

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). ► Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 24pt;">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:	☐ a multiemployer plan;	☐ a multiple-employer plan; or	
	☒ a single-employer plan;	☐ a DFE (specify) ____	
B This return/report is:	☐ the first return/report;	☐ the final return/report;	
	☐ an amended return/report;	☐ a short plan year return/report (less than 12 months).	
C If the plan is a collectively-bargained plan, check here.	☐		
D Check box if filing under:	☒ Form 5558;	☐ automatic extension;	☐ the DFVC program;
	☐ special extension (enter description)		

Part II	Basic Plan Information —enter all requested information		
1a Name of plan <u>YUCCA MOUNTAIN SALARIED PENSION PLAN</u>	1b Three-digit plan number (PN) ►	<u>002</u>	
	1c Effective date of plan	<u>01/01/1992</u>	
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>USA REPOSITORY SERVICES LLC</u> <u>2131 S. CENTENNIAL AVENUE</u> <u>AIKEN, SC 29803</u>	2b Employer Identification Number (EIN) <u>26-2875791</u>	2c Sponsor's telephone number <u>803-502-5732</u>	2d Business code (see instructions) <u>541330</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/14/2011</u>	<u>DELOYD CAZIER</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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") USA REPOSITORY SERVICES LLC 2131 S. CENTENNIAL AVENUE AIKEN, SC 29803	3b Administrator's EIN 26-2875791 3c Administrator's telephone number 803-502-5732
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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	320
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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	2
b Retired or separated participants receiving benefits.....	6b	74
c Other retired or separated participants entitled to future benefits.....	6c	234
d Subtotal. Add lines 6a , 6b , and 6c	6d	310
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	7
f Total. Add lines 6d and 6e	6f	317
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	0
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:

1A 1G 1I

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2010 This Form is Open to Public Inspection
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010

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

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

A Name of plan <u>YUCCA MOUNTAIN SALARIED PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>USA REPOSITORY SERVICES LLC</u>	D Employer Identification Number (EIN) <u>26-2875791</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2010</u>
2	Assets:
a	Market value 2a <u>11582273</u>
b	Actuarial value 2b <u>12720254</u>
3	Funding target/participant count breakdown
	(1) Number of participants (2) Funding Target
a	For retired participants and beneficiaries receiving payment 3a <u>65</u> <u>6547737</u>
b	For terminated vested participants 3b <u>244</u> <u>7908197</u>
c	For active participants:
(1)	Non-vested benefits 3c(1) <u>0</u>
(2)	Vested benefits 3c(2) <u>1195957</u>
(3)	Total active 3c(3) <u>11</u> <u>1195957</u>
d	Total 3d <u>320</u> <u>15651891</u>
4	If the plan is at-risk, check the box and complete items (a) and (b) ☐
a	Funding target disregarding prescribed at-risk assumptions 4a
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been at-risk for fewer than five consecutive years and disregarding loading factor 4b
5	Effective interest rate 5 <u>6.57</u> %
6	Target normal cost 6 <u>140901</u>

Statement by Enrolled Actuary

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

SIGN HERE	<u>10/13/2011</u>
Signature of actuary	Date
<u>MICHELLE T. AUBIN, F.S.A.</u>	<u>11-07499</u>
Type or print name of actuary	Most recent enrollment number
<u>MERCER</u>	<u>303-376-0800</u>
Firm name	Telephone number (including area code)
<u>1225 17TH STREET, SUITE 2200</u> <u>DENVER, CO 80202-5516</u>	
Address of the firm	

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

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

Schedule SB (Form 5500) 2010
v.092308.1

Part II	Beginning of year carryover and prefunding balances	(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	20	0
8	Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9	Amount remaining (Item 7 minus item 8).....	20	0
10	Interest on item 9 using prior year's actual return of <u>20.73</u> %	4	
11	Prior year's excess contributions to be added to prefunding balance:		
a	Excess contributions (Item 38 from prior year)		119
b	Interest on (a) using prior year's effective rate of <u>8.18</u> %		10
c	Total available at beginning of current plan year to add to prefunding balance		129
d	Portion of (c) to be added to prefunding balance.....		
12	Reduction in balances due to elections or deemed elections.....		
13	Balance at beginning of current year (item 9 + item 10 + item 11d – item 12).....	24	0

Part III	Funding percentages		
14	Funding target attainment percentage.....	14	81.26 %
15	Adjusted funding target attainment percentage.....	15	81.26 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	91.85 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV	Contributions and liquidity shortfalls				
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/07/2010	86274				
07/07/2010	86274				
10/15/2010	86274				
01/10/2011	8600000				
Totals ▶			18(b)	8858822	18(c)
					0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years.....	19a
b Contributions made to avoid restrictions adjusted to valuation date	19b
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	8307575
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No	
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No	
c If 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of Quarter of this plan year	
(1) 1st	(2) 2nd
0	0
(3) 3rd	(4) 4th
0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.60 %	2nd segment: 6.65 %	3rd segment: 6.76 %	☐ N/A, full yield curve used
b Applicable month (enter code)	21b			0
22 Weighted average retirement age	22			59
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions).....	31	140901
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2305585	392585
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b – item 33).....	34	533486
	Carryover balance	Prefunding balance
35 Balances used to offset funding requirement	0	0
36 Additional cash requirement (item 34 minus item 35).....	36	533486
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c).....	37	8307575
38 Interest-adjusted excess contributions for current year (see instructions).....	38	7774089
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37).....	39	0
40 Unpaid minimum required contribution for all years	40	0

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 YUCCA MOUNTAIN SALARIED PENSION PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 USA REPOSITORY SERVICES LLC	D Employer Identification Number (EIN) 26-2875791	

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
DODGE & COX BALANCED FUND
94-6067274

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

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

THE BNY MELLON ASSET SERVICING

13-5160382

(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	TRUSTEE	46348	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MELLON CAPITAL MANAGEMENT

25-1442864

(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?
51	INVESTMENT MANAGER	13511	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

<div>SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration</div>	<div>DFE/Participating Plan Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>► File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2010</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan YUCCA MOUNTAIN SALARIED PENSION PLAN		B Three-digit plan number (PN) ► 002
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 USA REPOSITORY SERVICES LLC		D Employer Identification Number (EIN) 26-2875791

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)		
a Name of MTIA, CCT, PSA, or 103-12 IE: EB DV NON-SL INTL STOCK INDEX FUND			
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON			
c EIN-PN 25-6078093-213	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: EB DV NON-SL AGGRE BOND INDEX FUND			
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON			
c EIN-PN 25-6078093-214	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: EB DV NON-SL STOCK INDEX FUND			
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON			
c EIN-PN 25-6078093-215	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2010
		This Form is Open to Public Inspection

For calendar plan year 2010 or fiscal plan year beginning 01/01/2010 and ending 12/31/2010		
A Name of plan YUCCA MOUNTAIN SALARIED PENSION PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 USA REPOSITORY SERVICES LLC	D Employer Identification Number (EIN) 26-2875791	

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

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2811	8600000
(2) Participant contributions	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	100000	11504787
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	2978219	
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	8501267	
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	11582297	20104787

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	11989	11501
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	11989	11501

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	11570308	20093286
---	-----------	----------	----------

Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	8858822	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		8858822
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	192185	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		192185
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		285577
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		740566
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		10077150

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1446972	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		1446972
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	13511	
(4) Other	2i(4)	93689	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		107200
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1554172

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		8522978
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: EIDE BAILLY LLP

(2) EIN: 45-0250958

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

5b(1) Name of plan(s)

5b(2) EIN(s)

5b(3) PN(s)

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>YUCCA MOUNTAIN SALARIED PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>USA REPOSITORY SERVICES LLC</u>	D Employer Identification Number (EIN) <u>26-2875791</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
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>26-6877867</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

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

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

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

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

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

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

Schedule R (Form 5500) 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	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

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

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

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

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

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

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

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

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

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

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

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate item 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):



Financial Statements
December 31, 2010 and 2009

Yucca Mountain Salaried Pension Plan

Yucca Mountain Salaried Pension Plan

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December 31, 2010 and 2009

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Independent Auditor's Report

The Benefits Committee
Yucca Mountain Salaried Pension Plan
Aiken, South Carolina

We were engaged to audit the financial statements and supplemental schedules of Yucca Mountain Salaried Pension Plan (the Plan) as of December 31, 2010 and 2009, and for the years then ended, as listed in the accompanying table of contents. These financial statements and supplemental schedules are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 9, which was certified by the Bank of New York Mellon, the Trustee of the Plan, except for comparing such information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the Trustee as of and for the years then ended December 31, 2010 and 2009, that the information provided to the plan administrator by the Trustee is complete and accurate.

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

A handwritten signature in black ink that reads "Eide Bailly LLP".

Boise, Idaho
October 11, 2011

Yucca Mountain Salaried Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2010 and 2009

	<u>2010</u>	<u>2009</u>
Assets		
Cash and cash equivalents	\$ 11,504,787	\$ 100,000
Investments, at fair value		
Common collective trust	-	2,978,219
Mutual funds	-	8,501,267
	<u>11,504,787</u>	<u>11,579,486</u>
Receivables		
Employer contribution	<u>8,600,000</u>	<u>2,811</u>
	<u>8,600,000</u>	<u>2,811</u>
	20,104,787	11,582,297
Liabilities		
Payable for administrative expense	<u>11,501</u>	<u>11,989</u>
Net Assets Available for Benefits	<u><u>\$ 20,093,286</u></u>	<u><u>\$ 11,570,308</u></u>

Yucca Mountain Salaried Pension Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2010 and 2009

	<u>2010</u>	<u>2009</u>
Additions		
Investment Income		
Net appreciation in fair value of investments	\$ 1,026,143	\$ 1,687,697
Dividend income	192,186	197,681
Interest income	-	62
	<u>1,218,329</u>	<u>1,885,440</u>
Contributions		
Employer contributions	<u>8,858,822</u>	<u>355,038</u>
Total additions	<u>10,077,151</u>	<u>2,240,478</u>
Deductions		
Benefit payments	1,446,972	3,587,324
Administrative fees	45,860	45,790
Investment advisory fees	13,511	16,794
Pension Benefit Guaranty Corporation premium	<u>47,830</u>	<u>32,419</u>
Total deductions	<u>1,554,173</u>	<u>3,682,327</u>
Net Increase (Decrease)	8,522,978	(1,441,849)
Net Assets Available for Benefits		
Beginning of year	<u>11,570,308</u>	<u>13,012,157</u>
End of year	<u>\$ 20,093,286</u>	<u>\$ 11,570,308</u>

Note 1 - Plan Description

The following description of the Yucca Mountain Salaried Pension Plan (the Plan), is provided for general information purposes only. Participants should refer to the plan document for a more comprehensive description of the Plan's provisions.

General

The Plan was initially established by TRW Environmental Safety Systems, Inc. (TESS) effective as of January 1, 1992. Effective February 12, 2001, Bechtel SAIC Company, LLC (BSC) assumed sponsorship of the Plan in connection with the transfer of management and operating responsibilities of the United States Department of Energy's Yucca Mountain Site from TESS to BSC. Effective April 1, 2009, the Plan's sponsorship was transferred from BSC to USA Repository Services, LLC (USA RS) and renamed the Yucca Mountain Salaried Pension Plan. The Plan was formerly known as the Bechtel SAIC Company, LLC Salaried Pension Plan.

Eligible plan participants include former TESS plan participants who were employed by BSC subsequent to the transfer of operating responsibilities to BSC, certain former TESS plan participants who are vested in their benefits but were not employed by either BSC or other TRW-related entities subsequent to the transfer of operating responsibilities to BSC, and TESS retirees who were already receiving benefits under the TESS Plan. Under the terms of the Plan, effective with BSC's assumption of sponsorship, no new participants are allowed.

Bechtel SAIC Company, LLC received approval from the Department of Energy on June 3, 2008 to freeze the BSC Salaried Pension Plan to highly compensated employees. Future pension accruals were replaced with contributions to the BSC 401(k) Savings Plan per its plan document.

Effective December 31, 2010, the benefits of all employees were frozen. Pursuant to this freeze, no prior, current, or future employees may earn additional benefits. Earnings and benefit service amounts shall not exceed those established as of the date of the freeze, December 31, 2010.

Pension Benefits

Employees with 5 or more years of service are entitled to annual pension benefits (paid monthly) beginning at normal retirement age (65) equal to 1.5% of their average annual compensation (highest five consecutive calendar years) multiplied by the years of benefit service (maximum 35 years) plus 1.33% of their average annual compensation multiplied by the years of benefit service in excess of 35 years less 0.4% of their social security covered compensation (or average annual compensation, if lower) multiplied by years of benefit service (maximum 35 years). Annual earnings in excess of \$200,000, adjusted annually for the changes in the cost of living as provided in Section 415(d) of the Internal Revenue Code, are not eligible when determining benefits under the Plan.

The Plan permits early retirement at ages 55-64 with 10 years of service. Participants who retire early shall be entitled to a percentage of the normal retirement benefit, with the percentage increasing as the actual retirement age approaches normal retirement age. Participants receive their pension benefits in the form of a 50% joint and survivor annuity, if married, or a single life annuity, if not married, however, additional forms of pension benefits may be available to participants in accordance with the Plan's provisions. If an employee terminates before completing five years of service, they are not vested and are not entitled to benefits under the Plan.

Employees that terminate that are vested, regardless of age, will receive the value of their accumulated plan benefits as a lump sum distribution upon termination provided that the lump sum value does not exceed \$1,000.

If participants are married and die before they retire (whether or not they are current employees) and they are vested in the Plan, their surviving spouse is entitled to a benefit payable for life. Active employees who become totally disabled after completing five years of vested service will continue to earn benefits subject to certain limitations. Benefit payments to participants are recorded upon distribution. There are no provisions for loans or hardship withdrawals.

Death and Disability Benefits

The Plan provides specified retirement and death benefits to be paid from the net assets available for benefits. The level of benefits under the Plan is based principally on an employee's years of service and average compensation. The standard form of retirement benefit to single participants is a monthly payment beginning the first day of the month following retirement and continuing until death. The standard form of benefit to married participants is a reduced monthly payment for the participant's life and one-half of that payment for the life of the participant's surviving spouse. However, a participant or a participant's surviving spouse can elect to have a lump sum distribution of benefits, if eligible.

Note 2 - Summary of Significant Accounting Policies

Basis of Presentation

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 the plan administrator to make significant estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, disclosure of contingent assets and liabilities, and actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is 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. See Note 7 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Cash and Cash Equivalents

Cash and cash equivalents consist of temporary investments in a money market account. The Plan considers all highly liquid investments purchased with an original maturity of three months or less to be cash equivalents.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

The Plan pays for all expenses incurred by the Plan from the assets of the Plan, except for certain professional fees which are paid by USA RS.

Subsequent Events

The plan sponsor has evaluated subsequent events through October 11, 2011, the date which the financial statements were available to be issued. As discussed in Note 6, subsequent to year end, the Plan transferred its assets to Mercer Global Investments.

Note 3 - Funding Policy

All contributions to the Plan are made by USA RS. The amounts of annual contributions by USA RS to the Plan are determined by an actuary and represent the amounts necessary to provide for payment for the benefits specified under the Plan. USA RS's annual contributions equal or exceed the minimum funding requirements of Employee Retirement Income Security Act of 1974 (ERISA), which requires payment by September 15th of the following year.

In accordance with the minimum funding requirements of ERISA for the 2010 and 2009 plan years, USA RS has made the required contributions to the Plan. As of December 31, 2010 and 2009, \$271,829 and \$0, respectively, of the minimum contributions had not been paid. USA RS remitted these amounts to the Plan subsequent to each year end.

Note 4 - Plan Termination

The Plan is voluntary on the part of USA RS, and USA RS reserves the right to terminate the Plan at any time, subject to the provisions of the plan document and the Employee Retirement Income Security Act of 1974. Upon termination of the Plan or complete discontinuance of contributions to the Plan, the participants would be 100% vested and the funds of the Plan would be allocated for the benefit of each participant, beneficiary, joint annuitant, and eligible spouse. Benefits would be distributed in a manner approved by the Internal Revenue Service, and in accordance with the provisions of, and regulations issued pursuant to, Section 4044 of ERISA.

In the event the Plan terminates, the net assets of the Plan would be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- (a) Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination.
- (b) Other vested benefits insured by the Pension Benefit Guaranty Corporation (a U.S. government agency) up to the applicable limitations (discussed below).
- (c) All non-vested benefits.

If the Plan terminates, the Pension Benefit Guaranty Corporation (PBGC) insured certain benefits under the Plan. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, there is statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2010 and 2009, the ceiling was \$4,500. The ceiling applies to those participants who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later).

For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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

USA RS has the right to amend the Plan at any time.

Note 5 - Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments that are attributable, under the Plan's provisions, to the service which employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of deceased employees and (c) present employees or their beneficiaries. Benefits under the Plan are based on employee's years of service. The accumulated plan benefits for active employees are based on their years of service on the date the benefit information is presented (the valuation date). Benefits payable under all circumstances – retirement, death, disability and termination of employment – is included to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits was as follows:

	2010	2009
Vested benefits		
Participants currently receiving payments	\$ 5,802,443	\$ 4,746,054
Other participants	7,585,652	10,236,408
	13,388,095	14,982,462
Nonvested benefits	125,038	406,273
Actuarial present value of accumulated plan benefits at		
January 1, 2010 and 2009, respectively	<u>\$ 13,513,133</u>	<u>\$ 15,388,735</u>

Yucca Mountain Salaried Pension Plan
Notes to Financial Statements
December 31, 2010 and 2009

The change in the actuarial present value of the Plan's accumulated plan benefits is as follows:

	<u>2010</u>	<u>2009</u>
Actuarial present value of accumulated plan benefits at January 1, 2009	\$ 15,388,735	\$ 14,779,669
Increase (decrease) during the year attributable to		
Benefits accumulated	557,718	1,936,805
Interest due to decrease in the discount period	1,075,648	1,093,762
Benefits paid	(3,587,324)	(2,044,885)
Plan amendment	-	(3,306)
Change in actuarial assumptions	<u>78,356</u>	<u>(373,310)</u>
Actuarial present value of accumulated plan benefits at January 1, 2010 and 2009, respectively	<u>\$ 13,513,133</u>	<u>\$ 15,388,735</u>

The actuarial present value of accumulated plan benefits is determined by the Plan's consulting actuary, and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements for death, withdrawal or retirement) between the valuation date and the expected date of payment.

The following significant actuarial assumptions were used in the valuation as of January 1, 2010:

Assumed rate of return on investments for accumulated benefits	8%
Mortality basis	2010 PPA separate generational annuitant and nonannuitant mortality tables
Normal retirement	Age 55
Assumed retirement range	Age 55 through 70

The forgoing actuarial assumptions are based on the presumption that the Plan will continue. These significant assumptions have remained constant since the prior valuation date, January 1, 2009, except for (1) the 2009 PPA separate generational annuitant/nonannuitant tables were updated from the 2009 combined current liability tables to the 2010 PPA separate generational annuitant/nonannuitant tables. However, the actuarial present value of accumulated plan benefits is also subject to various other actuarial assumptions, some of which have changed since the prior valuation date, January 1, 2009. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

Note 6 - Investments

The following schedule lists investments held at December 31, 2010 and 2009 that represent 5% or more of the Plan's net assets.

	2010	2009
Investments at fair value		
Mellon Bank EB International Stock Index Fund	**	\$ 1,398,453
Mellon Bank EB Non-SL Stock Index Fund	**	1,035,391
Dodge and Cox Balanced Fund	**	8,501,267

** Investment did not constitute 5% of the Plan's net assets.

During 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by approximately \$285,577 and \$740,566 for the common collective trust and mutual funds, respectively. During 2009, the Plan's investments depreciated (appreciated) in value by approximately \$469,910 and \$(2,157,607) for the common collective trust and mutual funds, respectively.

Near the end of the 2010 plan year, all investment assets were converted to cash and cash equivalents to provide liquidity in preparation for the transfer of assets to Mercer Global Investments. In January of 2011, all funds were transferred to Mercer Global Investments who will be the new asset manager.

Note 7 - Fair Value Measurements of Assets and Liabilities

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1- Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2- Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability;
- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

Yucca Mountain Salaried Pension Plan

Notes to Financial Statements

December 31, 2010 and 2009

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2010 and 2009.

Common collective trust: Valued at the prices of the underlying assets that are priced on an active market.

Mutual funds: Valued at the net asset value (NAV), using quoted market prices from an active market, of shares held by the Plan at year end.

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

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

Assets at Fair Value as of December 31, 2010				
	Level 1	Level 2	Level 3	Total
Common collective trust	\$ -	\$ -	\$ -	\$ -
Mutual funds				
Balanced funds	-	-	-	-
Total assets at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

Assets at Fair Value as of December 31, 2009				
	Level 1	Level 2	Level 3	Total
Common collective trust	\$ -	\$ 2,978,219	\$ -	\$ 2,978,219
Mutual funds				
Balanced funds	8,501,267	-	-	8,501,267
Total assets at fair value	<u>\$ 8,501,267</u>	<u>\$ 2,978,219</u>	<u>\$ -</u>	<u>\$ 11,479,486</u>

Changes in Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classifications of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

We evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the year ended December 31, 2010, there were not significant transfers in or out of the levels 1, 2 or 3.

Note 8 - Income Tax Status

The Plan received its latest determination letter on June 9, 2009, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan's Administrative Committee believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

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 (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by Internal Revenue Service. 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 asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2007.

Note 9 - Information Certified by Trustee

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulation for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator has obtained certifications from the Trustee of the Plan as of December 31, 2010 and 2009 and for the years then ended, that all investment information provided by the Trustee is complete and accurate. Information included in the accompanying financial statements as to investments in the trust fund administered by the Trustee, investment income and all investment information in the supplemental schedules is presented in reliance solely upon this certification.

Note 10 - Party-in-Interest Transactions

Certain plan investments are shares of investments that are managed by the Bank of New York Mellon. The Bank of New York Mellon is the Trustee as defined by the Plan, and therefore these transactions are considered exempt party-in-interest transactions. Fees paid by the Plan for investment management services were included as reductions of the return earned on each fund.

Note 11 - Risk and Uncertainties

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

Yucca Mountain Salaried Pension Plan

Notes to Financial Statements

December 31, 2010 and 2009

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



Supplemental Schedules
December 31, 2010

Yucca Mountain Salaried Pension Plan

Yucca Mountain Salaried Pension Plan
Schedule H, Line 4i – Schedule of Assets Held at End of Year
December 31, 2010
Plan: 002

EIN: 26-6877867

(a)	(b)	(c)	(d)	(e)
	Identify of issuer, borrower, lessor or similar party	Description of investment, including maturity date, rate of interest, collateral par or maturity value	Cost	Current Value
*	Mellon Bank N.A.	Cash Manager Account	<u>\$ 11,504,787</u>	<u>\$ 11,504,787</u>
			<u><u>\$ 11,504,787</u></u>	<u><u>\$ 11,504,787</u></u>

* Indicates party-in-interest transaction

Yucca Mountain Salaried Pension Plan
Schedule H, Line 4j – Schedule of Reportable Transactions
December 31, 2010
Plan: 002

EIN: 26-6877867

(a) Identity of Party Involved	(b) Description of Asset	Number Purchase Trans- actions	(c) Purchase Price	Number Sales Trans- actions	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain/(Loss)
(i) Single transactions										
Dodge and Cox Balanced Fund	Mutual Fund	-	\$ -	1	\$ 8,154,501	\$ -	\$ -	\$ 8,255,678	\$ 8,154,501	\$ (101,177)
Dodge and Cox Balanced Fund	Mutual Fund	-	-	28	9,696,580	-	-	9,925,327	9,696,580	(228,747)
Dodge and Cox Balanced Fund	Mutual Fund	9	454,748	-	-	-	-	454,748	454,748	-
EB Daily Valued NSL Int'l SIF	CCT	-	-	2	1,496,693	-	-	1,379,104	1,496,693	117,589
EB Daily Valued NSL SIF	CCT	-	-	1	1,187,687	-	-	983,008	1,187,687	204,679
EB Daily Valued NSL SIF	CCT	-	-	2	1,191,999	-	-	986,934	1,191,999	205,065
EB Daily Valued NSL Int'l SIF	CCT	-	-	1	1,491,754	-	-	1,373,929	1,491,754	117,825
Dreyfus Treasury Prime Cash	Cash and cash equivalents	1	8,154,501	-	-	-	-	8,154,501	8,154,501	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	-	-	32	1,184,449	-	-	1,184,449	1,184,449	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	1	3,250,285	-	-	-	-	3,250,285	3,250,285	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	33	12,589,235	-	-	-	-	12,589,235	12,589,235	-

Yucca Mountain Salaried Pension Plan
Schedule H, Line 4j – Schedule of Reportable Transactions
December 31, 2010
Plan: 002

EIN: 26-6877867

(a) Identity of Party Involved	(b) Description of asset	Number Purchase Trans- actions	(c) Purchase Price	Number Sales Trans- actions	(d) Selling Price	(e) Lease Rental	(f) Expenses Incurred with Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
(i) Single transactions										
Dodge and Cox Balanced Fund	Mutual Fund	-	\$ -	1	\$ 8,154,501	-	-	\$ 8,255,678	\$ 8,154,501	\$ (101,177)
Dodge and Cox Balanced Fund	Mutual Fund	-	-	28	9,696,580	-	-	9,925,327	9,696,580	(228,747)
Dodge and Cox Balanced Fund	Mutual Fund	9	454,748	-	-	-	-	454,748	454,748	-
EB Daily Valued NSL Int'l SIF	CCT	-	-	2	1,496,693	-	-	1,379,104	1,496,693	117,589
EB Daily Valued NSL SIF	CCT	-	-	1	1,187,687	-	-	983,008	1,187,687	204,679
EB Daily Valued NSL SIF	CCT	-	-	2	1,191,999	-	-	986,934	1,191,999	205,065
EB Daily Valued NSL Int'l SIF	CCT	-	-	1	1,491,754	-	-	1,373,929	1,491,754	117,825
Dreyfus Treasury Prime Cash	Cash and cash equivalents	1	8,154,501	-	-	-	-	8,154,501	8,154,501	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	-	-	32	1,184,449	-	-	1,184,449	1,184,449	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	1	3,250,285	-	-	-	-	3,250,285	3,250,285	-
Dreyfus Treasury Prime Cash	Cash and cash equivalents	33	12,589,235	-	-	-	-	12,589,235	12,589,235	-

[Note - "Number of transactions" is required when presenting series of transactions on a single line instead of listing each transaction in a series].

Yucca Mountain Salaried Pension Plan
Schedule H, Line 4i – Schedule of Assets Held at End of Year
December 31, 2010
Plan: 002

EIN: 26-6877867

(a)	(b) Identify of issuer, 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
*	Mellon Bank N.A.	Cash Manager Account	<u>11,504,787</u>	<u>11,504,787</u>
			<u><u>\$ 11,504,787</u></u>	<u><u>\$ 11,504,787</u></u>

* Indicates party-in-interest transaction

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

As of January 1, 2010, all actives were assumed to terminate at December 31, 2010 due to the closure of the site. As of December 31, 2010, 5 of the 11 active participants were eligible for retirement. Their average age is 59.

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

Actuarial assumptions

Discount rate elections	Segmented yield curve published for January 2010
▪ First Segment Rate	4.60%
▪ Second Segment Rate	6.65%
▪ Third Segment Rate	6.76%
Mortality elections	
▪ Healthy and disabled participants	Section 430(h)(3) prescribed separate generational annuitant and nonannuitant mortality tables.
417(e) lump sums	
▪ Annuity substitution	Yes
▪ Generational mortality option	Yes
▪ Phase-in option	No
Other economic assumptions	
▪ Salary increases	See table of sample rates
▪ Social Security wage base	3.80% per year
▪ Inflation	2.80% per year
▪ Expenses	\$75,000 has been included in the target normal cost based on a best estimate of administrative expenses and estimated PBGC premiums.
Demographic assumptions	
Withdrawal	Remaining active participants are all assumed to be laid off by December 31, 2010.
Disability incidence	None assumed.
Retirement age	All active participants are assumed to be laid off by December 31, 2010.

Schedule SB, Part V – Statement of actuarial assumptions/methods (*continued*)**Demographic assumptions** (*continued*)

Benefit commencement age for

- Future vested deferred 55
- Current vested deferred 55

Spouse assumptions

Male participants**Female participants**

- Percentage married 80% 80%
- Spouse age difference 3 years younger 3 years older

	<u>Lump sum</u>	<u>Single life</u>	<u>100% J&S</u>	<u>50% J&S</u>
Form of payment				
▪ Active retirements	90%	5%	5%	0%
▪ Future vested deferred	0%	50%	50%	0%
▪ Future deaths	0%	0%	0%	100%
▪ Current vested deferred	0%	50%	50%	0%

Unpredictable contingent event benefit assumptions

It was assumed with 100% probability that a UCEB would be paid from the plan this year for the remaining active employees accruing benefits.

Table of sample rates

Attained age	Salary increases
20	6.3%
25	6.3%
30	5.8%
35	5.3%
40	4.8%
45	4.3%
50	3.3%
55	3.3%
60	3.3%
65	3.3%

Schedule SB, Part V – Statement of actuarial assumptions/methods (*continued*)

Actuarial methods

Asset methods – effective January 1, 2009

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

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant methods – effective January 1, 2008

We used the participant data supplied by the plan sponsor as of January 1, 2010. We have reviewed the data and have no reason to doubt its substantial accuracy. Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does not have any insurance contracts.

Minimum funding method

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

A detailed description of the calculation follows:

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

Schedule SB, Part V – Statement of actuarial assumptions/methods (*continued*)

- This plan values the costs of unpredictable contingent event benefits by adding one additional year of accrued service to benefit service for active employees who are anticipated to be laid off by the employer in the upcoming year, as the likelihood of the layoff was known before the beginning of the plan year.
- The plan's **target normal cost** is the sum of the individual target normal costs plus assumed annual administrative expenses, and the plan's **funding target** is the sum of the accrued liabilities for all participants under the plan.

Schedule SB, Part V – Summary of plan provisions

Benefits included or excluded

Unless noted below, all benefits provided by the plan, as restated and amended through Amendment No. 5, are included in this valuation.

- **Most recent plan amendments included:** Amendment No. 5 effective December 22, 2009.
- **Plan amendments excluded:** None.
- **IRC Section 436 benefit restrictions:**
 - *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits that occurred before the valuation date but includes contingent event benefits which are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
 - *Plan amendments:* See above.
 - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
 - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.
- **Scheduled benefit increases:** Scheduled benefit increases effective after the end of the current plan year are excluded from minimum funding requirements.
- **Late retirement increases:**
 - *Active participants:* The plan applies late retirement actuarial increases for all participants who defer retirement beyond their normal retirement date and this valuation includes those increases.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued not including the late retirement actuarial increase, as it deemed immaterial.
- **Unpredictable contingent event benefits:** The plan's unpredictable contingent event benefits, described below, are valued based on the assumptions described in Appendix E of this exhibit.
- **IRC Section 415(b) benefit limitations:** The limitations of Internal Revenue Code Section 415(b) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60 percent of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Schedule SB, Part V – Summary of plan provisions (*continued*)

Summary of major plan provisions

Effective date and plan year	Original plan: January 1, 1992 Restated plan: January 1, 2008 As amended through Amendment 5 effective December 22, 2009 Plan year: Calendar year
Status of the plan	The plan has ongoing benefit accruals for anyone who meets the requirements for Covered Employees below. Benefits are frozen for highly compensated employees.
Significant events that occurred during the year	It is anticipated that all remaining active employees will be laid off by December 31, 2010 and that has been incorporated into the valuation.
Definitions	
▪ Covered employees	Any eligible employee who is also a former employer of TRW Environmental Safety Systems, Inc. hired prior to February 12, 2001.
▪ Participation	An Eligible Employee or a former employee of (i) TRW Environmental Safety Systems, Inc. or (ii) the Company, who retains an Accrued Benefit under the Plan. Plan is closed to new participants hired after February 12, 2001. Future accruals are frozen for all Highly Compensated Employees, effective July 31, 2008.
▪ Employee contributions	All contributions to support the Plan are made by USA Repository Services LLC.
▪ Credited service	Generally included any calendar month in which a Participant receives compensation.
▪ Vesting service	Same as credited service, including service as a leased employee.
▪ Final average earnings	Monthly Average of the highest 5 consecutive calendar years of considered compensation.
▪ Covered Compensation	The average, for the year in which the Severance from Service Date falls, of the taxable wage bases (without indexing) in effect for each calendar year during the 35-year period ending with the year in which the participant attains Social Security Retirement Age.
▪ Accrued benefit	With respect to a Participant, at any point in time, the Participant's Normal Retirement Benefit based on the Participant's Years of Benefit Service and Earnings as of the date on which the calculation is made.

Schedule SB, Part V – Summary of plan provisions (*continued*)

Normal retirement	
▪ Eligibility	Later of age 65 or the fifth anniversary of the Participant's Employment Commencement Date.
▪ Benefit	1.5% of earnings per year of Benefit Service up to 35 years; less 0.4% of earnings up to Covered Compensation per year of Benefit Service up to 35 years (QSUPP); plus 1.33% of earnings for years of Benefit Service in excess of 35.
Early retirement	
▪ Eligibility	Age 55 and 10 or more years of Benefit Service. Highly compensated employees who no longer accrue benefits continue to earn service toward early retirement eligibility as they continue service at the company.
▪ Benefit	<i>Payable prior to attainment of Age 62 and hired before March 1, 2000:</i> 1.5% of Earnings per year of Benefit Service up to 35 years, plus 1.33% of Earnings for years of Benefit Service in excess of 35; Reduced to reflect the age of the participant at Retirement based on Early Retirement factor tables. <i>Payable after attainment of age 62 or hired after February 29, 2000:</i> Same as Normal Retirement Benefit; and further reduced to reflect the age of the participant at Retirement based on Early Retirement factor tables.
▪ Early retirement factors	For participants who are early retirement eligible and hired before March 1, 2000, the retirement benefits are reduced by 4.00% per year for every year where retirement occur before age 60. For participants who are early retirement eligible and hired on or after March 1, 2000, the retirement benefits are reduced by 5.00% per year for every year where retirement occurs before age 62.
Late retirement	
▪ Eligibility	After normal retirement
▪ Benefit	Determined as the maximum of the Normal Retirement Benefit using Benefit Service through actual retirement date, and the retirement benefit at Normal Retirement Date including actuarial increases.

Schedule SB, Part V – Summary of plan provisions (*continued*)

Deferred vested													
▪ Benefit	Same as Early Retirement Benefit except reduced to reflect the age of the participant at commencement based on vested benefit factor tables.												
▪ Eligibility	5 years of Vesting Service												
▪ Vested benefit factors	For participants who are deferred vested, their benefits are reduced by 6 $\frac{2}{3}$ % per year from age 65 to age 60. Before age 60, there is an additional reduction as follows:												
	<table> <tr> <th>Age</th><th>Percentage</th></tr> <tr> <td>59</td><td>3.9%</td></tr> <tr> <td>58</td><td>4.2%</td></tr> <tr> <td>57</td><td>3.8%</td></tr> <tr> <td>56</td><td>3.5%</td></tr> <tr> <td>55</td><td>3.2%</td></tr> </table>	Age	Percentage	59	3.9%	58	4.2%	57	3.8%	56	3.5%	55	3.2%
Age	Percentage												
59	3.9%												
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57	3.8%												
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55	3.2%												
Disability													
▪ Eligibility	4 years of Vesting Service												
▪ Benefit	An employee will continue to accrue up to five years of Benefit Service (up to one year if employee has less than five years of Vesting Service) while on absence from work due to disability and while entitled to receive long-term disability benefits under any plan maintained by a member of the Controlled Group.												
Pre-retirement death													
▪ Eligibility	Participant eligible for Vested or Retirement Benefit at the time of death.												
▪ Benefit prior to early retirement	For death before earliest retirement age with a vested right, the Participant's eligible Spouse will receive the benefit that would be payable if the Participant had terminated employment on the date of death or actual Severance from Service Date if earlier; survived to earliest retirement age; retired with a Qualified Joint and Survivor Annuity; and died the day after earliest retirement age.												
▪ Benefit after early but before normal retirement	For death on or after earliest retirement age with a vested right, the Participant's eligible Spouse will receive the benefit that would be payable if the Participant had retired with a Qualified Joint and Survivor Annuity on the day before the Participant's death.												
▪ Benefit after normal retirement	Death benefit provided in the form of payment in effect at the time of death.												

Schedule SB, Part V – Summary of plan provisions (*continued*)

Form of benefits	
▪ Automatic form for unmarried participants	Life Annuity
▪ Automatic form for married participants	Reduced Joint and 50% Survivor Annuity
▪ Optional forms	<p>Life Only</p> <p>Ten Years Certain and Life</p> <p>Joint and Survivor (50%, 75%, or 100%)</p> <p>Single Lump Sum (if over age 55 at Severance from Service Date)</p> <p>Optional forms other than lump sums are actuarially equivalent to a life annuity based on 8.5% interest and the 417(e) applicable mortality table. Lump sums are actuarially equivalent based on 417(e) applicable interest rates and mortality.</p>
Miscellaneous	
▪ Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. For 2009 the limit is \$245,000.
▪ Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2009 the limit is \$195,000.
▪ Benefits not included in valuation	None
▪ Unpredictable contingent event benefit	If a participant is laid off under the terms of the plan, they can receive up to 12 additional months of benefit service.
▪ Highly compensated employee threshold	A participant is determined to be a highly compensated employee for 2010 if their compensation for 2009 was over \$110,000.
▪ Changes since the prior valuation	None

Schedule SB, line 24 – Change in actuarial assumptions

Interest rates were updated from 2009 to 2010 in accordance with PPA and the Sponsor changed their interest rate election from full yield curve with a two month look-back to segmented yield curve with no look-back.

The expenses assumption changed from \$100,000 to \$75,000 to better reflect future expectations.

Salary Scale was changed for non-highly compensated employees to better reflect future expectations.

The Social Security wage base assumption was increased from 3.55% to 3.80% to better reflect future expectations.

Withdrawal assumptions were updated to reflect that all active employees are anticipated to be laid off by December 31, 2010.

There were no other changes in actuarial assumptions since the last actuarial valuation as of January 1, 2009.

Schedule SB, line 26 – Schedule of active participant data

Attained Age	Years of credited service as of January 1, 2010									
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
< 25										
25-29										
30-34										
35-39					1					
40-44				1	1					
45-49				1	2					
50-54					2					
55-59			1							
60-64				1	1					
65+										

In each cell, the number is the count of active participants for each age/service combination.

Schedule SB, line 32 – Schedule of amortization bases

The total shortfall amortization charge is the sum of the individual shortfall base amortization installment created during each plan year covered under PPA. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

Base	Amortization Period			Balances		Installment
	Date created	Initial years	Years left	Initial	Present Value of Remaining Installments	
Shortfall charge	1/1/08	7	5	\$ 26,513	\$ 20,061	\$ 4,381
Shortfall charge	1/1/09	7	6	309,211	291,020	54,869
Shortfall charge	1/1/10	7	7	1,994,504	1,994,504	333,335
Total					\$ 2,305,585	\$ 392,585

<p>SCHEDULE SB (Form 5500)</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Single-Employer Defined Benefit Plan Actuarial Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).</p> <p>► File as an attachment to Form 5500 or 5500-SF.</p>	<p>OMB No. 1210-0110</p> <hr/> <p>2010</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part II Beginning of year carryover and prefunding balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (Item 13 from prior year)	20	0
8 Portion used to offset prior year's funding requirement (Item 35 from prior year)	0	0
9 Amount remaining (Item 7 minus item 8)	20	0
10 Interest on item 9 using prior year's actual return of <u>20.73</u> %	4	
11 Prior year's excess contributions to be added to prefunding balance:		
a Excess contributions (Item 38 from prior year)		119
b Interest on (a) using prior year's effective rate of <u>8.18</u> %		10
c Total available at beginning of current plan year to add to prefunding balance		129
d Portion of (c) to be added to prefunding balance		
12 Reduction in balances due to elections or deemed elections		
13 Balance at beginning of current year (item 9 + item 10 + item 11d - item 12)	24	0

Part III Funding percentages

14 Funding target attainment percentage	14	81.26 %
15 Adjusted funding target attainment percentage	15	81.26 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	91.85 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/07/2010	86,274				
07/07/2010	86,274				
10/15/2010	86,274				
01/10/2011	8,600,000				
Totals ►			18(b)	8,858,822	18(c) 0

19 Discounted employer contributions - see instructions for small plan with a valuation date after the beginning of the year:	
a Contributions allocated toward unpaid minimum required contribution from prior years.	19a
b Contributions made to avoid restrictions adjusted to valuation date	19b
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c 8,307,575
20 Quarterly contributions and liquidity shortfalls:	
a Did the plan have a "funding shortfall" for the prior year?	☒ Yes ☐ No
b If 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	☒ Yes ☐ No
c If 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of Quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.60 %	2nd segment: 6.65 %	3rd segment: 6.76 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 59
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute				

Part VI Miscellaneous items

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

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost, adjusted, if applicable (see instructions)	31	140,901
32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2,305,585	392,585
b Waiver amortization installment	0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (item 31 + item 32a + item 32b - item 33)	34	533,486
35 Balances used to offset funding requirement	Carryover balance	Prefunding balance
	0	0
36 Additional cash requirement (item 34 minus item 35)	36	533,486
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (Item 19c)	37	8,307,575
38 Interest-adjusted excess contributions for current year (see instructions)	38	7,774,089
39 Unpaid minimum required contribution for current year (excess, if any, of item 36 over item 37)	39	0
40 Unpaid minimum required contribution for all years	40	0

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

As of January 1, 2010, all actives were assumed to terminate at December 31, 2010 due to the closure of the site. As of December 31, 2010, 5 of the 11 active participants were eligible for retirement. Their average age is 59.

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

Actuarial assumptions

Discount rate elections	Segmented yield curve published for January 2010
▪ First Segment Rate	4.60%
▪ Second Segment Rate	6.65%
▪ Third Segment Rate	6.76%
Mortality elections	
▪ Healthy and disabled participants	Section 430(h)(3) prescribed separate generational annuitant and nonannuitant mortality tables.
417(e) lump sums	
▪ Annuity substitution	Yes
▪ Generational mortality option	Yes
▪ Phase-in option	No
Other economic assumptions	
▪ Salary increases	See table of sample rates
▪ Social Security wage base	3.80% per year
▪ Inflation	2.80% per year
▪ Expenses	\$75,000 has been included in the target normal cost based on a best estimate of administrative expenses and estimated PBGC premiums.
Demographic assumptions	
Withdrawal	Remaining active participants are all assumed to be laid off by December 31, 2010.
Disability incidence	None assumed.
Retirement age	All active participants are assumed to be laid off by December 31, 2010.

Schedule SB, Part V – Statement of actuarial assumptions/methods *(continued)*

Demographic assumptions *(continued)*

Benefit commencement age for

- Future vested deferred 55
- Current vested deferred 55

Spouse assumptions

Male participants

Female participants

- Percentage married 80%
- Spouse age difference 3 years younger 3 years older

Form of payment

	<u>Lump sum</u>	<u>Single life</u>	<u>100% J&S</u>	<u>50% J&S</u>
▪ Active retirements	90%	5%	5%	0%
▪ Future vested deferred	0%	50%	50%	0%
▪ Future deaths	0%	0%	0%	100%
▪ Current vested deferred	0%	50%	50%	0%

Unpredictable contingent event benefit assumptions

It was assumed with 100% probability that a UCEB would be paid from the plan this year for the remaining active employees accruing benefits.

Table of sample rates

Attained age	Salary increases
20	6.3%
25	6.3%
30	5.8%
35	5.3%
40	4.8%
45	4.3%
50	3.3%
55	3.3%
60	3.3%
65	3.3%

Schedule SB, Part V – Statement of actuarial assumptions/methods *(continued)*

Actuarial methods

Asset methods – effective January 1, 2009

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

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant methods – effective January 1, 2008

We used the participant data supplied by the plan sponsor as of January 1, 2010. We have reviewed the data and have no reason to doubt its substantial accuracy. Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does not have any insurance contracts.

Minimum funding method

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

A detailed description of the calculation follows:

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

Schedule SB, Part V – Statement of actuarial assumptions/methods *(continued)*

- This plan values the costs of unpredictable contingent event benefits by adding one additional year of accrued service to benefit service for active employees who are anticipated to be laid off by the employer in the upcoming year, as the likelihood of the layoff was known before the beginning of the plan year.
- The plan's **target normal cost** is the sum of the individual target normal costs plus assumed annual administrative expenses, and the plan's **funding target** is the sum of the accrued liabilities for all participants under the plan.

Schedule SB, Part V – Summary of plan provisions

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 - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.
- **Scheduled benefit increases:** Scheduled benefit increases effective after the end of the current plan year are excluded from minimum funding requirements.
- **Late retirement increases:**
 - *Active participants:* The plan applies late retirement actuarial increases for all participants who defer retirement beyond their normal retirement date and this valuation includes those increases.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued not including the late retirement actuarial increase, as it deemed immaterial.
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- **IRC Section 415(b) benefit limitations:** The limitations of Internal Revenue Code Section 415(b) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60 percent of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Schedule SB, Part V – Summary of plan provisions *(continued)*

Summary of major plan provisions

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Significant events that occurred during the year	It is anticipated that all remaining active employees will be laid off by December 31, 2010 and that has been incorporated into the valuation.
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▪ Covered employees	Any eligible employee who is also a former employer of TRW Environmental Safety Systems, Inc. hired prior to February 12, 2001.
▪ Participation	An Eligible Employee or a former employee of (i) TRW Environmental Safety Systems, Inc. or (ii) the Company, who retains an Accrued Benefit under the Plan. Plan is closed to new participants hired after February 12, 2001. Future accruals are frozen for all Highly Compensated Employees, effective July 31, 2008.
▪ Employee contributions	All contributions to support the Plan are made by USA Repository Services LLC.
▪ Credited service	Generally included any calendar month in which a Participant receives compensation.
▪ Vesting service	Same as credited service, including service as a leased employee.
▪ Final average earnings	Monthly Average of the highest 5 consecutive calendar years of considered compensation.
▪ Covered Compensation	The average, for the year in which the Severance from Service Date falls, of the taxable wage bases (without indexing) in effect for each calendar year during the 35-year period ending with the year in which the participant attains Social Security Retirement Age.
▪ Accrued benefit	With respect to a Participant, at any point in time, the Participant's Normal Retirement Benefit based on the Participant's Years of Benefit Service and Earnings as of the date on which the calculation is made.

Schedule SB, Part V – Summary of plan provisions (continued)

Normal retirement	
▪ Eligibility	Later of age 65 or the fifth anniversary of the Participant's Employment Commencement Date.
▪ Benefit	1.5% of earnings per year of Benefit Service up to 35 years; less 0.4% of earnings up to Covered Compensation per year of Benefit Service up to 35 years (QSUPP); plus 1.33% of earnings for years of Benefit Service in excess of 35.
Early retirement	
▪ Eligibility	Age 55 and 10 or more years of Benefit Service. Highly compensated employees who no longer accrue benefits continue to earn service toward early retirement eligibility as they continue service at the company.
▪ Benefit	<i>Payable prior to attainment of Age 62 and hired before March 1, 2000:</i> 1.5% of Earnings per year of Benefit Service up to 35 years, plus 1.33% of Earnings for years of Benefit Service in excess of 35; Reduced to reflect the age of the participant at Retirement based on Early Retirement factor tables. <i>Payable after attainment of age 62 or hired after February 29, 2000:</i> Same as Normal Retirement Benefit; and further reduced to reflect the age of the participant at Retirement based on Early Retirement factor tables.
▪ Early retirement factors	For participants who are early retirement eligible and hired before March 1, 2000, the retirement benefits are reduced by 4.00% per year for every year where retirement occur before age 60. For participants who are early retirement eligible and hired on or after March 1, 2000, the retirement benefits are reduced by 5.00% per year for every year where retirement occurs before age 62.
Late retirement	
▪ Eligibility	After normal retirement
▪ Benefit	Determined as the maximum of the Normal Retirement Benefit using Benefit Service through actual retirement date, and the retirement benefit at Normal Retirement Date including actuarial increases.

Schedule SB, Part V – Summary of plan provisions *(continued)*

Deferred vested													
▪ Benefit	Same as Early Retirement Benefit except reduced to reflect the age of the participant at commencement based on vested benefit factor tables.												
▪ Eligibility	5 years of Vesting Service												
▪ Vested benefit factors	For participants who are deferred vested, their benefits are reduced by 6⅔% per year from age 65 to age 60. Before age 60, there is an additional reduction as follows:												
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57	3.8%												
56	3.5%												
55	3.2%												
Disability													
▪ Eligibility	4 years of Vesting Service												
▪ Benefit	An employee will continue to accrue up to five years of Benefit Service (up to one year if employee has less than five years of Vesting Service) while on absence from work due to disability and while entitled to receive long-term disability benefits under any plan maintained by a member of the Controlled Group.												
Pre-retirement death													
▪ Eligibility	Participant eligible for Vested or Retirement Benefit at the time of death.												
▪ Benefit prior to early retirement	For death before earliest retirement age with a vested right, the Participant's eligible Spouse will receive the benefit that would be payable if the Participant had terminated employment on the date of death or actual Severance from Service Date if earlier; survived to earliest retirement age; retired with a Qualified Joint and Survivor Annuity; and died the day after earliest retirement age.												
▪ Benefit after early but before normal retirement	For death on or after earliest retirement age with a vested right, the Participant's eligible Spouse will receive the benefit that would be payable if the Participant had retired with a Qualified Joint and Survivor Annuity on the day before the Participant's death.												
▪ Benefit after normal retirement	Death benefit provided in the form of payment in effect at the time of death.												

Schedule SB, Part V – Summary of plan provisions *(continued)*

Form of benefits	
▪ Automatic form for unmarried participants	Life Annuity
▪ Automatic form for married participants	Reduced Joint and 50% Survivor Annuity
▪ Optional forms	<p>Life Only</p> <p>Ten Years Certain and Life</p> <p>Joint and Survivor (50%, 75%, or 100%)</p> <p>Single Lump Sum (if over age 55 at Severance from Service Date)</p> <p>Optional forms other than lump sums are actuarially equivalent to a life annuity based on 8.5% interest and the 417(e) applicable mortality table. Lump sums are actuarially equivalent based on 417(e) applicable interest rates and mortality.</p>
Miscellaneous	
▪ Maximum compensation	Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. For 2009 the limit is \$245,000.
▪ Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2009 the limit is \$195,000.
▪ Benefits not included in valuation	None
▪ Unpredictable contingent event benefit	If a participant is laid off under the terms of the plan, they can receive up to 12 additional months of benefit service.
▪ Highly compensated employee threshold	A participant is determined to be a highly compensated employee for 2010 if their compensation for 2009 was over \$110,000.
▪ Changes since the prior valuation	None

Schedule SB, line 24 – Change in actuarial assumptions

Interest rates were updated from 2009 to 2010 in accordance with PPA and the Sponsor changed their interest rate election from full yield curve with a two month look-back to segmented yield curve with no look-back.

The expenses assumption changed from \$100,000 to \$75,000 to better reflect future expectations.

Salary Scale was changed for non-highly compensated employees to better reflect future expectations.

The Social Security wage base assumption was increased from 3.55% to 3.80% to better reflect future expectations.

Withdrawal assumptions were updated to reflect that all active employees are anticipated to be laid off by December 31, 2010.

There were no other changes in actuarial assumptions since the last actuarial valuation as of January 1, 2009.

Schedule SB, line 26 – Schedule of active participant data

Attained Age	Years of credited service as of January 1, 2010									
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
< 25										
25-29										
30-34										
35-39					1					
40-44				1	1					
45-49				1	2					
50-54					2					
55-59			1							
60-64				1	1					
65+										

In each cell, the number is the count of active participants for each age/service combination.

Schedule SB, line 32 – Schedule of amortization bases

The total shortfall amortization charge is the sum of the individual shortfall base amortization installment created during each plan year covered under PPA. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

Base	Amortization Period			Balances		Installment
	Date created	Initial years	Years left	Initial	Present Value of Remaining Installments	
Shortfall charge	1/1/08	7	5	\$ 26,513	\$ 20,061	\$ 4,381
Shortfall charge	1/1/09	7	6	309,211	291,020	54,869
Shortfall charge	1/1/10	7	7	1,994,504	1,994,504	333,335
Total					\$ 2,305,585	\$ 392,585