underlying managers based on market quotes for the most liquid assets and alternative methods for assets that do not have sufficient trading activity to derive prices. The Company and Union Bancaire Privée reviewed the methods used by the underlying managers to value the assets held at Citibank. The Company believes that the appropriate methodology is used to obtain valuations that are as close as possible to the fair value of the assets.

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

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The table below sets forth a summary of changes in the fair value of the Master Trust's Level 3 assets for the years ended December 31, 2010 and 2009.

	Level 3 Assets Year Ended December 31, 2010	
	Investment in Hedge Fund	**Investment in Real Estate**
Balance, January 1, 2010	$ 88,655,565	$ 89,857,772
Purchases and redemptions	-	96,427,709
Unrealized gains	5,067,311	11,363,776
Realized losses	-	(4,627,804)
Balance, December 31, 2010	$ 93,722,876	$ 193,021,453

	Level 3 Assets Year Ended December 31, 2009	
	Investment in Hedge Fund	**Investment in Real Estate**
Balance, January 1, 2009	$ 84,358,367	$ 146,656,352
Purchases and redemptions	-	1,563,530
Unrealized gains (losses)	20,456,837	(58,036,760)
Realized losses	(16,159,639)	(325,350)
Balance, December 31, 2009	$ 88,655,565	$ 89,857,772

SUPPLEMENTAL SCHEDULES

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SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
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DECEMBER 31, 2010

	Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment (Including Maturity Date, Rate of Interest, Collateral Par or Maturity Value)		Costs of Asset	Current Value
*	Baird Tactical	243,476	Units	$ 26,556,498	$ 33,584,859
*	Columbus	944,239	Units	100,552,321	153,869,282
*	Goldman Sachs	2,505,039	Units	281,870,494	343,085,063
*	Rockwood	173,315	Units	17,331,534	17,331,535
*	Selectinvest	1,000,000	Units	100,000,001	93,722,876
*	Thompson, Siegel & Walmsley LLC	1,185,593	Units	122,275,518	156,628,589
*	Dodge & Cox	2,775,579	Units	277,557,834	299,473,608
*	Thornburg	2,306,935	Units	230,693,513	242,803,113
*	Morgan Stanley	695,000	Units	69,500,000	71,893,068
*	Invesco	300,000	Units	30,000,000	31,084,299
*	Johnson Controls Cash Fund	6,567	Units	33,315,183	33,357,512
*	Baird Fixed Income	1,564,867	Units	176,923,629	233,725,535
*	JP Morgan Enhanced Index	1,933,980	Units	179,857,433	190,058,610
*	JP Morgan 500 Index	5,167,738	Units	546,139,899	628,802,646
*	Russell Real Estate Fund	815,576	Units	90,751,909	72,712,551
	Totals			**$ 2,283,325,766**	**$ 2,602,133,146**

* Indicates party-in-interest.

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SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
JOHNSON CONTROLS, INC. MASTER PENSION TRUST, EIN: 39-0380010
DECEMBER 31, 2010

Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)		Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date			Net Gain or (Loss)
Single Transactions											
Cash Fund	36,536	units	$ 184,500,000				$ 184,500,000	$ 5,050	per unit	$	-
Dodge & Cox	1,671,158	units	167,115,847				167,115,847	100	per unit		-
Transition Account	4,006,363	units	400,636,334				400,636,334	100	per unit		-
JP Morgan 500 Index	2,123,863	units	233,231,282				233,231,282	110	per unit		-
Thornburg	1,694,187	units	169,418,653				169,418,653	100	per unit		-
Cash Fund	24,120	units		$ 121,798,642			121,795,838	5,050	per unit		2,804
Russell U.S. Value Fund	1,105,159	units		116,486,222			111,690,630	105	per unit		4,795,592
Russell Non-U.S. Equity	2,220,122	units		334,018,147			294,770,879	150	per unit		39,247,268
Russell Tacoma Growth Fund	1,065,600	units		117,247,811			108,184,186	110	per unit		9,063,625
Transition Account	4,006,363	units		402,649,935			400,636,334	101	per unit		2,013,601
Series of Transactions											
Dodge & Cox	2,775,578	units	277,557,834				277,557,834	100	per unit		-
Transition Account	5,455,374	units	545,537,350				545,537,350	100	per unit		-
	5,455,374	units		548,279,226			545,537,350	101	per unit		2,741,876
Total	10,910,748		$ 545,537,350	$ 548,279,226			$ 1,091,074,700			$	2,741,876
Thornburg	2,306,935	units	$ 230,693,514				$ 230,693,514	$ 100	per unit	$	-
Russell U.S. Value Fund	1,495,515	units		$ 157,630,633			151,831,960	105	per unit		5,798,673
Russell Tacoma Growth Fund	1,457,321	units		160,348,879			148,465,402	110	per unit		11,883,477

JOHNSON CONTROLS, INC.
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JOHNSON CONTROLS, INC. MASTER PENSION TRUST, EIN: 39-0380010
DECEMBER 31, 2010

Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)		Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date			Net Gain or (Loss)
Goldman Sachs	131,504	units	$ 17,000,000				$ 17,000,000	$ 129	per unit	$	-
	543,909	units	75,000,001				75,000,001	138	per unit		-
	37,147	units		$ 4,999,999			3,918,489	135	per unit		1,081,510
	Total 712,560		$ 92,000,001	$ 4,999,999			$ 95,918,490			$	1,081,510
JP Morgan 500 Index	50,645	units	$ 6,000,001				$ 6,000,001	$ 118	per unit	$	-
	99,159	units	9,999,999				9,999,999	101	per unit		-
	600,022	units	61,620,000				61,620,000	103	per unit		-
	479,682	units	53,000,001				53,000,001	110	per unit		-
	2,892,016	units	317,585,712				317,585,712	110	per unit		-
	6,412	units	729,336				729,336	114	per unit		-
	74,110	units		$ 7,999,999			7,179,873	108	per unit		820,126
	6,412	units		729,336			688,167	114	per unit		41,169
	130,068	units		14,999,999			13,745,960	115	per unit		1,254,039
	263,734	units		30,000,001			27,872,116	114	per unit		2,127,885
	Total 4,602,260		$ 448,935,049	$ 53,729,335			$ 498,421,165			$	4,243,219
Russell Non-U.S. Equity	214,949	units	$ 30,000,000				$ 30,000,000	$ 140	per unit	$	-
	79,793	units	11,999,999				11,999,999	150	per unit		-
	35,781	units	5,000,000				5,000,000	140	per unit		-
	4,464	units	627,125				627,125	140	per unit		-
	4,464	units		$ 627,125			670,912	140	per unit		(43,787)
	3,025,022	units		455,115,667			404,393,664	150	per unit		50,722,003
	Total 3,364,473		$ 47,627,124	$ 455,742,792			$ 452,691,700			$	50,678,216

JOHNSON CONTROLS, INC.
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SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
JOHNSON CONTROLS, INC. MASTER PENSION TRUST, EIN: 39-0380010
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Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)		Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date		Net Gain or (Loss)
Cash Fund	2,809	units	$ 14,133,159				$ 14,133,159	$ 5,032	per unit	$ -
	35	units	178,572				178,572	5,032	per unit	-
	1,987	units	9,999,999				9,999,999	5,032	per unit	-
	3	units	15,362				15,362	5,032	per unit	-
	-	units	528				528	5,032	per unit	-
	214	units	1,075,432				1,075,432	5,032	per unit	-
	7	units	35,908				35,908	5,032	per unit	-
	101	units	506,440				506,440	5,032	per unit	-
	4	units	22,025				22,025	5,032	per unit	-
	73	units	367,822				367,822	5,032	per unit	-
	2	units	10,215				10,215	5,032	per unit	-
	2	units	9,676				9,676	5,032	per unit	-
	-	units	327				327	5,032	per unit	-
	16	units	78,301				78,301	5,032	per unit	-
	-	units	1,867				1,867	5,032	per unit	-
	5	units	26,543				26,543	5,032	per unit	-
	-	units	674				674	5,032	per unit	-
	16	units	81,668				81,668	5,032	per unit	-
	1	units	2,712				2,712	5,032	per unit	-
	3	units	15,956				15,956	5,032	per unit	-
	-	units	367				367	5,032	per unit	-
	10	units	49,162				49,162	5,032	per unit	-
	-	units	1,313				1,313	5,032	per unit	-
	10	units	47,803				47,803	5,032	per unit	-
	-	units	1,177				1,177	5,032	per unit	-
	11	units	55,145				55,145	5,032	per unit	-
	-	units	1,208				1,208	5,032	per unit	-

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Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	6 units	$ 28,626				$ 28,626	$ 5,032 per unit	$ -
	- units	740				740	5,032 per unit	-
	3 units	16,595				16,595	5,032 per unit	-
	- units	599				599	5,032 per unit	-
	2 units	11,458				11,458	5,032 per unit	-
	- units	377				377	5,032 per unit	-
	51 units	256,179				256,179	5,032 per unit	-
	1 units	3,764				3,764	5,032 per unit	-
	- units	600				600	5,041 per unit	-
	- units	2,168				2,168	5,041 per unit	-
	- units	106				106	5,041 per unit	-
	5 units	26,401				26,401	5,011 per unit	-
	388 units	1,945,117				1,945,117	5,011 per unit	-
	2 units	9,636				9,636	5,011 per unit	-
	3 units	14,080				14,080	5,011 per unit	-
	12 units	61,010				61,010	5,011 per unit	-
	12 units	61,241				61,241	5,011 per unit	-
	5 units	26,482				26,482	5,011 per unit	-
	7 units	36,909				36,909	5,011 per unit	-
	5 units	26,732				26,732	5,011 per unit	-
	2 units	8,137				8,137	5,011 per unit	-
	3,985 units	19,999,998				19,999,998	5,019 per unit	-
	34 units	170,425				170,425	5,019 per unit	-
	21 units	105,916				105,916	5,019 per unit	-
	1,005 units	5,100,000				5,100,000	5,075 per unit	-
	3,941 units	20,000,000				20,000,000	5,075 per unit	-
	96 units	487,160				487,160	5,075 per unit	-

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Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	21 units	$ 108,601				$ 108,601	$ 5,075 per unit	$ -
	- units	251				251	5,128 per unit	-
	12 units	62,078				62,078	5,089 per unit	-
	44 units	226,183				226,183	5,089 per unit	-
	3,930 units	20,000,000				20,000,000	5,089 per unit	-
	268 units	1,364,546				1,364,546	5,089 per unit	-
	22 units	112,606				112,606	5,089 per unit	-
	660 units	3,364,698				3,364,698	5,101 per unit	-
	- units	483				483	5,083 per unit	-
	48 units	245,457				245,457	5,101 per unit	-
	- units	1,440				1,440	5,108 per unit	-
	35 units	176,752				176,752	5,101 per unit	-
	- units	86				86	5,087 per unit	-
	19 units	98,879				98,879	5,101 per unit	-
	- units	154				154	5,146 per unit	-
	22 units	114,213				114,213	5,101 per unit	-
	593 units	2,999,999				2,999,999	5,057 per unit	-
	3,955 units	20,000,000				20,000,000	5,057 per unit	-
	147 units	744,740				744,740	5,057 per unit	-
	- units	888				888	5,074 per unit	-
	3,951 units	20,000,000				20,000,000	5,063 per unit	-
	66 units	331,900				331,900	5,063 per unit	-
	97 units	491,560				491,560	5,063 per unit	-
	15 units	73,717				73,717	5,063 per unit	-
	4 units	19,406				19,406	5,063 per unit	-
	12 units	62,078				62,078	5,068 per unit	-
	1,566 units	7,937,025				7,937,025	5,068 per unit	-

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Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	3,946 units	$ 20,000,000				$ 20,000,000	$ 5,068 per unit	$ -
	48 units	243,541				243,541	5,068 per unit	-
	62 units	313,525				313,525	5,068 per unit	-
	258 units	1,305,242				1,305,242	5,068 per unit	-
	2 units	9,406				9,406	5,068 per unit	-
	6 units	31,621				31,621	5,068 per unit	-
	1 units	5,091				5,091	5,066 per unit	-
	- units	650				650	5,074 per unit	-
	- units	786				786	5,071 per unit	-
	3,971 units	20,000,000				20,000,000	5,036 per unit	-
	228 units	1,147,731				1,147,731	5,036 per unit	-
	163 units	819,289				819,289	5,036 per unit	-
	126 units	634,654				634,654	5,036 per unit	-
	3 units	12,660				12,660	5,036 per unit	-
	12 units	60,538				60,538	5,036 per unit	-
	11 units	53,808				53,808	5,036 per unit	-
	4 units	17,907				17,907	5,036 per unit	-
	4 units	22,044				22,044	5,036 per unit	-
	8 units	41,347				41,347	5,036 per unit	-
	- units	1,627				1,627	5,036 per unit	-
	- units	198				198	5,071 per unit	-
	12,223 units	61,620,000				61,620,000	5,041 per unit	-
	141 units	711,955				711,955	5,041 per unit	-
	11 units	57,677				57,677	5,041 per unit	-
	3 units	16,597				16,597	5,042 per unit	-
	11 units	55,637				55,637	5,041 per unit	-
	61,663 units	311,384,000				311,384,000	5,050 per unit	-

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Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	- units	$ 291				$ 291	$ 5,026 per unit	$ -
	- units	530				530	5,049 per unit	-
	1,509 units	7,618,628				7,618,628	5,050 per unit	-
	137 units	685,438				685,438	5,020 per unit	-
	145 units	729,336				729,336	5,020 per unit	-
	10 units	49,139				49,139	5,020 per unit	-
	2,955 units	15,000,001				15,000,001	5,076 per unit	-
	- units	874				874	5,080 per unit	-
	9,849 units	49,999,998				49,999,998	5,077 per unit	-
	7 units	34,623				34,623	5,082 per unit	-
	- units	553				553	5,071 per unit	-
	52 units		$ 259,943			257,246	5,032 per unit	2,697
	1,541 units		7,751,833			7,698,929	5,032 per unit	52,904
	2,463 units		12,340,958			12,289,042	5,011 per unit	51,916
	21 units		105,917			105,694	5,019 per unit	223
	34 units		169,045			169,202	5,019 per unit	(157)
	4,069 units		20,652,290			20,381,677	5,075 per unit	270,613
	1,835 units		9,311,499			9,264,450	5,075 per unit	47,049
	7 units		36,211			35,903	5,075 per unit	308
	1,474 units		7,481,842			7,457,667	5,075 per unit	24,175
	126 units		637,158			637,160	5,075 per unit	(2)
	20 units		101,750			101,749	5,075 per unit	1
	3 units		13,590			13,486	5,075 per unit	104
	2 units		10,267			10,267	5,075 per unit	-
	2,797 units		14,232,369			14,189,501	5,089 per unit	42,868
	4,299 units		21,930,190			21,810,166	5,101 per unit	120,024
	16 units		80,365			80,069	5,101 per unit	296

JOHNSON CONTROLS, INC.
PENSION PLANS
SUPPLEMENTAL SCHEDULE
SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
JOHNSON CONTROLS, INC. MASTER PENSION TRUST, EIN: 39-0380010
DECEMBER 31, 2010

Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	406 units		$ 2,069,810			$ 2,052,056	$ 5,101 per unit	$ 17,754
	2,524 units		12,764,379			12,813,527	5,057 per unit	(49,148)
	1 units		6,842			6,833	5,064 per unit	9
	1 units		5,080			5,081	5,065 per unit	(1)
	1,199 units		6,069,406			6,063,453	5,063 per unit	5,953
	181 units		916,582			916,140	5,063 per unit	442
	2,184 units		11,058,136			11,054,436	5,063 per unit	3,700
	2,736 units		13,865,912			13,855,870	5,068 per unit	10,042
	377 units		1,909,076			1,907,693	5,068 per unit	1,383
	2,527 units		12,807,816			12,801,595	5,068 per unit	6,221
	985 units		4,999,998			4,989,863	5,075 per unit	10,135
	558 units		2,809,977			2,817,761	5,036 per unit	(7,784)
	2,096 units		10,557,812			10,579,799	5,036 per unit	(21,987)
	12,223 units		61,620,002			61,655,660	5,041 per unit	(35,658)
	167 units		841,866			842,746	5,041 per unit	(880)
	2,239 units		11,285,148			11,293,885	5,041 per unit	(8,737)
	55,052 units		278,000,033			277,979,467	5,050 per unit	20,566
	8,758 units		44,229,302			44,226,526	5,050 per unit	2,776
	- units		20			20	5,045 per unit	-
	201 units		1,011,580			1,017,467	5,020 per unit	(5,887)
	146 units		734,577			738,884	5,020 per unit	(4,307)
	145 units		729,336			733,612	5,020 per unit	(4,276)
	2,118 units		10,631,104			10,684,626	5,020 per unit	(53,522)
	930 units		4,720,652			4,715,972	5,076 per unit	4,680
	5 units		23,414			23,409	5,076 per unit	5
	2,150 units		10,916,073			10,913,650	5,077 per unit	2,423

JOHNSON CONTROLS, INC.
PENSION PLANS
SUPPLEMENTAL SCHEDULE
SCHEDULE H, LINE 4j – SCHEDULE OF REPORTABLE TRANSACTIONS
JOHNSON CONTROLS, INC. MASTER PENSION TRUST, EIN: 39-0380010
DECEMBER 31, 2010

Identity of Party Involved	Description of Asset (Include Interest Rate and Maturity in Case of a Loan)	Purchase Price	Selling Price	Lease Rental	Expense Incurred with Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
Cash Fund (continued)	3,837 units		$ 19,500,009			$ 19,475,449	$ 5,082 per unit	$ 24,560
Total	250,404 units	$ 646,344,499	$ 619,199,169			$ 1,265,012,187		$ 531,481

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2010

This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

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

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

A Name of plan

York Int Corp Pension Plan Number Seven

B Three-digit plan number (PN) ▶ 007

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

York International Corporation

D Employer Identification Number (EIN)

13-3473472

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 1 Day 1 Year 2010

2 Assets:

a	Market value	**2a**	20,415,368
b	Actuarial value	**2b**	20,415,368

3 Funding target/participant count breakdown

			(1) Number of participants	(2) Funding Target
a	For retired participants and beneficiaries receiving payment	**3a**	166	5,433,990
b	For terminated vested participants	**3b**	310	4,038,644
c	For active participants:			
	(1) Non-vested benefits	**3c(1)**		57,965
	(2) Vested benefits	**3c(2)**		10,932,714
	(3) Total active	**3c(3)**	651	10,990,679
d	Total	**3d**	1,127	20,463,313

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

a	Funding target disregarding prescribed at-risk assumptions	**4a**	
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor	**4b**	

5	Effective interest rate	**5**	6.73 %
6	Target normal cost	**6**	696,802

Statement by Enrolled Actuary

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

SIGN HERE Mark K. Friedman MKF

Signature of actuary

08/30/2011

Date

Mark K. Friedman

Type or print name of actuary

11-06405

Most recent enrollment number

Hewitt Associates LLC

Firm name

(847)295-5000

Telephone number (including area code)

100 Half Day Road

Lincolnshire IL 60069

Address of the firm

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	2,092,891	1,938,981
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	184,555	0
9	Amount remaining (Item 7 minus item 8)	1,908,336	1,938,981
10	Interest on item 9 using prior year's actual return of 20.48%	390,827	397,103
11	Prior year's excess contributions to be added to prefunding balance:		
	a Excess contributions (Item 38 from prior year)		827,998
	b Interest on (a) using prior year's effective rate of 8.00%		89,272
	c Total available at beginning of current plan year to add to prefunding balance		917,270
	d Portion of (c) to be added to prefunding balance		0
12	Reduction in balances due to elections or deemed elections	1,204,848	0
13	Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	1,094,315	2,336,084

Part III Funding percentages

14	Funding target attainment percentage	14	83.00 %
15	Adjusted funding target attainment percentage	15	99.76 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.94 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/23/2010	200,000	0			
06/23/2010	200,000	0			
09/28/2010	3,200,000	0			
09/29/2010	540,000	0			
			Totals ► 18(b)	4,140,000	18(c) 0

19	Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contribution from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	3,955,037

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

c If 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of Quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
5.03 %	6.73 %	6.82 %	

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☒ Yes	☐ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)		**31**	696,802
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	0		0
b Waiver amortization installment	0		0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)		**34**	696,802

	Carryover balance	Prefunding balance	Total balance
35 Balances used to offset funding requirement	0	0	0

36 Additional cash requirement (item 34 minus item 35)	**36**	696,802
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)	**37**	3,955,037
38 Interest-adjusted excess contributions for current year (see instructions)	**38**	3,258,235
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	**39**	0
40 Unpaid minimum required contribution for all years	**40**	0