

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2010</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2010 or fiscal plan year beginning <u>01/01/2010</u> and ending <u>12/31/2010</u>	
A This return/report is for:	<input type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or <input checked="" type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____
B This return/report is:	<input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report; <input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	<input type="checkbox"/>
D Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program; <input type="checkbox"/> special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>MCKINSEY AND COMPANY, INC. (MPPP) MONEY PURCHASE PENSION PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>015</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1994</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>015</u>	1c Effective date of plan <u>01/01/1994</u>	
1b Three-digit plan number (PN) ▶	<u>015</u>				
1c Effective date of plan <u>01/01/1994</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>MCKINSEY AND COMPANY, INC.</u> <div style="display: flex; justify-content: space-between;"> <div><u>55 EAST 52ND STREET 26FL</u> <u>NEW YORK, NY 10055</u></div> <div><u>55 EAST 52ND STREET 26FL</u> <u>NEW YORK, NY 10055</u></div> </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>13-1826332</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>212-415-1601</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541600</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>13-1826332</u>	2c Sponsor's telephone number <u>212-415-1601</u>	2d Business code (see instructions) <u>541600</u>	
2b Employer Identification Number (EIN) <u>13-1826332</u>					
2c Sponsor's telephone number <u>212-415-1601</u>					
2d Business code (see instructions) <u>541600</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2011	JAMES E. FARRELL, JR.
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2011	STEPHEN PICCININNI
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2010)
v.092307.1

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") MCKINSEY AND COMPANY, INC. 55 EAST 52ND STREET 26FL NEW YORK, NY 10055	3b Administrator's EIN 13-1826332 3c Administrator's telephone number 212-415-1601
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	11442
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	4406
b Retired or separated participants receiving benefits.....	6b	15
c Other retired or separated participants entitled to future benefits.....	6c	7236
d Subtotal. Add lines 6a , 6b , and 6c	6d	11657
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	26
f Total. Add lines 6d and 6e	6f	11683
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	11635
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 2C 2H

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.		OMB No. 1210-0110
			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 MCKINSEY AND COMPANY, INC. (MPPP) MONEY PURCHASE PENSION PLAN	B Three-digit plan number (PN) ►	015
C Plan sponsor's name as shown on line 2a of Form 5500 MCKINSEY AND COMPANY, INC.	D Employer Identification Number (EIN) 13-1826332	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

AON CONSULTING INC.

ONE PIEDMONT CENTER
3565 PIEDMONT ROAD, NE, SUITE 600
ATLANTA, GA 30305

22-2232264

(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?
13	NONE	207185	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

PRICEWATERHOUSECOOPERS PA

300 MADISON AVE,
NEW YORK, NY 10017

13-4008324

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	22931	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

CONSULTING FIDUCIARIES, INC.

400 SKIOLIE BLVD.
SUITE 260
NORTHBROOK, IL 60062

36-7084626

(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?
16	NONE	12596	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

FOLEY/MYERS COMMUNICATIONS, INC.

22 FISHKILL ROAD
COLD SPRING, NY 10516

56-2338129

(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?
99	NONE	12188	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

MCKINSEY & COMPANY INC

55 EAST 52ND STREET
NEW YORK, NY 10055

13-1826332

(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?
15 35 50	EMPLOYEE OF EMPLOYER	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	11236	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

PROSKAUER ROSE LLP

1585 BROADWAY
NEW YORK, NY 10036-8299

13-1840454

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	NONE	10635	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

DELOITTE & TOUCHE LLP

100 KIMBALL DRIVE
PARSIPPANY, NJ 07054-0319

13-3891517

(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?
16	NONE	9859	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

SIDLEY AUSTIN LLP

787 SEVENTH AVENUE
NEW YORK, NY 10019

36-2158694

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29		8903	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

MAYER HOFFMAN MCCANN P.C.

1065 AVENUE OF THE AMERICAS
NEW YORK, NY 10018

43-1947695

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10		5638	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

WELLS FARGO BANK, N.A.

TRUST OPERATIONS
NW 5159 P.O. BOX 1450
MINNEAPOLIS, MI 55485-5159

94-1347393

(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?
21		5344	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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
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(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: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>

Explanation:

a Name:	b EIN;
c Position:	
d Address:	e Telephone: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>

Explanation:

a Name:	b EIN;
c Position:	
d Address:	e Telephone: <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>

Explanation:

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**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 <u>MCKINSEY AND COMPANY, INC. (MPPP) MONEY PURCHASE PENSION PLAN</u>	B Three-digit plan number (PN) <u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MCKINSEY AND COMPANY, INC.</u>	D Employer Identification Number (EIN) <u>13-1826332</u>

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities.....	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other.....	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	981904	1211994
(9) Value of interest in common/collective trusts.....	1c(9)	0	0
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	405407446	449582461
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	0	0

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	406389350	450794455

Liabilities

g Benefit claims payable	1g	0	12696
h Operating payables	1h	15898	38685
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	15898	51381

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	406373452	450743074
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	24876070	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		24876070

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

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	43792	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		43792

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

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

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		30443730
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		0
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		55363592

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	10696191	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		10696191
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	70563	
(2) Contract administrator fees	2i(2)	207185	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	32727	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		310475
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		11006666

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		44356926
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

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

(1) Name: PRICEWATERHOUSECOOPERS LP

(2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	0
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	0
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	0
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	0
e Was this plan covered by a fidelity bond?.....	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	0
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	0
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	0
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	0
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If yes, enter the amount of any plan assets that reverted to the employer this year ☐ Yes ☒ No Amount: 0

- 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 <u>MCKINSEY AND COMPANY, INC. (MPPP) MONEY PURCHASE PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MCKINSEY AND COMPANY, INC.</u>	D Employer Identification Number (EIN) <u>13-1826332</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	<u>0</u>
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>94-1347393</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3	<u>405</u>

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year	6a	<u>24876070</u>	
b Enter the amount contributed by the employer to the plan for this plan year	6b	<u>24876070</u>	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	<u>0</u>	
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> 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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input checked="" type="checkbox"/> No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

Schedule R (Form 5500) 2010
v.092308.1

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

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

a The current year	14a	0
b The plan year immediately preceding the current plan year	14b	0
c The second preceding plan year	14c	0

- 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	0
b The corresponding number for the second preceding plan year	15b	0

- 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	0
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	0

- 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):

Report of Independent Auditors

To the Participants, Administrative Committee and Trustees of the
McKinsey & Company, Inc. Money Purchase Pension Plan

In our opinion, the accompanying statements of net assets available for benefits and the related statements of changes in net assets available for benefits present fairly, in all material respects, the net assets available for benefits of the McKinsey & Company, Inc. Money Purchase Pension Plan (the "Plan") at December 31, 2010 and 2009 and the changes in net assets available for benefits for the years then ended in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedule of assets (held at end of year) is presented for the purpose of additional analysis and is not a required part of the basic financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. This supplemental schedule is the responsibility of the Plan's management. The supplemental schedule has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

A handwritten signature in black ink, reading "PricewaterhouseCoopers LLP". The signature is written in a cursive, flowing style.

New York, New York
September 8, 2011

McKinsey & Company, Inc.
Money Purchase Pension Plan
Financial Statements and
Supplemental Schedule
December 31, 2010 and 2009

McKinsey & Company, Inc.
Money Purchase Pension Plan
Index
December 31, 2010 and 2009

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* Other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") have been omitted because they are not applicable.

Report of Independent Auditors

To the Participants, Administrative Committee and Trustees of the
McKinsey & Company, Inc. Money Purchase Pension Plan

In our opinion, the accompanying statements of net assets available for benefits and the related statements of changes in net assets available for benefits present fairly, in all material respects, the net assets available for benefits of the McKinsey & Company, Inc. Money Purchase Pension Plan (the "Plan") at December 31, 2010 and 2009 and the changes in net assets available for benefits for the years then ended in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedule of assets (held at end of year) is presented for the purpose of additional analysis and is not a required part of the basic financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. This supplemental schedule is the responsibility of the Plan's management. The supplemental schedule has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

A handwritten signature in black ink, reading "PricewaterhouseCoopers LLP". The signature is written in a cursive, flowing style.

New York, New York
September 8, 2011

McKinsey & Company, Inc.
Money Purchase Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

	2010	2009
Assets		
Investments - Plan interest in the McKinsey Master Retirement Trust	\$ 428,100,814	\$ 385,388,117
Notes receivable from participants	1,211,994	981,904
Net assets held in 401(h) account	<u>21,481,647</u>	<u>20,019,329</u>
Total assets	<u>450,794,455</u>	<u>406,389,350</u>
Liabilities		
Accrued administrative and other expenses	51,381	15,898
Amounts related to obligations of 401(h) accounts	<u>21,481,647</u>	<u>20,019,329</u>
Total liabilities	<u>21,533,028</u>	<u>20,035,227</u>
Net assets available for benefits	<u>\$ 429,261,427</u>	<u>\$ 386,354,123</u>

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

McKinsey & Company, Inc.
Money Purchase Pension Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2010 and 2009

	2010	2009
Additions to net assets available for benefits attributed to:		
Plan interest in the McKinsey Master Retirement Trust investment income	\$ 28,981,412	\$ 48,200,628
Interest on participant notes	43,792	46,841
Firm contributions	24,876,070	27,369,531
Total additions	<u>53,901,274</u>	<u>75,617,000</u>
Deductions from net assets available for benefits attributed to:		
Participant benefits	10,683,495	7,413,683
Administrative and other expenses	310,475	337,007
Total deductions	<u>10,993,970</u>	<u>7,750,690</u>
Net increase	42,907,304	67,866,310
Net assets available for benefits		
Beginning of Year	<u>386,354,123</u>	<u>318,487,813</u>
End of Year	<u>\$ 429,261,427</u>	<u>\$ 386,354,123</u>

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

McKinsey & Company, Inc.
Money Purchase Pension Plan
Notes to Financial Statements
December 31, 2010 and 2009

1. Description of the Plan

The following brief description of the McKinsey & Company, Inc. Money Purchase Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a money purchase pension plan covering all full-time and part-time employees of McKinsey & Company, Inc. and participating subsidiaries (the "Firm" or "Plan Sponsor"). It is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Participation

Eligible employees of the Firm become participants in the Plan immediately upon employment. Normal retirement is at age 65. Early retirement is at age 50.

Contributions

The Plan provides for annual contributions by the Firm equal to five percent of qualified compensation. The qualified compensation limit was \$170,000 in 2010 and 2009. Participants may not contribute to the Plan.

Investment Options and Master Trust (See Notes 6 and 7)

Plan assets are held in the McKinsey Master Retirement Trust (the "Trust"). The Trust also includes the investments of the McKinsey & Company, Inc. Profit-Sharing Retirement Plan and McKinsey & Company, Inc. Supplemental Retirement Plan. Contributions are invested in one or more of the investment portfolios (the "Portfolio") of the Trust as directed by Plan participants. Annually, participants may reallocate balances among the investment portfolios. The plans do not own specific Master Trust assets unless the Administrative Committee has specified that an investment is allocated only to a specific plan; rather, the plans maintain individual beneficial interests in such assets. The portion of investment assets allocable to each plan is based upon the participant's account balance within each plan. Investment income for each investment is allocated to each plan based on the relationship of each plan's beneficial interest in the investment to the total beneficial interest of all plans in the investment. Details regarding the Trust and the investment options are presented in Notes 6 and 7. The Trust is governed by Trustees appointed by the Firm's Board of Directors.

Vesting

Contributions are 100% vested at all times.

Withdrawals

Contributions and earnings thereon cannot be withdrawn until termination of service. Participants may then elect to receive the value of their accounts under a variety of options including a life annuity or lump-sum distribution.

Administration

The Plan is administered by the Administrative Committee appointed by the Firm's Board of Directors.

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Participant Accounts

Each participant's account is credited with (a) the Firm's contribution and (b) Plan earnings, and charged with an allocation of administrative expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Participant Notes

Plan participants have the right, within limitations, to obtain personal loans from the Plan, collateralized by their interest in the Plan. Interests on these loans were charged at the prime rate, and were 3.25% in 2010 and 3.25% to 4.00% in 2009. Principal and interest is paid ratably through monthly payroll deductions. Loan terms range from one to five years. Participant notes are reported at cost, which approximates fair value.

401(h) Account

Effective January 1, 2006, the Plan was amended to include a medical-benefit component, in addition to the normal retirement benefits, to fund a portion of the postretirement obligations for retirees and their beneficiaries in accordance with Section 401(h) of the Internal Revenue Code (IRC). A separate account has been established and maintained in the Plan for the net assets related to the medical-benefit component (401(h) account). In accordance with IRC Section 401(h), the account may not be used for, or diverted to, any purpose other than providing health benefits for retirees and their beneficiaries. Plan participants do not contribute to the 401(h) account. Employer contributions or qualified transfers to the 401(h) account are determined annually and are at the discretion of the Plan Sponsor. Certain of the Plan's net assets are restricted to fund a portion of postretirement health benefits for retirees and their beneficiaries in accordance with IRC Section 401(h).

2. Summary of Significant Accounting Policies

Basis of Accounting

The accounts of the Plan are maintained and the accompanying financial statements have been 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 and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates. Certain investment values have been estimated as discussed below and those estimates could change significantly in the near future.

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Fair Value Measurements

ASC Topic 820, *Fair Value Measurements and Disclosures*, establishes a fair value hierarchy and specifies that a valuation technique used to measure fair value shall maximize the use of observable inputs and minimize the use of unobservable inputs. The objective of a fair value measurement is to determine the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (an exit price). Accordingly the fair value hierarchy gives the highest priority to valuations based upon unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to valuations based upon unobservable inputs that are significant to the valuation (Level 3). The levels of the fair value hierarchy under FASB ASC Topic 820 are as follows:

Level 1 – Price quotations in active markets/exchanges for identical securities

Level 2 – Other observable inputs (including, but not limited to: quoted prices for similar assets or liabilities in markets that are not active, inputs other than quoted prices that are observable for the assets or liabilities (such as interest rates, yield curves, volatilities, prepayment spreads, loss severities, credit risks, and default rates) or other market-corroborated inputs)

Level 3 – Unobservable inputs based on the best information available in the circumstance, to the extent observable inputs are not available (including the Portfolio's own assumptions used in determining the fair value of investments)

The inputs or methodology used for valuing securities are not necessarily an indication of the risk associated with investing in those securities.

The Trust's investments in the Portfolio Funds traded on a securities exchange are classified primarily within Level 1 of the fair value hierarchy.

The Trust's investments in Portfolio Funds not otherwise traded on a securities exchange are classified within Level 2 of the fair value hierarchy as the value of these interests are primarily based on the respective net asset value reported by management of each Portfolio Fund rather than market transactions and other observable market data. The Trust also considers whether an adjustment to the net asset value reported by the Portfolio Fund is necessary based upon various factors, including, but not limited to, the attributes of the interest in the Portfolio Fund held, including the rights and obligations, and any restrictions on or illiquidity of such interests, and the fair value of such Portfolio Fund's investment portfolio or other assets and liabilities. The significance of any redemption restriction will be assessed in determining if the Portfolio Fund investment should be within Level 3.

Trust Investments (See Notes 6 and 7)

Securities listed on a securities exchange or traded over the counter are reported at market value based upon published quotations. Certain commingled investment funds are reported at market value based upon the published quotations for the equity and debt securities comprising these funds. Certificates of deposit and other short-term investments are carried at cost, which approximates fair value because of the short maturity of these investments. Management of the Trust uses valuations, as determined in good faith by the general partners of the partnerships and the managements of the corporations, to value its investments in limited partnerships and investment corporations. Certain commingled investment funds for which no quotations are readily available have been valued by management of the Trust, as determined in good faith by the

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Trust Investments (See Notes 6 and 7) (Continued)

respective investment manager. The values assigned to the limited partnerships, investment corporations and certain commingled investment funds do not necessarily represent amounts, which might be ultimately realized upon the sale or other disposition, since such amounts depend on future circumstances and cannot reasonably be determined until the actual liquidation occurs. Because of the inherent uncertainty of such valuations, those estimated fair values may differ significantly from the values that would have been used had a ready market for the investments existed, and the differences could be material. Forward foreign currency contracts are carried at fair value with gains and losses on these contracts recognized currently in the Trust's financial statements. Futures contracts are carried at market value with gains and losses on these contracts recognized currently in the Trust's financial statements.

Security transactions are recorded on a trade date basis. Interest income is recorded as earned and dividend income is recorded on the ex-dividend date.

Investment income for each Portfolio and administrative expenses relating to the Trust are allocated to the plans based upon beginning monthly balances invested by each plan.

Payment of Benefits

Benefits are recorded when paid.

Expenses

Normal expenses incurred in connection with security transactions, investment management, and custody fees are paid by the Trust. These expenses are deducted in arriving at investment income that is allocated from the Trust to the Plan. Administrative expenses such as audit and record keeping fees are paid by the Plan. Other administrative expenses not paid by the Trust or Plan are paid by the Firm.

Reclassifications

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

3. Tax Status

The Internal Revenue Service has determined and informed the Firm by a letter dated February 2, 2009 that the Plan is designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the Plan's administrator and the Plan's tax counsel believe that the Plan is qualified and is currently being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes, other than for the allocated portion of unrelated business income tax of the Trust as discussed below, has been included in the Plan's financial statements.

The limited partnerships in which the Trust invests may incur debt to increase earnings. Earnings attributable to such borrowed funds subjects the Trust to unrelated business income tax that, to the extent related to the Plan, is included in administrative and other expenses and allocated to participants' accounts as applicable.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by

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Tax Status (Continued)

the taxing authorities. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2010, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2006.

4. Modifications and Termination

The Firm intends to continue the Plan indefinitely, but reserves the right to amend or discontinue it at any time. If the Plan is terminated or contributions discontinued, Plan participants will be fully vested in their rights under the Plan and benefits will be distributed either in accordance with provisions of the Plan or as otherwise provided by the Firm's Board of Directors.

5. Risks and Uncertainties

The Plan provides for various investment options through the Trust as presented in Notes 6 and 7. Investments are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Some of the Plan's investments may be illiquid and the Plan may not be able to vary the Portfolio in response to changes in economic and other conditions. Some of the investments that are purchased and sold are traded in private, unregistered transactions and are therefore subject to restrictions on resale or otherwise have no established trading market. In addition, if the Plan is required to liquidate all or a portion of its portfolio quickly, the Plan may realize significantly less than the value at which it previously recorded those investments. The Plan may from time to time invest in derivative contracts traded over the counter, which are not traded in an organized public market and may be illiquid.

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6. Trust Financial Information

The Plan has a 11.4% and 10.9% interest in the McKinsey Master Retirement Trust at December 31, 2010 and 2009, respectively. The statements of net assets of the Trust at December 31 are as follows:

	2010	2009
Assets		
Investments at fair value		
Investments in Portfolio Funds	\$ 3,335,041,124	\$ 3,072,336,460
Cash surrender value of life insurance policies	5,459,638	5,142,015
Total Investments	<u>3,340,500,762</u>	<u>3,077,478,475</u>
Assets related to 401(h) account (amount included above in Investments at fair value)	39,971,638	37,250,638
Receivables		
Investments sold	58,318,864	128,093,286
Interest and dividends	39,782	29,301
	<u>58,358,646</u>	<u>128,122,587</u>
Cash and cash equivalents	<u>415,744,608</u>	<u>376,407,856</u>
Total Assets	<u>3,814,604,016</u>	<u>3,582,008,918</u>
Liabilities		
Other payables	16,123,280	18,758,581
Unrealized depreciation on forward currency contracts	-	1,902,238
Amounts related to obligation of 401(h) account	<u>39,971,638</u>	<u>37,250,638</u>
Total Liabilities	<u>56,094,918</u>	<u>57,911,457</u>
Net assets	<u>\$ 3,758,509,098</u>	<u>\$ 3,524,097,461</u>

The Trust applies the authoritative guidance contained in FASB ASC 820-10, *Fair Value Measurements and Disclosures*, for estimating the fair value of investments in Portfolio Funds that have calculated net asset value per share in accordance with FASB ASC 946-10, *Financial Services-Investment Companies*. According to this guidance, in circumstances in which net asset value per share of an investment is not determinative of fair value, the Company is permitted, as a practical expedient, to estimate the fair value of an investment in a Portfolio Fund using the net asset value per share of the investment (or its equivalent) without further adjustment, if the net asset value per share of the investment is determined in accordance with FASB ASC 946-10 as of the Trust's measurement date. The following table summarizes the Trust's investments for which fair value was determined using this methodology as of December 31, 2010.

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Categories	Fair Value as of December 31, 2010	% of Net Assets	Unfunded Commitment \$	Redemption Frequency ^	Redemption Notice Period
Convertible Arbitrage	\$ 422,600	0.0%		Q	60 Days
Credit Arbitrage and Distressed	7,273,496	0.2%		Q	45-180 Days
Event Driven	74,324,212	2.0%		M,Q	30-100 Days
Fixed Income	530,494,500	14.1%		D,M,Q,A	0-120 Days
Global Equities Long/Short	190,036,830	5.0%		D,M,A	0-90 Days
Global Macro/Trading	250,783,624	6.7%		M,Q,A	0-45 Days
Liquidating stubs	998,773	0.0%		Q,A	0-45 Days
Market Neutral Equities	1,535,280	0.0%		M	30 Days
Multi-Strategy	2,028,060,881	53.9%		M	5 Days
Private Equities	37,702,132	1.0%	83,630,000	W,M,A	NA
Short term Investments	1,554,315	0.0%		D,M	0-7 Days
US Equities Long/Short	211,854,481	5.6%		D,M,Q,A	0-60 Days
	<u>\$ 3,335,041,124</u>	<u>88.5%</u>			

^ Daily (D), Weekly (W), Monthly (M), Quarterly (Q), Semi-Annually (SA) and Annually (A). Some of the Portfolio Funds included in the Investment categories above may be in liquidation and therefore subject to longer redemption periods.

The following table summarizes the inputs used in accordance with ASC 820, as discussed in Note 2, in determining the fair valuation of the Trust's investments. Funds in which the Trust invested more than 5% of its net assets are individually identified, while smaller investments are aggregated.

December 31, 2010

	Level 1	Level 2	Level 3	Total
Assets at fair value				
Convertible Arbitrage	\$ -	\$ -	\$ 422,600	\$ 422,600
Credit Arbitrage and Distressed	-	7,273,496	-	7,273,496
Event Driven	-	74,324,212	-	74,324,212
Fixed Income	101,297,390	410,582,264	18,614,846	530,494,500
Global Equities Long/Short	-	180,813,378	9,223,452	190,036,830
Global Macro/Trading	-	239,448,720	11,334,904	250,783,624
Liquidating stubs	-	998,773	-	998,773
Market Neutral Equities	-	1,535,280	-	1,535,280
Multi-Strategy				
SSALT Fund Limited	-	2,028,060,881	-	2,028,060,881
Private Equities	-	4,098,435	33,603,697	37,702,132
Short term Investments	-	1,554,315	-	1,554,315
Cash Surrender Value of Life Insurance	-	-	5,459,638	5,459,638
US Equities Long/Short		209,703,568	2,150,913	211,854,481
Total assets at fair value	<u>\$ 101,297,390</u>	<u>\$ 3,158,393,322</u>	<u>\$ 80,810,050</u>	<u>\$ 3,340,500,762</u>

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December 31, 2009

	Level 1	Level 2	Level 3	Total
Assets at fair value				
Convertible Arbitrage	\$ -	\$ -	\$ 304,116	\$ 304,116
Credit Arbitrage and Distressed	-	14,117,234	-	14,117,234
Event Driven	-	67,743,483	-	67,743,483
Fixed Income	96,919,183	217,676,320	45,529,331	360,124,834
Global Equities Long/Short	-	134,758,778	7,999,390	142,758,168
Global Macro/Trading	-	430,734,055	10,989,567	441,723,622
Liquidating stubs	-	988,524	3,013,230	4,001,754
Market Neutral Equities	-	1,525,834	-	1,525,834
Multi-Strategy				
SSALT Fund Limited	-	1,583,100,321	-	1,583,100,321
Private Equities	-	4,059,407	22,416,802	26,476,209
Real Estate	-	-	27,813,948	27,813,948
Short term Investments	-	208,933,262	-	208,933,262
Cash Surrender Value of Life Insurance	-	-	5,142,015	5,142,015
US Equities Long/Short	-	184,228,228	9,485,447	193,713,675
Total assets at fair value	96,919,183	2,847,865,446	132,693,846	3,077,478,475
Liabilities				
Currency Forward Contracts	-	(1,902,238)	-	(1,902,238)
Total liabilities at fair value	-	(1,902,238)	-	(1,902,238)
Total	\$ 96,919,183	\$ 2,845,963,208	\$ 132,693,846	\$ 3,075,576,237

The following table sets forth a summary of changes in the fair value of the Trust and Plan's Level 3 assets:

Year ended December 31, 2010

Strategy	Balance as of January 1, 2010	Transfers into (out of) Level 3	Net Purchases (sales)	Change in unrealized appreciation/ (depreciation)	Balance as of December 31, 2010
Convertible Arbitrage	\$ 304,115	\$ -	\$ -	\$ 118,485	\$ 422,600
Fixed Income	45,529,332	(2,816,820)	-	(24,097,666)	18,614,846
Global Equities Long/Short	7,999,390	-	(484,784)	1,708,846	9,223,452
Global Macro/Trading	10,989,567	-	(1,972,394)	2,317,731	11,334,904
Liquidating stubs	3,013,230	(3,013,230)	-	-	-
Private Equities	22,416,802	-	11,840,971	(654,076)	33,603,697
Real Estate	27,813,948	(27,813,948)	-	-	-
Cash Surrender Value of Life Insurance Policies	5,142,015	65,933	383,556	(131,866)	5,459,638
US Equities Long/Short	9,485,447	(8,404,186)	721,616	348,036	2,150,913
Total	\$ 132,693,846	\$ (41,982,251)	\$ 10,488,965	\$ (20,390,510)	\$ 80,810,050

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Year ended December 31, 2009

Strategy	Balance as of January 1, 2009	Transfers out of Level 3 ¹	Net purchases (sales)	Realized gain/(loss)	Change in unrealized appreciation/ depreciation	Balance as of December 31, 2009
Convertible Arbitrage	\$ 141,004,625	\$ (139,777,867)	\$ (1,020,162)	\$ (274,786)	\$ 372,305	\$ 304,115
Credit Arbitrage and Distressed	320,042,102	(320,042,102)	-	-	-	-
Event Driven	109,425,314	(109,425,314)	-	-	-	-
Fixed Income	555,380,335	(467,117,731)	(23,753,509)	(8,535,682)	(10,444,081)	45,529,332
Global Equities Long/Short	216,340,857	(211,637,215)	219,935	-	3,075,813	7,999,390
Global Macro/Trading	721,389,520	(714,426,764)	4,706,705	-	(679,894)	10,989,567
Liquidating stubs	13,766,313	(13,766,313)	2,605,967	-	407,263	3,013,230
Market Neutral Equities	79,423,593	(79,423,593)	-	-	-	-
Multi-Strategy	35,965,334	(35,965,334)	-	-	-	-
Private Equities	18,444,412	(4,130,838)	9,115,474	-	(1,012,246)	22,416,802
Real Estate	49,136,358	-	(4,854,789)	(1,331,095)	(15,136,526)	27,813,948
Cash Surrender Value of Life Insurance Policies	4,766,018	-	648,638	-	(272,641)	5,142,015
US Equities Long/Short	226,093,149	(224,231,587)	3,720,043	609,118	3,294,724	9,485,447
Total	<u>\$ 2,491,177,930</u>	<u>\$ (2,319,944,658)</u>	<u>\$ (8,611,698)</u>	<u>\$ (9,532,445)</u>	<u>\$ (20,395,283)</u>	<u>\$ 132,693,846</u>

1 Transfers represent investments in Portfolio Funds that were previously categorized as Level 3 investments for the year ended December 31, 2008. In accordance with revised authoritative guidance, these investments are being recategorized as Level 2 as of January 1, 2009.

Net change in unrealized (depreciation) for Level 3 investments held by the Trust at December 31, 2010 and 2009 were \$(20,390,510) and \$(20,395,283), respectively.

Trust net investment income for the years ended December 31, 2010 and 2009 is as follows:

	2010	2009
Investment income		
Interest	\$ 505,608	\$ 389,304
Dividends	9,004,040	14,210,932
Net appreciation in fair value of investments	271,089,766	438,209,225
Currency exchange (loss) gain	(21,070,339)	9,213,710
	<u>259,529,075</u>	<u>462,023,171</u>
Investment expense		
Unrelated business income tax expense (credit)	200,715	(4,959,338)
Investment fees	14,010,121	13,357,770
	<u>14,210,836</u>	<u>8,398,432</u>
Less: Income from 401(h) account	2,721,001	4,858,228
Net investment income	<u>\$ 242,597,238</u>	<u>\$ 448,766,511</u>

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Net appreciation (depreciation) in fair value of investments held by the Trust is as follows:

	2010	2009
Common stocks	\$ (49,115)	\$ (159,351)
Forward currency contracts	5,361,402	(1,207,118)
Limited partnerships and investment corporations	108,308,300	282,578,840
Commingled investment funds	156,812,793	156,781,956
Miscellaneous	656,386	214,898
Net appreciation	<u>\$ 271,089,766</u>	<u>\$ 438,209,225</u>

Investments in Derivatives and Financial Instruments with Off-Balance Sheet Risk

The Trust may enter into forward currency contracts (obligations to purchase or sell non-U.S. currencies in the future on dates and at prices fixed at the time contracts are entered into) to hedge the Trust against fluctuations in the value of its assets or liabilities due to changes in the value of non-U.S. currencies. Each day the forward currency contract is open, changes in the value of the contract are recognized as unrealized gains or losses by "marking to market". When the delivery of the currency is made or taken, the Trust records a realized gain or loss equal to the difference between the cost of closing the transaction and the Trust's basis in the contract. The unrealized appreciation (depreciation) is included in the Trust's net appreciation in fair value of investments, within the forward currency contracts component. The Trust is subject to off-balance sheet risk to the extent of the value of the contracts for purchases of non-U.S. currencies, and in unlimited amount for sales of contracts of non-U.S. currencies. The Trust had the following forward currency contracts open:

December 31, 2010

Contracts to Buy	Settlement Date	Contracts to Deliver	December 31, 2010 Market Value	Unrealized Appreciation
Euros 63,978,000	March 31, 2011	\$ 84,023,587	\$ 85,576,973	\$ 1,553,386
Euros 83,529,000	March 31, 2011	\$ 109,700,306	\$ 111,728,390	\$ 2,028,084

December 31, 2009

Contracts to Buy	Settlement Date	Contracts to Deliver	December 31, 2009 Market Value	Unrealized (Depreciation)
Euros 70,133,000	March 31, 2010	\$ 101,045,522	\$ 100,280,582	\$ (764,940)
Euros 104,001,000	March 31, 2010	\$ 149,841,521	\$ 148,707,182	\$ (1,134,339)

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7. Investment Options

A brief description of each investment option follows:

Currency Deposits Portfolio

Assets are invested in currency deposits held with Deutsche Bank to provide short-term fixed income.

Short-Term U.S. Treasury Money Market Portfolio

Assets are invested in the JP Morgan 100% U.S. Treasury Securities Money Market Capital Shares, JP Morgan Federal MM Institutional Shares and JP Morgan Money Market Institutional Shares, short-term mutual funds, which provide a consistently positive return and preserve flexibility.

Passive Euro Bonds Portfolio (Formerly Euroland Bond Portfolio)

Assets are invested in a broadly diversified portfolio of high-quality bonds, notes and short-term debt securities issued by governments, banks, corporations and other institutions of countries that are members of the European Monetary Union, as well as futures on these securities. The Portfolio's holdings are denominated in Euros.

Passive Inflation-Linked Bond Portfolio (Formerly Inflation-Linked Bond Portfolio)

Assets are primarily invested globally in inflation-indexed bonds of varying maturities issued or guaranteed by the U.S. and other national governments, their agencies, corporations and other issuers.

Passive U.S. Bonds Portfolio (Formerly U.S. Bond Portfolio)

Assets are invested in the Barclays U.S. Debt Index Fund, a commingled fund that holds diversified portfolios of corporate and U.S. government bonds, money market securities, and a variety of other income-oriented instruments with the aim of earning greater returns than other fixed-income alternatives.

Global Private Equity 1997 Portfolio

Assets are primarily invested in private equity partnerships that seek to provide long-term capital growth. These partnerships generally buy companies and attempt to institute an array of positive changes in the companies to substantially increase their value. Invested assets are restricted on a long-term basis, and no new funds may be invested in this option. At December 31, 2010 and 2009 assets in the amount of \$1,106,532 and \$1,717,178, respectively, were invested by the Trust in CGPEC – 1997 LLC, and the remaining portion of the portfolio is invested in the Special Situations Aggressive Long Term Portfolio and other assets. CGPEC – 1997 LLC is a related party owned by the Trust and certain shareholders of the Firm, and is advised by MIO Partners, Inc., a wholly owned subsidiary of the Firm.

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Special Situations Moderate Portfolio – USD (Formerly Hedging Strategies Portfolio)

Assets are primarily invested in the Special Situations Portfolio, limited partnerships, non-U.S. investment corporations and managed accounts to provide a reasonable expectation of growth through hedging strategies. The assets of the limited partnerships, non-U.S. investment corporations and managed accounts are principally invested in equity securities, government obligations and corporate bonds. The partnerships and non-U.S. investment corporations also establish positions through short sales of securities, repurchase and reverse repurchase agreements and derivative financial instruments including interest rate caps and swaps, options, futures and forward contracts for currencies, commodities and other financial instruments. Of the portfolio's assets at December 31, 2010 and 2009, no other country outside of the United States individually accounted for more than 10% of the portfolio's total assets.

Non-U.S. participants in this portfolio have the option to have their interests in the portfolio effectively denominated in Euros through foreign currency contracts for such currency.

Active Global Equities Portfolio (Formerly U.S. Active Equity and Non-U.S. Active Equity Portfolios)

Assets are primarily invested in non-U.S. equities in both developed and emerging markets through third-party asset managers employing aggressive, and sometimes leveraged, equity trading strategies and/or directly through equity and/or currency derivatives. The Portfolio invests mainly in equities, typically both long and short, and in other types of financial and non-financial assets, including currencies, debt securities, indexes and derivatives. Significant parts of the

Active Global Equities Portfolio (Formerly U.S. Active Equity and Non-U.S. Active Equity Portfolios) (Continued)

Portfolio may be invested in the Hedging Strategies Portfolio, the Special Situations Portfolio, and/or other relative value strategies, and it may hold cash investments.

Passive Non-U.S. Passive Equities Portfolio (Formerly Non-U.S. Passive Equity Index Portfolio)

Assets are invested in non-U.S. securities in developed and emerging markets. As a general rule, individual developed countries will be weighted according to their relative GDPs and rebalanced to that weighting once a year. Individual emerging market countries may be market capitalization-weighted or the asset manager may follow another largely passive approach. These investments are generally made through various investment vehicles managed by third parties. The Portfolio provides diversified participation in the world stock market outside the United States, with a significant emerging markets component, but without the risks or potential advantages of active management. At times, the Portfolio may also hold cash or cash equivalent securities.

Real Estate and Related Securities Portfolio

Assets are primarily invested in the JP Morgan Management Strategic Property and Special Situations Funds, commingled funds, and short-term investments to provide capital growth.

Passive U.S. Equities Portfolio (Formerly U.S. Passive Equity Index Portfolio)

Assets are primarily invested in various vehicles managed by third-party investment managers, but can also be invested by using derivatives such as futures and swaps. The Portfolio might also hold cash and cash equivalent securities, but in general will aim to have full exposure to the U.S. equities market. The Portfolio's holdings of stocks are, in general, weighted to match each stock's position in the Russell 3000 Index.

McKinsey & Company, Inc.
Money Purchase Pension Plan
Notes to Financial Statements
December 31, 2010 and 2009

Special Situations Aggressive Long Term Portfolio (Formerly Special Situations Portfolio)

Assets are primarily invested in managed accounts, limited partnerships and non-U.S. investment corporations to provide a high return through specialized investment strategies. The assets of the managed accounts are invested in U.S. and other national government obligations, corporate bonds, equity securities and commingled investment funds. Also, the managers sell securities short. The limited partnerships invest in U.S. and other national government obligations, corporate bonds and equity securities, frequently including securities of troubled companies, undervalued issues and securities with limited markets, as well as leveraged buyouts and real estate related assets. The limited partnerships and non-U.S. investment corporations also establish positions through short sales of securities and derivative financial instruments including interest rate caps and swaps, options, futures and forward contracts for currencies, commodities and other financial instruments. No country outside of the United States individually accounted for more than 10% of the portfolio's total assets at December 31, 2010 and 2009.

Non-U.S. participants in this portfolio have the option to have their interests in the portfolio effectively denominated in Euros through foreign currency contracts for such currency.

8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2010 and 2009 to the Form 5500:

	2010	2009
Net assets available for benefits per the financial statements	\$ 429,261,427	\$ 386,354,123
Net assets held in 401(h) account included as assets in Form 5500	<u>21,481,647</u>	<u>20,019,329</u>
Net assets available for benefits per the Form 5500	<u><u>\$ 450,743,074</u></u>	<u><u>\$ 406,373,452</u></u>

The net assets of the 401(h) account included in Form 5500 are not available to pay benefits and can only be used to pay health benefits for retirees and their beneficiaries.

The following is a reconciliation of differences in the changes in net assets per the financial statements to the Form 5500:

	For the Year Ended December 31, 2010		
	Amounts per Financial Statements	401(h) Account	Amounts per Form 5500
Plan interest in McKinsey Master Retirement Trust investment income	\$ 28,981,412	\$ 1,462,318	\$ 30,443,730

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The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2010, to the Form 5500:

	2010
Benefits paid to participants per the financial statements	\$ 10,683,495
Add: Amounts allocated to withdrawing participants at December 31, 2010	<u>12,696</u>
Benefits paid to participants per Form 5500	<u>\$ 10,696,191</u>

Amounts allocated to withdrawing participants are recorded on the Form 5500 for benefit claims that have been processed and approved for payment prior to December 31, 2010, but not yet paid as of that date.

9. Related Parties

MIO Partners, Inc. ("MIO"), a wholly owned subsidiary of the Firm, is the Investment Manager of the Trust. MIO manages the investments of the Trust and was reimbursed by the Trust for certain expenses incurred in connection with this role during 2010 and 2009 in the amounts \$12,700,672 and \$11,696,007, respectively. These transactions qualify as party-in-interest transactions or reimbursement of third party expenses.

10. Subsequent Events

Events that have occurred subsequent to December 31, 2010 and up to September 8, 2011, the date the financial statements were available to be issued, have been evaluated for disclosure within the financial statements. The Plan has determined that no additional items require disclosure.

McKinsey & Company, Inc.
Money Purchase Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End Of Year)
December 31, 2010

(a) Person known to be a party-in-interest to the plan	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
*	McKinsey Master Retirement Trust	Investment in Master Trust	**	\$ 428,100,814
*	Participant loans	Loans to participants, prime at origination, maturity dates vary. (interest rates varying from 3.25% to 8.25%, maturing from 2011-2014)	**	\$ 1,211,994

* Denotes party-in-interest as defined by ERISA

** Cost information is not required for participant-directed investments

Statement 1 Schedule H Line 4(i) - Schedule of Assets

(a) Person known to be a party-in-interest to the plan	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
*	McKinsey Master Retirement Trust	Investment in Master Trust	**	\$ 428,100,814
*	Participant loans	Loans to participants, prime at origination, maturity dates vary. (interest rates varying from 3.25% to 8.25%, maturing from 2011-2014)	**	\$ 1,211,994

* Denotes party-in-interest as defined by Erisa

** Cost information is not required for participant-directed investments