

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2010 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>01/04/2010</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>NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>004</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1985</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>004</u>	1c Effective date of plan <u>01/01/1985</u>	
1b Three-digit plan number (PN) ▶	<u>004</u>				
1c Effective date of plan <u>01/01/1985</u>					
2a Plan sponsor's name and address (employer, if for a single-employer plan) (Address should include room or suite no.) <u>NUCLEAR FUEL SERVICES, INC.</u> <u>C/O COMPENSATION & BENEFITS DEPT.</u> <u>1205 BANNER HILL ROAD</u> <u>ERWIN, TN 37650-9318</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>52-0788632</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>423-743-1728</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>325900</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>52-0788632</u>	2c Sponsor's telephone number <u>423-743-1728</u>	2d Business code (see instructions) <u>325900</u>	
2b Employer Identification Number (EIN) <u>52-0788632</u>					
2c Sponsor's telephone number <u>423-743-1728</u>					
2d Business code (see instructions) <u>325900</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2011	RC BIRMINGHAM III
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2011	RC BIRMINGHAM III
	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")

NFS BOARD OF DIRECTORS
C/O NUCLEAR FUEL SERVICES, INC.
1205 BANNER HILL ROAD
ERWIN, TN 37650-9318

3b Administrator's EIN
58-1806675

3c Administrator's telephone number
423-743-1728

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

a Sponsor's name

4b EIN

4c PN

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

5

460

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

0

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

6b

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

6c

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

6d

0

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

6e

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

6f

0

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

6g

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

6h

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)

7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2G 2J 2K

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:**9a** Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust
(4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
(2) ☐ Code section 412(e)(3) insurance contracts
(3) ☒ Trust
(4) ☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)**a Pension Schedules**

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

b General Schedules

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

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2010</div> 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 01/04/2010		
A Name of plan NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN	B Three-digit plan number (PN) ►	004
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 NUCLEAR FUEL SERVICES, INC.	D Employer Identification Number (EIN) 52-0788632	

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: SUNTRUST 500 INDEX FUND			
b Name of sponsor of entity listed in (a): SUNTRUST BANK			
c EIN-PN 52-0788632-004	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: SUNTRUST STABLE ASSET FUND			
b Name of sponsor of entity listed in (a): SUNTRUST BANK			
c EIN-PN 52-0788632-004	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
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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
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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 01/04/2010		
A Name of plan NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN	B Three-digit plan number (PN) ►	004
C Plan sponsor's name as shown on line 2a of Form 5500 NUCLEAR FUEL SERVICES, INC.	D Employer Identification Number (EIN) 52-0788632	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	51272	
	(2) Participant contributions	1b(2)	94796	
	(3) Other	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
	(2) U.S. Government securities	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts	1c(9)	20467006	
	(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)	26506363	
	(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	47119437	0

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	2500	
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2500	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	47116937	0
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Part II Income and Expense Statement

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

Income**a Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(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)		0

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)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0

(3) Rents	2b(3)		
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(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)		146911
(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)		147075
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		293986

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
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)	1250	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1250
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1250

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		292736
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		47409673

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: PUGH & COMPANY, P.C.

(2) EIN: 62-1142155

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
MCDERMOTT THRIFT PLAN	74-1032246	003

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 <u>01/01/2010</u> and ending <u>01/04/2010</u>		
A Name of plan <u>NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>004</u>	
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NUCLEAR FUEL SERVICES, INC.</u>	D Employer Identification Number (EIN) <u>52-0788632</u>	

Part I	Distributions
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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	
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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): 84-1233483

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	
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Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... ☐ Yes ☐ No ☐ N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year

6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

(1) Contribution rate (in dollars and cents)

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

- 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): _____

NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN

Erwin, Tennessee

FINANCIAL STATEMENTS

January 4, 2010 and December 31, 2009

NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator and Plan Sponsor of
the Nuclear Fuel Services, Inc. Savings Plan
Erwin, Tennessee

We were engaged to audit the statements of net assets available for benefits of Nuclear Fuel Services, Inc. Savings Plan (the "Plan") as of January 4, 2010 and December 31, 2009, and the statement of changes in net assets available for benefits for the period ended January 4, 2010, as listed in the table of contents. These financial statements 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 6, which was certified by SunTrust Bank, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. 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 January 4, 2010 and December 31, 2009 and for the period ended January 4, 2010, that the information, provided to the plan administrator by the trustee is complete and accurate.

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

As discussed in Note 3 to the financial statements, the Board of Directors of Nuclear Fuel Services, Inc., the Plan's sponsor, voted on November 17, 2009, to merge the Plan into The Thrift Plan for Employees of McDermott Incorporated and Participating Subsidiary and Affiliated Companies ("The Thrift Plan") effective January 1, 2010. All plan assets were transferred to The Thrift Plan on January 4, 2010.

Pugh and Company, P.C.

Certified Public Accountants
Knoxville, Tennessee
October 12, 2011



An Independently Owned Member
MCGLADREY ALLIANCE



McGladrey

TSCPA
Members of the Tennessee Society
Of Certified Public Accountants

NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	As of	<u>January 4, 2010</u>	<u>December 31, 2009</u>
ASSETS			
Participant-Directed Investments - At Estimated Fair Value	\$	<u>0</u>	<u>\$ 46,973,369</u>
Receivables:			
Participant Contributions		0	94,796
Employer Contributions		<u>0</u>	<u>51,272</u>
Total Receivables		<u>0</u>	<u>146,068</u>
Total Assets		0	47,119,437
LIABILITIES - Accrued Administrative Expenses		<u>0</u>	<u>2,500</u>
NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE		0	47,116,937
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT-RESPONSIVE STABLE VALUE FUND		<u>0</u>	<u>(242,190)</u>
NET ASSETS AVAILABLE FOR BENEFITS	\$	<u><u>0</u></u>	<u><u>\$ 46,874,747</u></u>

The accompanying notes are an integral part of these financial statements.
See Independent Auditor's Report.

NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Period Ended January 4, 2010

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment Income:

Net Appreciation in Estimated Fair Value of Investments	\$ 535,857
Interest and Dividends	<u>319</u>
Net Investment Income	<u>536,176</u>

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Transfers Out to Thrift Plan for Employees of McDermott Incorporated	47,409,673
Administrative Expenses	<u>1,250</u>
Total Deductions	<u>47,410,923</u>

NET DECREASE	<u>(46,874,747)</u>
---------------------	---------------------

NET ASSETS AVAILABLE FOR BENEFITS, BEGINNING OF PERIOD	<u>46,874,747</u>
---	-------------------

NET ASSETS AVAILABLE FOR BENEFITS, END OF PERIOD	<u>\$ 0</u>
---	-------------

The accompanying notes are an integral part of these financial statements.
See Independent Auditor's Report.

NUCLEAR FUEL SERVICES, INC. SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

January 4, 2010 and December 31, 2009

NOTE 1 - DESCRIPTION OF THE PLAN

The following brief description of the Nuclear Fuel Services, Inc. Savings Plan (the "Plan") is provided for general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions. See Note 3 for merger of the Plan concluded on January 4, 2010.

General - The Plan was adopted by Nuclear Fuel Services, Inc. (the "Company"), effective January 1, 1985, to provide tax deferred savings to eligible employees of the Company. A salaried employee of the Company is eligible to become a participant in the Plan on the first day of the month subsequent to hire and attainment of age 18. Temporary employees meeting these eligibility requirements are also eligible to participate in the Plan. The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Company was 100% owned by NFS Holdings, Inc. On August 8, 2008, NFS Services, LLC, the ultimate parent of the Company, entered into a stock purchase agreement to sell 100% of the shares of NFS Holdings, Inc. The sale was consummated on December 31, 2008. All benefit plans remained whole upon the sale of NFS Holdings, Inc. to a subsidiary of The Babcock & Wilcox Company.

Administration - The Plan is administered by the board of directors of the Company. The board of directors has established an administrative committee, which has responsibility for the operations of the Plan. SunTrust Bank is the trustee and record keeper of the Plan (the "Trustee"). Investments are held by the Trustee. Participants direct the investment of their contributions into various investment options offered by the Plan as listed below. Certain allowable administrative expenses, as defined in the Plan document, are paid by the Plan.

Contributions - A participant may elect to make pretax contributions to the Plan in an amount ranging from 1% to 50% of the participant's compensation, and a participant who is 50 years or older has the ability to contribute an additional amount of the participant's compensation (consisting of total earnings including overtime, bonuses, and other special allowances, as defined) up to a maximum amount established annually by the Internal Revenue Service (IRS). Contributions by highly compensated employees (as defined by the IRS) are limited based on annual discrimination tests. The Company contributes 50% of the first 6% of elective contributions and also contributes 75% of elective contributions between 7% to 10%. Contributions to the Plan by temporary employees are not matched by the Company. Participants are not allowed to make after-tax contributions to the Plan.

Participants direct the funds in their accounts to be invested by the Trustee in 1% increments in various investment funds offered by the Plan. The Plan's investment options are: Dodge & Cox Balanced Fund, Templeton Institutional Foreign Equity Fund, T. Rowe Price Small-Cap Stock Fund, T. Rowe Price Large Cap Growth Fund, John Hancock Classic Value Fund, PIMCO Total Return Fund, SunTrust 500 Index Fund, and SunTrust Retirement Stable Asset Fund. The Trustee temporarily invests funds in short-term investments selected by the Trustee.

Participant Accounts - Each participant's account is credited with the participant's contribution and an allocation of the Company's contribution, Plan earnings, and forfeitures of terminated participants' nonvested accounts and charged with withdrawals and an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting - A participant vests in the Company contributions and earnings thereon at the rate of 20% for each year a participant works 1,000 hours. Employee contributions and earnings thereon are fully vested.

NOTE 1 - DESCRIPTION OF THE PLAN (Continued)

Termination - The Company reserves the right, subject to the provisions of ERISA, to change or discontinue the Plan at any time. If the Plan should be terminated, in whole or in part, all benefits accrued to participants will be fully vested. See Note 3 regarding Plan merger.

Distributions - A participant's pretax contributions and the vested portion of the Company's matching contributions may be withdrawn before retirement or termination of employment only under certain hardship conditions. A participant's pretax contribution plus any earnings thereon may be withdrawn before retirement or termination of employment only upon attainment of age 59½. Vested Company matching contributions plus any earnings thereon may be withdrawn at age 65 regardless of work status. A participant's contributions and the vested portion of the Company's matching contributions, including any earnings thereon, may be withdrawn upon retirement or termination of employment. At such time, the participant is entitled to receive the entire value of his or her account in a single lump sum. A participant's after-tax contributions, formerly allowed by the Plan, may be withdrawn at the employee's request and are subject to current tax regulations. Upon attainment of age 70½, all participants will commence required minimum distributions. Effective April 1, 2007, funds withdrawn upon retirement or termination of employment are no longer required to be received as a lump sum amount, and multiple withdrawal periods are now permitted.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements of the Plan have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Investment Valuation and Income Recognition - The Plan's investments are stated at estimated fair value. Shares of mutual funds are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. The collective trust funds are stated at estimated fair value as determined by the issuer of the collective trust funds based on the fair market value of the underlying investments. Collective trust funds with underlying investments in benefit-responsive investment contracts are valued at fair market value of the underlying investments and then adjusted to contract value.

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

Management fees and operating expenses charged to the Plan for investments in the mutual funds and collective trust funds are deducted from the income earned on a daily basis and are not separately reflected. Consequently, management fees and operating fees are reflected as a reduction of investment return for such investments.

The Plan offers a stable value investment option, the SunTrust Retirement Stable Asset Fund (the "Stable Value Fund"), to participants. The Stable Value Fund may invest in fixed income insurance investment contracts, money market funds, corporate and government bonds, mortgage-backed securities, bond funds, and other fixed income securities. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. Contract value represents contributions made to the fund, plus earnings, less participant withdrawals.

In accordance with GAAP, the statements of net assets available for benefits present the Stable Value Fund contract at fair value, as well as an additional line item showing an adjustment from fair value to contract value. The statement of changes in net assets available for benefits is presented on a contract value basis and is not affected.

Payment of Benefits - Benefit payments to participants are recorded upon distribution.

Forfeited Accounts - At January 4, 2010 and December 31, 2009, forfeited nonvested accounts totaled \$44,280. These accounts will be used to offset future employer contributions.

Transfers - Along with the Plan, the Company also sponsors a 401(k) plan for hourly employees. If employees change their hourly or salaried status during the year, their account balances are eligible for transfer into the corresponding plan.

Administrative Expenses - Administrative expenses of the Plan are paid by the Plan or the Plan's sponsor as provided in the Plan document.

See Independent Auditor's Report.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates - The preparation of financial statements in conformity with GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan utilizes various investment options, including mutual funds and collective trust funds. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such change could materially affect the amounts reported in the financial statements.

Evaluation of Subsequent Events - The plan administrator has evaluated subsequent events through October 12, 2011, which is the date the financial statements were available to be issued.

NOTE 3 – PLAN MERGER

In January 2010 the Plan was merged into and became part of The Thrift Plan for Employees of McDermott Incorporated and Participating Subsidiary and Affiliated Companies ("The Thrift Plan"). As a result of the merger, the service contract with the Trustee, SunTrust Bank, was terminated, and the plan assets were transferred to Vanguard Fiduciary Trust Company, the trustee of the Thrift Plan. Net assets of \$47,409,673 were transferred to The Thrift Plan at January 4, 2010.

NOTE 4 - FAIR VALUE MEASUREMENTS

In accordance with GAAP, the Plan classifies its investments into one of the following three categories:

- Level 1: Securities valued using quoted market prices in active markets for identical assets.
- Level 2: Securities valued using observable market based inputs or unobservable inputs that are corroborated by market data.
- Level 3: Securities valued using unobservable inputs that are not corroborated by market data.

Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The following table sets forth by level within the fair value hierarchy a summary of the Plan's investments measured at estimated fair value on a recurring basis:

	Carrying Amount	Estimated Fair Value Measurements Using		
		Quoted Prices in Active Market for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
As of January 4, 2010:				
Mutual Funds	\$ 0	\$ 0	\$ 0	\$ 0
Collective Trust Funds	0	0	0	0
	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>
As of December 31, 2009:				
Mutual Funds	\$ 26,506,363	\$ 26,506,363	\$ 0	\$ 0
Collective Trust Funds	20,467,006	0	20,467,006	0
	<u>\$ 46,973,369</u>	<u>\$ 26,506,363</u>	<u>\$ 20,467,006</u>	<u>\$ 0</u>

See Independent Auditor's Report.

NOTE 5 - INVESTMENTS (UNAUDITED)

The following table presents estimated fair values of investments as of December 31, 2009:

Description of Investment	Number of Shares	Estimated Fair Value
Collective Trust Funds:		
SunTrust 500 Index Fund	952,358	\$ 8,894,737 *
SunTrust Retirement Stable Asset Fund	1,089,654	11,572,269 *
Mutual Funds:		
Dodge & Cox Balanced Fund	145,409	9,310,559 *
John Hancock Classic Value Fund	187,904	2,705,811 *
T. Rowe Price Small-Cap Stock Fund	144,336	3,888,406 *
T. Rowe Price Large Cap Growth Fund	164,765	2,326,481
Templeton Institutional Foreign Equity Fund	254,354	4,909,035 *
PIMCO Total Return Fund	307,573	3,321,791 *
Ridge Worth Prime Quality Money Market Fund	44,280	<u>44,280</u>
Total Investments		<u>\$ 46,973,369</u>

* These investments represent 5 percent or more of the Plan's net assets.

During the period ended January 4, 2010, the net appreciation in estimated fair value of investments was as follows:

Collective Trust Funds:	
SunTrust 500 Index Fund	\$ 144,092
SunTrust Retirement Stable Asset Fund	2,819
Mutual Funds:	
Dodge & Cox Balanced Fund	126,506
John Hancock Classic Value Fund	56,371
T. Rowe Price Small-Cap Stock Fund	77,941
T. Rowe Price Large Cap Growth Fund	32,953
Templeton Institutional Foreign Equity Fund	89,024
PIMCO Total Return Fund	<u>6,151</u>
Net Appreciation in Estimated Fair Value of Investments	<u>\$ 535,857</u>

See Independent Auditor's Report.

NOTE 6 - INFORMATION CERTIFIED BY THE TRUSTEE (UNAUDITED)

The following is a summary of the unaudited information regarding the Plan as of January 4, 2010 and December 31, 2009, and for the period ended January 4, 2010 included in the Plan's financial statements, that was prepared by or derived from information prepared by the Trustee, and furnished to the plan administrator. The plan administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2010	2009
Statements of Net Assets Available for Benefits		
Participant - Directed Investments:		
Collective Trust Fund, at Estimated Fair Value	\$ 0	\$ 8,894,737
Stable Value Fund, at Contract Value	0	11,330,079
Mutual Funds, at Estimated Fair Value	0	26,506,363
	2010	
Statement of Changes in Net Assets Available for Benefits		
Interest and Dividends	\$ 319	
Net Appreciation in Estimated Fair Value of Investments	535,857	

Note 4: All investment balances and investment information in the note, except for the classification of investments by level and except for the contract to fair value adjustment amount of the SunTrust Retirement Stable Asset Fund.

Note 5: All investment balances and investment information in the note, except for the contract to fair value adjustment amount of the SunTrust Retirement Stable Asset Fund.

NOTE 7 - INCOME TAX STATUS

The IRS has determined and informed the Company by a letter dated December 19, 2008, that the Plan and the related trust are designed in accordance with the applicable regulations of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter; however, the Company and the plan administrator believe that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC and the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan is subject to audits by taxing jurisdictions. However, currently no audits for any tax periods are in progress. The plan administrator believes that the Plan is no longer subject to income tax examinations for years prior to December 31, 2007.

NOTE 8 - EXEMPT PARTY-IN-INTEREST TRANSACTIONS

The Company pays certain administrative fees on behalf of the Plan. Administrative fees paid by the Company were \$10,323 for the period ended January 4, 2010.

Certain Plan investments are shares of collective trust funds managed by the Trustee. These transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan to the Trustee for investment management services were included as a reduction of the return on each fund.

NOTE 9 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of January 4, 2010 and December 31, 2009, respectively:

	<u>2010</u>	<u>2009</u>
Net Assets Per the Financial Statements	\$ 0	\$ 46,874,747
Adjustment from Contract Value to Fair Value for Fully Benefit-Responsive Stable Value Fund	<u>0</u>	<u>242,190</u>
Net Assets Available for Benefits Per the Form 5500	<u>\$ 0</u>	<u>\$ 47,116,937</u>

The following is a reconciliation of changes in net assets available for benefits per the financial statements to the net income per the Form 5500 for the period ended January 4, 2010:

Net Investment Income Per the Financial Statements	\$ 536,176
2010 Adjustment from Contract Value to Fair Value for Fully Benefit-Responsive Stable Value Fund	0
2009 Adjustment from Contract Value to Fair Value for Fully Benefit-Responsive Stable Value Fund	<u>(242,190)</u>
Total Income Per the Form 5500	<u>\$ 293,986</u>

NOTE 10 - SUBSEQUENT EVENT

On July 30, 2010, the Babcock & Wilcox Company was spun off from McDermott International, Inc. into an independent publicly traded company.

