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), 6057(b), 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

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
TEREX PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1981

2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan)

TEREX CORPORATION

200 NYALA FARM ROAD
WESTPORT, CT 06880

2b Employer Identification Number (EIN) 34-1531521

2c Sponsor's telephone number 203-222-7170

2d Business code (see instructions) 333100

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.	10/09/2012	PHILLIP C WIDMAN
	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

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
TEREX CORPORATION ADMINISTRATIVE COMMITTEE

200 NYALA FARM ROAD
WESTPORT, CT 06880

3b Administrator's EIN
39-1245376

3c Administrator's telephone number
203-222-7170

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**	3662
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**	153
b	Retired or separated participants receiving benefits	**6b**	2304
c	Other retired or separated participants entitled to future benefits	**6c**	960
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	3417
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	187
f	Total. Add lines **6d** and **6e**	**6f**	3604
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**	0
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:
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)	X	Trust
(4)		General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

▶ **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
TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-1531521

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

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2011

2	Assets:			
	a Market value		**2a**	109312972
	b Actuarial value		**2b**	101291581
3	Funding target/participant count breakdown:		**(1)** Number of participants	**(2)** Funding Target
	a For retired participants and beneficiaries receiving payment	**3a**	2459	92545747
	b For terminated vested participants	**3b**	1014	20605893
	c For active participants:			
	(1) Non-vested benefits	**3c(1)**		78008
	(2) Vested benefits	**3c(2)**		12294739
	(3) Total active	**3c(3)**	189	12372747
	d Total	**3d**	3662	125524387
4	If the plan is in at-risk status, check the box and complete lines (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 in at-risk status for fewer than five consecutive years and disregarding loading factor		**4b**	
5	Effective interest rate		**5**	5.74 %
6	Target normal cost		**6**	1050000

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

Signature of actuary — Date: 09/24/2012

ANTHONY DAVIS — Type or print name of actuary

11-06861 — Most recent enrollment number

FIDELITY INVESTMENTS — Firm name

212-335-6467 — Telephone number (including area code)

640 5TH AVENUE, IN2
NEW YORK, NY 10019

Address of the firm

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 13.20%		
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		6773724
b	Interest on (a) using prior year's effective rate of 6.52 % except as otherwise provided (see instructions)		441647
c	Total available at beginning of current plan year to add to prefunding balance		7215371
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.69 %
15	Adjusted funding target attainment percentage	15	80.69 %
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	80.05 %
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
04/14/2011	1330000		07/11/2012	1500000	
07/14/2011	1330000		09/10/2012	3400000	
10/15/2011	1330000				
01/13/2012	1330000				
04/13/2012	767000				
04/13/2012	733000				
			Totals ► 18(b)	11720000	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 contributions from prior years.	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	10996668

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
2.94%	5.82%	6.46 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	62

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

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	**31a**	1050000
b Excess assets, if applicable, but not greater than 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	24232806	4789519
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 (lines 31a - 31b + 32a + 32b - 33)	**34**	5839519

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	5839519
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	10996668

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	5157149
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

42 Amount of acceleration adjustment	**42**	
43 Excess installment acceleration amount to be carried over to future plan years	**43**	

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2011** **This Form is Open to Public Inspection.**

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-1531521

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

FID INV INST OPS CO

04-2647786

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

FID INV MGMT TRUST CO

04-2723880

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

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

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

FIDELITY MANAGEMENT TRUST COMPANY

04-2723880

(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 51 28 50	TRUSTEE/INV.MGMT	512735	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ARNOLD S ROSS & ASSOCIATES, LTD

13-4113710

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	CONSULTANT/ACTUARY	182947	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

FIIOC

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	RECORDKEEPER	577610	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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)

GODFREY & KAHN

39-1128206

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	LEGAL	43034	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MAYER HOFFMAN MCCANN P.C.

43-1947695

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	AUDITOR	49500	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

AON CONSULTING

22-2232264

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17 50	CONSULTING	40000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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)

SEGAL ADVISOR, INC

13-2646110

(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?
27 50	ADVISOR	40000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-1531521

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: TEREX CORPORATION MASTER TRUST RET

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

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)
34-1531521-100	M	111448949

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-1531521

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)	10731107	7730000
(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)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	98731101	111448949
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	109462208	119178949
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	182955	239441
k Total liabilities (add all amounts in lines 1g through1j)	1k	182955	239441
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	109279253	118939508

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)	11720000	
(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)		11720000
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)	7244	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		7244
(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)	0	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

			(a) Amount	(b) Total
2b	(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
	(6) Net investment gain (loss) from common/collective trusts	2b(6)		
	(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
	(8) Net investment gain (loss) from master trust investment accounts	2b(8)		9267356
	(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
	(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c	Other income	2c		
d	Total income. Add all **income** amounts in column (b) and enter total	2d		20994600
	Expenses			
e	Benefit payment and payments to provide benefits:			
	(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	9759646	
	(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)		9759646
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)	275481	
	(2) Contract administrator fees	2i(2)		
	(3) Investment advisory and management fees	2i(3)	552735	
	(4) Other	2i(4)	746483	
	(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1574699
j	Total expenses. Add all **expense** amounts in column (b) and enter total	2j		11334345
	Net Income and Reconciliation			
k	Net income (loss). Subtract line 2j from line 2d	2k		9660255
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: MAYER HOFFMAN MCCANN P.C. **(2)** EIN: 43-1947695

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		20000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

A Name of plan
TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
34-1531521

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** 0

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): 04-3275867

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** 0

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **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 or other authority 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. 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: 40% Investment-Grade Debt: 49% High-Yield Debt: 10% Real Estate: _____% Other: 1%

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):

Mayer Hoffman McCann P.C.
An Independent CPA Firm

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Plymouth Meeting, Pennsylvania 19462
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610-862-2500 fx
www.mhm-pc.com

Independent Auditors' Report

To the Participants and Administrator of

Terex Pension Plan

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of Terex Pension Plan (the "Plan") as of December 31, 2011 and 2010, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2011, as listed in the accompanying index. 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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such 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 December 31, 2011 and 2010 and for the year ended December 31, 2011, 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 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 U.S. generally accepted auditing standards 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.

Mayer Hoffman McCann P.C.

Plymouth Meeting, Pennsylvania
October 4, 2012

2011 Form 5500 Schedule SB Attachments
Schedule SB, Part V – Summary of Actuarial Assumptions / Methods
Terex Pension Plan
EIN 34-1531521 / PN 001

Actuarial Assumptions and Methods

For all participants:

Interest Rate (for PPA funding liability and normal cost): 2.94% rate for the first 5 years; 5.82% for the next 15 years; 6.46% rate after that, based on January 2011 segment rates (previously 4.60% for the first 5 years, 6.65% for the next 15 years and 6.76% after that, consistent with the January 2010 segment rates).

Administrative Expenses (for developing target normal cost for funding): $1,050,000 Estimated based on the prior year's actual administrative expenses (previously $925,000 was used).

Healthy Mortality: IRS 2011 Static Mortality Table using separate tables for annuitants and non annuitants, sex distinct

Disabled Mortality: IRS 2011 Static Mortality Table using separate tables for annuitants and non annuitants, sex distinct

Marital Status: 80% of males and females are assumed to be married. Wives are assumed to be three years younger than their husbands.

Benefit Commencement Age – Terminated Vested Participants: Terminated vested participants are assumed to commence their plan benefits upon attaining normal retirement age.

Form of Payment: It has been assumed benefits will be paid in the normal annuity form applicable to the particular benefit. To the extent optional forms of payment are elected and conversions are determined under an actuarial basis, which differs from the basis funded in the valuation, gains or losses will occur. These gains or losses will be recognized through the routine application of the actuarial cost method.

Maximum Benefit: $195,000 for 2011.

Actuarial Assumptions and Methods (continued)

For participants formerly in the Terex Corporation Retirement Program for Salaried Employees ("Merged"):

Rates of Retirement: Annual rates are as follows for males and females meeting retirement eligibility requirements:

Age	Rate
55 – 57	4%
58 – 59	6%
60 – 61	15%
62	40%
63	20%
64 – 66	50%
67	100%

Disability: A representative sample of annual rates of disability follows:

Age	Rate
20	0.09%
25	0.10%
30	0.11%
35	0.12%
40	0.15%
45	0.22%
50	0.33%
55	0.58%
60	1.18%

Actuarial Assumptions and Methods (continued)

For participants formerly in the Terex Corporation Retirement Program for Salaried Employees (continued):

Termination: A representative sample of annual rates of termination follows:

Age	Rate
20	23.50%
25	23.50%
30	19.90%
35	13.40%
40	10.40%
45	9.60%
50	8.20%
55	4.40%
60	2.30%

Actuarial Assumptions and Methods (continued)

For participants formerly in the Koehring & Northwest Engineering Hourly Pension Plan ("Waverly"):

Rates of Retirement: Annual rates are as follows for males and females meeting retirement eligibility requirements:

Age	Rate
55 – 61	2%
62	15%
63 – 64	10%
65	100%

Disability: A representative sample of annual rates of disability follows:

Age	Rate
25	0.03%
35	0.05%
45	0.10%
55	0.36%

Termination: A representative sample of annual rates of termination follows:

Age	Rate
20	7.9%
25	7.7%
30	7.2%
35	6.3%
40	5.2%
45	4.0%
50	2.6%
55	0.9%
60	0.0%

Actuarial Assumptions and Methods (continued)

For participants formerly in the Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit:

Rates of Retirement: Annual rates are as follows for males and females meeting retirement eligibility requirements:

Age	Rate
50 - 54	1.0%
55 - 59	1.5%
60 - 61	10.0%
62	25.1%
63	20.0%
64	15.0%
65	75.0%
66	84.6%
67	100.0%

Disability: A representative sample of annual rates of disability follows:

Age	Rate
20	0.09%
25	0.10%
30	0.11%
35	0.12%
40	0.15%
45	0.22%
50	0.33%
55	0.58%
60	1.18%

Actuarial Assumptions and Methods (continued)

For participants formerly in the Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit (continued):

Termination: A representative sample of annual rates of termination follows:

Age	Rate
20	12.50%
25	11.33%
30	8.97%
35	5.42%
40	2.45%
45	1.18%
50	0.50%
55	0.02%
60	0.00%

Actuarial Assumptions and Methods (continued)

For participants formerly in the Simplicity Engineering UAW Retirement Income Plan:

Retirement: Age 62.

Disability: A representative sample of annual rates of disability follows:

Age	Rate
25	0.05%
35	0.06%
45	0.18%
55	0.75%

Termination: A representative sample of annual rates of termination follows:

Age	Rate
25	6.6%
35	4.1%
40	3.2%
45	2.6%
55	1.1%

2011 Form 5500 Schedule SB Attachments
Schedule SB, Part V – Summary of Actuarial Assumptions / Methods
Terex Pension Plan
EIN 34-1531521 / PN 001

Actuarial Assumptions and Methods (continued)

Actuarial Value of Plan Assets for Funding Purposes:

The actuarial value of assets is equal to:

a) the market value of assets, including discounted receivables, on the valuation date, less

b) the following percentages of prior years' investment gains (losses):

   i) 67% of the prior year, and
   ii) 33% of the second prior year,

   Investment gains and losses are defined as the excess or deficiency of the expected return on the market value (not to exceed the third segment rate for that year) over the actual return on the market value of assets, including discounted receivables, for any given year.

c) The actuarial value of assets can be neither less than 90% nor greater than 110% of the market value of assets, including discounted receivables.

Actuarial Cost Method: The unit credit cost method is used for ERISA funding target (FT) purposes. Under this method, accrued pension benefits are determined for all eligible active participants. These benefits reflect service, salary and negotiated benefit increases to date. The liability is then equal to the present value of all benefits (PVAB) for inactive participants plus the PVAB for active participants.

The normal cost is determined on an individual basis for all active participants who have not attained the assumed retirement age and is equal to the present value of the difference between the current accrued benefit and the anticipated accrued benefit one year later, with the accrued benefit based upon earnings, or negotiated benefit increases, to date in both cases. The total normal cost is based upon the sum of the individual normal costs. The target normal cost for funding is equal to the total normal cost plus assumed administrative expenses expected to be paid from the trust.

2011 Form 5500 Schedule SB Attachments
Schedule SB, Part V – Summary of Plan Provisions
Terex Pension Plan
EIN 34-1531521 / PN 001

Summary of Plan Provisions

The Terex Pension Plan is made up of several historical pension plans that have merged together over the past 20+ years. Each historical pension plan was previously frozen so that no additional benefits are being earned by Terex Pension Plan participants.

The table below provides a summary of the Plan Freeze Dates for each historical pension plan. Accrued Benefits earned under each of the historical plans were determined based on the applicable benefit formulas, including pay and/or service information as of the date of the respective plan freeze.

Summary of Historical Plan Freeze Dates

Historical Plan Name	Plan Freeze Date
Koehring Cranes & Excavators, Inc Hourly Employees' Pension Plan ("Benton Harbor")	March 19, 1992
Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit	June 29, 2007
Cedarapids, Inc. Retirement Income Plan	October 15, 2000
Royer Foundry and Machine Company Retirement Plan	September 30, 2001
Simplicity Engineering UAW Retirement Income Plan	December 31, 2000
Terex Corporation Hourly-Rate Employees' Pension Plan	March 31, 1984
Terex Corporation Retirement Program for Salaried Employees	April 1, 1984
Terex Corporation Salaried Employees' Retirement Plan ("Merged")	May 7, 1993
Koehring & Northwest Engineering Hourly Pension Plan ("Waverly")	February 18, 2006

The remainder of this attachment provides additional details regarding eligibility requirements and applicable provisions for the various benefits (e.g., Normal Retirement, Early Retirement, etc) available under each historical plan.

Summary of Plan Provisions (Continued)

For participants formerly in the Koehring Cranes & Excavators, Inc. Hourly Employees Pension Plan (Benton Harbor):

Normal Retirement: Accrued Benefit payable at age 65.

Early Retirement: Age 55 with 10 years of service. If payment commences prior to Normal Retirement, the Accrued Benefit is reduced 1/180 for each of the first 60 months and 1/360 for each of the next 60 months that the participant's benefit commencement date precedes age 65.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. Payment may commence as early as age 55 with the same reduction as described under Early Retirement.

Pre-retirement Death: If a participant has completed at least 5 years of service and dies before his or her Normal Retirement Date, his or her surviving spouse is entitled to a benefit payable at the later age of 55 or the date of death. The benefit is the 50% Joint and Contingent benefit with the spouse as the Contingent Annuitant reduced for Early Retirement at the date of commencement.

Normal Form of Payment: Single Life Annuity for single participants and 50% J&S for married participants.

Optional Forms of Payment: A participant may elect a Life Annuity, Ten-Year Certain and Life Annuity, or a 50%, 75%, or 100% J&S Option.

For participants formerly in the Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit:

Normal Retirement: Accrued Benefit payable at age 65.

Early Retirement: Age 50 with 10 years of service. The Accrued Benefit is reduced 6 percent for each year the participant's benefit commencement date precedes age 62.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. The Accrued Benefit is payable at age 65 or an actuarially reduced amount may be paid as early as age 50.

Summary of Plan Provisions (Continued)

Disability: Provided disabled participant has completed 10 years of service, he or she is eligible for a life-only pension benefit equal to the participant's unreduced Accrued Benefit payable six months after disability.

Pre-retirement Death: Surviving spouse benefit equal to the amount payable to the member's spouse as if the member had survived to early retirement age, retired early, elected a 50% joint and survivor annuity and then died. Benefit commences on first of the month following the date the member would have been eligible to retire early and is payable for lifetime of spouse.

Post-retirement Death: A $6,000 lump-sum benefit is payable to participants who retire from active status.

Normal Form of Payment: Life annuity with 5 years certain for single participants. 50% J&S annuity for married participants.

Optional Forms of Payment: A participant may elect among a 5-year Certain & Life, 50% J&S, 75% J&S and 100% J&S annuity options.

For participants formerly in the Cedarapids, Inc. Retirement Income Plan:

Normal Retirement: Accrued Benefit payable at age 65.

Early Retirement: Age 55 with 10 years of vesting service. The Accrued Benefit is reduced 7 percent for each year the participant's benefit commencement date precedes age 60.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. The Accrued Benefit is payable at age 65 or a reduced amount (reduction of $1/180^{th}$ per month for the first 60 months from Normal Retirement Date, and $1/360^{th}$ for the next 60 months) is payable as early as age 55.

Disability: Participants who are totally and permanently disabled are eligible for a life-only annuity benefit starting at normal retirement date, based on earnings and Social Security at disability and credited service to normal retirement date.

Summary of Plan Provisions (Continued)

Pre-retirement Death: Surviving spouse benefit equal to the amount payable to the member's spouse as if the member had survived to early retirement age, retired early, elected a 50% Joint and Survivor annuity and then died. Benefit commences on first of month following the date the member would have been eligible to retire early and is payable for lifetime of spouse.

Post-retirement Death: A $4,000 lump-sum benefit is payable to participants who retire from active status.

Normal Form of Payment: Single Life Annuity for single participants and 50% J&S for married participants.

Optional Forms of Payment: A participant may elect a Life Annuity, Ten-Year Certain and Life Annuity, or a 50%, 66.67%, 75%, or 100% Contingent Annuitant Option. Additionally, a Social Security Level Income Option is available to participants who qualify for Early Retirement.

For participants formerly in the Royer Foundry and Machine Company Retirement Plan:

Normal Retirement: Accrued Benefit payable at age 65.

Early Retirement: Age 55 with 20 years of vesting service. The Accrued Benefit is payable at age 65 or a reduced amount (reduction of 1/180th per month for the first 60 months, and 1/360th for the next 60 months) is payable as early as age 55.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. The Accrued Benefit is payable at normal retirement, or earlier if eligible, reduced in accordance with the Early Retirement provisions for commencement of payments before normal retirement.

Pre-retirement Death: Prior to the attainment of normal retirement, 50% of the Early Retirement Benefit, determined as of the date of death (or termination of employment, if earlier), is payable to the surviving spouse on an actuarially-reduced 50% joint and survivor annuity basis, commencing at the participant's earliest possible retirement age had he not died. After attainment of normal retirement, the Normal Retirement Benefit, determined as of the date of death, is payable to the surviving beneficiary on either an actuarially-reduced 100% joint and survivor basis or a life annuity with 15-year certain basis.

Summary of Plan Provisions (Continued)

Normal Form of Payment: Single Life Annuity for single participants and 50% J&S for married participants.

Optional Forms of Payment: Life annuity; 50%, 75% or 100% contingent annuity; actuarially-reduced life annuity with 10 or 15-year certain and life.

For participants formerly in the Simplicity Engineering UAW Retirement Income Plan:

Normal Retirement: Accrued Benefit payable at the later of age 62 and 5 years of service, but not later than age 65.

Early Retirement: The last day of the month in which employee retires and has both attained age 57 and has completed 10 years of service. The Accrued Benefit is reduced 5/1000 for each month that the participant's benefit commencement date precedes Normal Retirement.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. Payment of the participant's Accrued Benefit may commence at age 57 with the same reduction as Early Retirement if the participant has 10 years of service.

Disability: A participant is eligible for a Disability Retirement benefit if his or her employment is terminated by Total and Permanent Disability after 10 years of service. The Accrued Benefit is payable immediately without reduction for early commencement.

Pre-retirement Death: If a participant has completed at least 5 years of service and dies before Normal Retirement, his or her surviving spouse is entitled to a benefit payable at the later of age 57 or the date of death. The benefit is the 55% Joint and Contingent benefit with the spouse as the Contingent Annuitant. It is reduced for Early Retirement at the date of commencement.

Post-retirement Death: Participants retiring from active service after February 28, 1993 are entitled to a $5,000 lump sum death benefit.

Normal Form of Payment: Single Life Annuity for single participants and 55% J&S for married participants.

Optional Forms of Payment: 75% Joint and Survivor annuity

Summary of Plan Provisions (Continued)

For participants formerly in the Terex Corporation Hourly-Rate Employees' Pension Plan:

Normal Retirement: Accrued Benefit payable at age 65 with 10 years of service.

Early Retirement: The earliest date of i) attainment of age 60 and the completion of 10 years of Credited Service, ii) attainment of age 55 if the sum of the participant's age and Credited Service equals or exceeds 85, or iii) the completion of 30 years of Credited Service. The Accrued Benefit is reduced for early commencement prior to age 62. If the participant has 30 years of Credited Service or if the sum of the participant's age and Credited Service at retirement equals or exceeds 85, the benefit will be increased to the unreduced level beginning at age 62.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. The participants with 10 years of service may commence their benefit as early as age 60. The Accrued Benefit is reduced 0.6% for each month the participant's Benefit Commencement date precedes Normal Retirement.

Pre-retirement Death: Upon the death of a vested participant who had been married at least one year at his or her date of death, 60% of the participant's Early Retirement benefit on his or her date of death that would have been payable at attainment at age 62 or age at death if older than 62. No pension plan survivor benefits are payable for any month in which the spouse is receiving Survivor Income benefits under the Terex Insurance Program.

Normal Form of Payment: Single Life Annuity for single participants and 60% J&S for married participants (with the benefit "popping-up" to the life annuity amount if the spouse predeceases the retiree).

Optional Forms of Payment: 75% Joint and Survivor annuity

For participants formerly in the Terex Corporation Retirement Program for Salaried Employees:

Normal Retirement: Accrued Benefit payable at Age 65 with 5 years of service.

Early Retirement: The earlier of a) attainment of age 60 and the completion of 10 years of Credited Service, or b) attainment of age 55 if the sum of the participant's age and Credited Service equals or exceeds 85. Accrued Benefit reduced 0.5% for each month his or her annuity commencement date precedes his or her Normal Retirement.

Summary of Plan Provisions (Continued)

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. Accrued Benefit commencing at Normal Retirement or a pension reduced 0.5% per month prior to Normal Retirement commencing as early as age 55.

Pre-Retirement Death: Death of a vested participant eligible for an immediate or deferred pension benefit; provided in both cases, the participant has been married for at least one year at his date of death. The benefit payable is 60% of the participant's Early or Normal Retirement Benefit that would have been payable to the participant had he terminated his employment on the date of death and started to receive payments on his retirement date. The benefit is payable to the spouse commencing when the participant's early or normal retirement date would have occurred.

Normal Form of Payment: Life annuity, if single; unreduced joint and 60% contingent annuity, if married.

Optional Forms of Payment: Life annuity or 60%, 75% or 100% Contingent Annuitant Option.

For participants formerly in the Terex Corporation Salaried Employees Retirement Plan ("Merged"):

Normal Retirement: Accrued Benefit payable at age 65.

Early Retirement: Age 55 with 5 years of service. Accrued Benefit is reduced by 5/10 of 1% for each complete month the early retirement pension benefit commences prior to Normal Retirement.

Deferred Vested Retirement: A participant is fully vested upon completion of 5 years of service. Accrued Benefit is payable as early as age 55 and is reduced by 5/10 of 1% for each complete month the benefit commences prior to Normal Retirement

Pre-retirement Death: If a participant has completed at least 5 years of service and dies before his or her Normal Retirement Date, his or her surviving spouse is entitled to a benefit payable at the later of the date the participant would attain age 55 or the date of death. The benefit is the 50% Joint and Contingent benefit with the participant's spouse as the contingent annuitant. It is reduced for Early Retirement at date of commencement.

Normal Form of Payment: Single Life Annuity for single participants and 50% J&S for married participants

Summary of Plan Provisions (Continued)

Optional Forms of Payment: A participant may elect a life annuity, 5 or 10-year Certain and Life annuity, 50%, 75%, or a 100% contingent annuitant options. In certain conditions, a lump sum payment on part or all of the Accrued Benefit may be payable.

For participants formerly in the Koehring & Northwest Engineering Hourly Pension Plan ("Waverly"):

Normal Retirement: Accrued Benefit payable at the later of age 65 and 5 years of service.

Early Retirement: Age 55 and 10 years of service. If payment commences prior to Normal Retirement, the Accrued Benefit is reduced by 1/180 for each of the first 60 months and 1/360 for each of the next 60 months that retirement precedes the Normal

Retirement Date. Effective January 8, 2000, any employee with a minimum of 30 years of seniority may retire at age 55 or older without any reduction of pension benefits.

Deferred Vested Retirement: Payment of the participant's Accrued Benefit may commence at age 55 with the same reduction as Early Retirement should the participant have 10 years of service.

Disability: A participant is eligible for a Disability Retirement benefit if his or her employment is terminated by disability after 10 years of service. The amount of the benefit shall be equal to the participant's Accrued Benefit.

Pre-retirement Death: If a participant has completed at least 5 years of service and dies before his or her Normal Retirement, his or her surviving spouse is entitled to a benefit payable at the later of age 55 or the date of death. The benefit is the 50% Joint and Contingent benefit with the spouse as the Contingent Annuitant. It is reduced for Early Retirement at date of commencement.

Normal Form of Payment: Single Life Annuity for single participants and 50% J&S for married participants

Optional Forms of Payment: A participant may elect a life annuity, ten-year certain and life annuity, or a 50%, 75% or 100% contingent annuitant option.

2011 Form 5500 Schedule SB Attachments
Schedule SB, line 26 – Schedule of Active Participant Data
Terex Pension Plan
EIN 34-1531521 / PN 001

Schedule of Active Participants

	Completed Years of Service on January 1, 2011										
Attained Age	**<1**	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40+**	**Total**
Under 25											0
25-29											0
30-34		3									3
35-39		5	1								6
40-44		3	5			1					9
45-49	1	3		6							10
50-54		3	6	6	10	10	6				41
55-59		5	8	5	6	11	14	15			64
60-64	1	1	3	4	3	6	10	13	3	4	48
65-69			2				1		2	2	7
Over 69						1					1
Total	**2**	**23**	**25**	**21**	**19**	**29**	**31**	**28**	**5**	**6**	**189**

2011 Form 5500 Schedule SB Attachments
Schedule SB, line 32 – Schedule of Amortization Bases
Terex Pension Plan
EIN 34-1531521 / PN 001

Amortization Base

The shortfall amortization charge is the sum of the shortfall base amortization for each plan year covered under PPA. Although a shortfall base can be negative, the combined shortfall amortization charge cannot be negative.

Shortfall Bases

Year Established	Outstanding Balance	Years Remaining	Installment
2008	$ 2,643,026	4	$ 689,747
2009	7,247,431	5	1,534,680
2010	11,772,823	6	2,149,866
2011	2,569,526	7	415,226
Total	$ 24,232,806		$ 4,789,519

2011 Form 5500 Schedule SB Attachments
Schedule SB, line 22 – Description of Weighted Average Retirement Age
Terex Pension Plan
EIN 34-1531521 / PN 001

Description of Weighted Average Retirement Age

Formerly Koehring & Northwest Engineering Hourly Pension Plan

(1)	(2)	(3)	(4)
Age	**Rate**	**Weight**	**(1) x (2) x (3)**
55	2.00%	1.0000	1.10
56	2.00%	0.9800	1.10
57	2.00%	0.9604	1.09
58	2.00%	0.9412	1.09
59	2.00%	0.9224	1.09
60	2.00%	0.9039	1.08
61	2.00%	0.8858	1.08
62	15.00%	0.8681	8.07
63	10.00%	0.7379	4.65
64	10.00%	0.6641	4.25
65	100.00%	0..5977	38.85
		Weighted Average:	**63.46**

Formerly Terex Corporation Retirement Program for Salaried Employees

(1)	(2)	(3)	(4)
Age	**Rate**	**Weight**	**(1) x (2) x (3)**
55	4.00%	1.0000	2.2
56	4.00%	0.9600	2.15
57	4.00%	0.9216	2.10
58	6.00%	0.8847	3.08
59	6.00%	0.8317	2.94
60	15.00%	0.7818	7.04
61	15.00%	0.6645	6.08
62	40.00%	0.5648	14.0
63	20.00%	0.3389	4.27
64	50.00%	0.2711	8.67
65	50.00%	0.1356	4.4
66	50.00%	0.0678	2.24
67	100.00%	0.0339	2.27
		Weighted Average:	**61.44**

2011 Form 5500 Schedule SB Attachments
Schedule SB, line 22 – Description of Weighted Average Retirement Age
Terex Pension Plan
EIN 34-1531521 / PN 001

Formerly Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit

(1)	(2)	(3)	(4)
Age	**Rate**	**Weight**	**(1) x (2) x (3)**
50	1.00%	1	0.50
51	1.00%	0.99	0.50
52	1.00%	0.9801	0.51
53	1.00%	0.9703	0.51
54	1.00%	0.9606	0.52
55	1.50%	0.95099	0.78
56	1.50%	0.93673	0.79
57	1.50%	0.92267	0.79
58	1.50%	0.90883	0.79
59	1.50%	0.8952	0.79
60	10.00%	0.88177	5.29
61	10.00%	0.7936	4.84
62	25.10%	0.71424	11.11
63	20.00%	0.53496	6.74
64	15.00%	0.42797	4.11
65	75.00%	0.36378	17.73
66	84.60%	0.09094	5.08
67	100.00%	0.01401	0.94
		Weighted Average:	**62.32**

Formerly Simplicity Engineering UAW Retirement Income Plan

Retirement Age – Active Participants: **62**

Average Retirement Age for all plans: 62

2011 Form 5500 Schedule SB Attachments
Schedule SB, line 15 – Reconciliation of differences between valuation results and amounts used to calculate AFTAP
Terex Pension Plan
EIN 34-1531521 / PN 001

The following represents the two AFTAP Certifications made for the Terex Pension Plan. The change in the Funding Target was due to minor changes in the valuation system coding, and the change in the Actuarial Value of Assets was due to an adjustment of the receivable contribution dates in the final trust statement.

Certification as of 09/29/11

Funding Target:	$124,223,743
Actuarial Value of Assets:	$101,289,751
Carryover Balance:	$0
Prefunding Balance:	$0
AFTAP:	81.54%

Certification as of 04/19/12

Funding Target:	$125,524,387
Actuarial Value of Assets:	$101,291,581
Carryover Balance:	$0
Prefunding Balance:	$0
AFTAP:	80.69%

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

2011

This Form is Open to Public Inspection

For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011

▶ **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: TEREX PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN): 34-1531521

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

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

Part I Basic Information

1 Enter the valuation date: Month 1 Day 1 Year 2011

2	Assets:			
a	Market value	2a		109,312,972
b	Actuarial value	2b		101,291,581
3	Funding target/participant count breakdown:		(1) Number of participants	(2) Funding Target
a	For retired participants and beneficiaries receiving payment	3a	2,459	92,545,747
b	For terminated vested participants	3b	1,014	20,605,893
c	For active participants:			
(1)	Non-vested benefits	3c(1)		78,008
(2)	Vested benefits	3c(2)		12,294,739
(3)	Total active	3c(3)	189	12,372,747
d	Total	3d	3,662	125,524,387
4	If the plan is in at-risk status, check the box and complete lines (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 in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5		5.74 %
6	Target normal cost	6		1,050,000

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

AMD — Signature of actuary

9/24/12 — Date

Anthony Davis — Type or print name of actuary

11-06861 — Most recent enrollment number

Fidelity Investments — Firm name

(212) 335-6467 — Telephone number (including area code)

640 5th Avenue, IN2

New York NY 10019 — Address of the firm

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 13.20 %		
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38 from prior year)		6,773,724
	b Interest on (a) using prior year's effective rate of 6.52 % except as otherwise provided (see instructions)		441,647
	c Total available at beginning of current plan year to add to prefunding balance		7,215,371
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.69 %
15	Adjusted funding target attainment percentage	15	80.69 %
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	80.05 %
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
04/14/2011	1,330,000		07/11/2012	1,500,000	
07/14/2011	1,330,000		09/10/2012	3,400,000	
10/15/2011	1,330,000				
01/13/2012	1,330,000				
04/13/2012	767,000				
04/13/2012	733,000				
			Totals • 18(b)	11,720,000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	10,996,668

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
2.94 %	5.82 %	6.46 %	☐ N/A, full yield curve used

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	62

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

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	31a	1,050,000
b Excess assets, if applicable, but not greater than 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	24,232,806	4,789,519
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 (lines 31a - 31b + 32a + 32b - 33)	34	5,839,519

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	5,839,519
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	10,996,668
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	5,157,149
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension funding relief under Pension Relief Act of 2010 (see instructions)

41 If a shortfall amortization base is being amortized pursuant to an alternative amortization schedule:

a Schedule elected	☐ 2 plus 7 years ☐ 15 years
b Eligible plan year(s) for which the election in line 41a was made	☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

42 Amount of acceleration adjustment	42	
43 Excess installment acceleration amount to be carried over to future plan years	43	

TEREX PENSION PLAN

Financial Statements

December 31, 2011 and 2010 and for the Year Ended December 31, 2011

TEREX PENSION PLAN

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Supplemental Schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have not been included as these schedules are prepared for the Terex Corporation Master Retirement Trust.

Mayer Hoffman McCann P.C.
An Independent CPA Firm

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Plymouth Meeting, Pennsylvania 19462
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Independent Auditors' Report

To the Participants and Administrator of

Terex Pension Plan

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of Terex Pension Plan (the "Plan") as of December 31, 2011 and 2010, and the related Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2011, as listed in the accompanying index. 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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such 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 December 31, 2011 and 2010 and for the year ended December 31, 2011, 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 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 U.S. generally accepted auditing standards 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.

Mayer Hoffman McCann P.C.

Plymouth Meeting, Pennsylvania
October 4, 2012

TEREX PENSION PLAN

Statements of Net Assets Available for Benefits at December 31, 2011 and 2010

	2011	2010
Assets:		
Terex Corporation Master Retirement Plan Trust, at fair value	$ 111,448,949	$ 98,731,101
Contribution receivable	18,996,000	27,630,107
Total assets	130,444,949	126,361,208
Liabilities:		
Accrued expenses	(239,441)	(182,955)
Net assets available for benefits	$ 130,205,508	$ 126,178,253

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

TEREX PENSION PLAN

Statement of Changes in Net Assets Available for Benefits for the Year Ended December 31, 2011

Additions to net assets attributed to:	
Terex Corporation Master Retirement Plan Trust investment gain	$ 9,267,356
Interest and other income	7,244
Contributions	6,087,000
Total additions	15,361,600
Deductions to net assets attributed to:	
Benefit payments to participants	(9,759,646)
Administrative expenses	(1,574,699)
Total deductions	(11,334,345)
Net additions	4,027,255
Net assets available for benefits, beginning of year	126,178,253
Net assets available for benefits, end of year	$ 130,205,508

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

1. Description of Plan

The following brief description of the Terex Pension Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions. The Plan is subject to the provisions of the Employee Retirement Security Act of 1974 ("ERISA").

General

The Plan is a noncontributory defined benefit plan, which until the Plan mergers discussed below, covered all salaried employees of the Terex Corporation (the "Company") located in Hudson, Ohio meeting minimum eligibility requirements. The Hudson, Ohio location has since been closed.

Participant benefits - Hudson, Ohio Plan

Employees with five or more years of eligible service are fully vested and entitled to annual pension benefits beginning at normal retirement age (65), equal to 1.75% of final average monthly earnings over a consecutive five-year period, times years of credited service, minus the sum of:

(1) 1.75% of the Primary Social Security Benefit times credited service, to a maximum of 50% of the Primary Social Security benefit, and
(2) for former employees of General Motors Corporation ("GMC"), prior owner of the division, the vested accrued monthly benefit earned under any GMC plan, less 50% of the Primary Benefit under Part B of the GMC Salaried Plan for terminations prior to January 1, 1986, or $0 for terminations after December 31, 1985.

The normal retirement benefit, however, is subject to the following minimum:

1.75% of final average monthly earnings multiplied by credited service earned after December 31, 1980, minus 1.75% of the participant's Primary Social Security benefit multiplied by credited service earned after December 31, 1980, to a maximum of 50% of the Primary Social Security benefit.

Effective March 31, 1984, the Terex Hudson, Ohio Plan was amended to cease the accumulation of credited service and benefits indefinitely.

Plan Mergers

Plan merger during 2000
Effective June 30, 2000, the Company and certain of its wholly-owned subsidiaries merged four defined benefit pension plans into the Plan (the "2000 Merger"). The four plans were the Terex Corporation Salaried Employees' Retirement Plan, the Koehring Cranes and Excavators (Benton Harbor, Michigan) Hourly Employees' Pension Plan, the Cedarapids, Inc. Retirement Income Plan, and the Royer Foundry and Machine Company Retirement Plan. The 2000 Merger had no effect on the benefits for any of the plan participants. The benefits of the plans and all provisions of the plans prior to the 2000 Merger are unchanged unless otherwise noted.

Following is a brief description of the four plans that merged into the Plan on June 30, 2000:

Terex Corporation Salaried Employees' Retirement Plan
The Terex Corporation Salaried Employees' Retirement Plan (the "Merged Plan") was a noncontributory defined benefit plan covering certain current and former salaried employees of the Company and Northwest Engineering ("Northwest"), all salaried employees of Koehring Cranes & Excavators ("Koehring") and

former participants of the Koehring Cranes & Excavators Salaried Employees' Pension Plan (the "Koehring Salaried Plan") and the Northwest Engineering Company Salaried Employees' Pension Plan (the "Northwest Plan").

The Koehring Salaried Plan and Northwest Plan were merged effective January 1, 1989 to form the Merged Plan. Accordingly, on that date all assets and obligations of the two plans were transferred to the Merged Plan.

Effective October 23, 1992, the Terex Corporation Hourly-Rate Employees' Pension Plan (the "Terex Hourly-Rate Plan") was merged into the Merged Plan. Accordingly, on that date all assets and obligations of the Terex Hourly-Rate plan were transferred to the Merged Plan. The Terex Hourly-Rate Plan was a noncontributory defined benefit plan covering all former hourly employees of the Company's division located in Hudson, Ohio meeting minimum eligibility requirements. Effective March 31, 1984, the Terex Hourly-Rate Plan was amended to cease the accumulation of credited service and benefits indefinitely.

Effective May 7, 1993, the Merged Plan was amended to cease the accumulation of credited service and benefits indefinitely. Participants in the Merged Plan as of that date, who were not vested as of that date, will continue to earn vesting service after May 7, 1993; however, future salary changes will have no effect on future benefit amounts. Employees hired after May 7, 1993 are not eligible to participate.

Excluding hourly employees formerly covered under the Terex Hourly-Rate Plan, all participants with five or more years of eligible service are fully vested and entitled to annual pension benefits beginning at normal retirement age (65), equal to a participant's years of participation at retirement (limited to a maximum of 25) multiplied by a percentage of the participant's final average earnings over a consecutive five-year period. For former participants under the Koehring Salaried Plan and the Northwest Plan, service credit earned under a prior plan is counted in the benefit calculation and benefits received under the Merged Plan are reduced by benefit amounts payable under a prior plan.

Participants of the Terex Hourly-Rate Plan with five or more years of eligible service are fully vested and entitled to annual pension benefits beginning at normal retirement age (65), equal to the monthly benefit rate (as determined by a benefit class code, payment commencement date and month of payment) multiplied by years of credited service. All benefits will be reduced by benefits payable by GMC, prior owner of the division, which are based on GMC credited service to January 5, 1981.

Koehring Cranes & Excavators (Benton Harbor, Michigan) Hourly Employees' Pension Plan
The Koehring Cranes & Excavators (Benton Harbor, Michigan) Hourly Employees' Pension Plan (formerly known as the "Benton Harbor Plan") was a noncontributory defined benefit plan covering all hourly employees of Koehring located in Benton Harbor, Michigan.

Effective January 17, 1987, Koehring established the Benton Harbor Plan, as well as separate plans at other Koehring locations, in conjunction with the Purchase and Sale agreement between AMCA International Limited ("AMCA"), the Company and Koehring, whereby Koehring purchased the operations of the Benton Harbor plant from AMCA. Under terms of the agreement, Koehring was required to establish the Benton Harbor Plan as a successor plan to a similar plan administered by AMCA.

On March 19, 1992, the Benton Harbor, Michigan location was sold. All active employees in the Benton Harbor Plan were terminated in conjunction with the sale of the location. All active participants became fully vested in the Benton Harbor Plan as of the date of the sale.

Participants with five or more years of eligible service are fully vested and entitled to annual pension benefits beginning at normal retirement age (65), equal to a participant's years of participation at retirement (including years credited under the prior plan) multiplied by the applicable benefit level in effect at the time of retirement.

Cedarapids, Inc. Retirement Income Plan

The Cedarapids, Inc. Retirement Income Plan (the "Cedarapids Retirement Plan") was a noncontributory defined benefit pension plan covering substantially all employees of Cedarapids, Inc. who are not in a collective bargaining unit.

The Cedarapids Retirement Plan provides specified retirement, disability, and death benefits to be paid from the net assets available for plan benefits. Benefits are based principally upon years of service and the benefit rate on the date of retirement, as discussed below. The standard form of retirement benefit to single participants is a monthly payment beginning 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. Optional forms of benefits are also available.

Vesting (a participant's right to receive benefits even though that participant's employment may terminate) occurs after a period of five years.

Upon retirement, the annual pension benefit payable for active participants shall not be less than $312 multiplied by the number of years in the member's period of service as an employee, plus or minus adjustments for prior contributions and other pension benefits payable under other plans.

A participant who has attained the age of 60 shall be entitled to 100% of the normal retirement benefit. Participants who retire between the ages of 55 and 60 and have at least 10 years of service shall be entitled to a percentage of the normal retirement benefit, with the percentage increasing as the retirement age approaches 60.

If an active participant dies after completing five years of service, a death benefit equal to 50% of the joint and survivor annuity benefit is paid to the participant's spouse. Vested active participants who become disabled receive an amount equal to their accrued benefit on their disability retirement date which is six months after disablement. If covered under the Cedarapids long-term disability plan, participants continue to earn credited service and benefits while disabled.

Effective October 15, 2000, the Cedarapids Retirement Plan was amended to cease the accumulation of credited service and benefits indefinitely. Participants in the Cedarapids Retirement Plan as of that date, who were not vested as of that date, continued to earn vesting service after October 15, 2000; however, service and compensation after October 15, 2000, was not factored in when determining benefits under the Cedarapids Retirement Plan. Employees not participating in the Cedarapids Retirement Plan as of October 15, 2000, were prohibited from entering the Plan.

Royer Foundry and Machine Company Retirement Plan

The Royer Foundry and Machine Company Retirement Plan (the "Royer Plan") was a noncontributory defined benefit plan covering certain employees of Royer Foundry and Machine Company located in Lebanon, Pennsylvania.

Participants with five or more years of credited service are fully vested and entitled to annual pension benefits beginning at normal retirement age (65), equal to 0.75% of final average annual compensation over a consecutive ten-year period, multiplied by credited service up to the Social Security Table 1 amount in effect January 1 (rounded to $1) based on the participant's year of birth, plus 1.25% of final annual compensation in excess of the Social Security Table 1 amount.

Plan mergers during 2008

Effective December 30, 2008, Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit was merged into the Plan and effective December 31, 2008, Koehring and Northwest Engineering Hourly Pension Plan and the Simplicity Engineering UAW Retirement Income Plan were merged into the Plan (the "2008 Mergers"). The 2008 Mergers had no effect on the benefits for any of the plan participants. The benefits of the plans and all provisions of the plans prior to the 2008 Mergers are unchanged unless otherwise noted.

Following is a brief description of the plans that merged into the Plan on December 30 and 31, 2008, as noted above:

Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit

The Cedarapids, Inc. Pension Plan for Employees in a Collective Bargaining Unit (the "Cedarapids Plan") was a noncontributory defined benefit plan covering certain employees of Terex USA, LLC (formerly Cedarapids, Inc.) located in Cedarapids, Iowa.

The Cedarapids Plan provides specified retirement, disability, and death benefits to be paid from the net assets available for plan benefits. Benefits are based principally upon a participant's years of service at retirement, multiplied by the applicable benefit level in effect at the time of retirement. The standard form of retirement benefit to single participants is a monthly payment beginning 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. Other forms of benefits are also available.

Vesting (a participant's right to receive benefits even though that participant's employment may terminate) occurs after a period of five years of service.

A participant who has attained the age of 62 shall be entitled to 100% of the normal retirement benefit. Participants who retire between the ages of 50 and 62 with at least 10 years of service shall be entitled to a percentage of the normal retirement benefit, with the percentage increasing as the retirement age approaches 62.

If an active participant dies after completing five years of service, a death benefit equal to 50% of the joint and survivor annuity benefit is paid to the participant's spouse. Vested active participants who have become disabled receive an amount equal to their accrued benefit on their disability retirement date which is six months after disablement.

Effective January 6, 2006, the Cedarapids Plan was amended to limit eligibility to employees hired before May 10, 2005, and freeze years of credited service at June 29, 2007. Participants in the Cedarapids Plan as of that date, who were not vested as of that date, will continue to earn vesting service after June 29, 2007; however, service and compensation after June 29, 2007, will not be factored in when determining benefits under the Cedarapids Plan.

Koehring and Northwest Engineering Hourly Pension Plan

The Koehring and Northwest Engineering Hourly Pension Plan (the "Koehring Plan") was a noncontributory defined benefit plan covering certain current and former hourly employees of Koehring (which was merged into Koehring Cranes, Inc.) and Northwest at the following locations: Waverly, Iowa (Koehring); Waterloo, Iowa (Koehring); Chattanooga, Tennessee (Koehring); and Green Bay, Wisconsin (Northwest). The Waterloo, Chattanooga, and Green Bay locations have since been closed. Koehring and Northwest are currently an active and an inactive division of the Company, respectively.

Participants with five or more years of eligible service are fully vested and entitled to annual pension benefits, beginning at normal retirement age (65). Participants who retire between the ages of 55 and 65

with at least 10 years of service shall be entitled to a percentage of the normal retirement benefit, with the percentage increasing as the retirement age approaches 65. Participants who retire at age 55 or older with at least 30 years of service shall be entitled to normal retirement benefits. Koehring participants' benefits are equal to a participant's years of participation at retirement (including years credited under prior plans), multiplied by the applicable benefit level in effect at the time of retirement. Northwest participants' monthly benefits are equal to 1% of compensation earned during their years of credited service. Maximum allowable compensation for computation of benefits is $160,000 per year. The Koehring Plan also provides death, disability, and survivor benefits.

The Koehring Plan was amended to disregard hours of service on or after February 18, 2006. Participants in the Koehring Plan as of that date, who were not vested as of that date, will continue to earn vesting service after February 18, 2006; however, service and compensation after February 18, 2006, will not be factored in when determining benefits under the Koehring Plan.

Simplicity Engineering UAW Retirement Income Plan

The Simplicity Engineering UAW Retirement Income Plan (the "Simplicity Plan") was a noncontributory defined benefit pension plan for the eligible employees of Simplicity Engineering, a division of Powerscreen USA, LLC, in the bargaining unit represented by the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America Local Union Number 743.

Eligible employees participated in the Simplicity Plan upon completion of one year of service and attainment of age 21. If participants terminate before rendering 5 years of service, they forfeit the right to receive the value of their accumulated plan benefits.

The Simplicity Plan provides participants with retirement income beginning at the normal retirement age (62) with a minimum of 5 years of service. The normal retirement benefit is equal to a specified amount times the participant's years of credited service. The Simplicity Plan permits early retirement for participants who have attained age 57 and completed 10 years of service. The early retirement benefit is based on normal retirement benefit reduced by an early retirement reduction factor. The Simplicity Plan also provides death, disability, and surviving spouse benefits.

Effective December 31, 2000, the Simplicity Plan was amended to cease the accumulation of credited service and benefits indefinitely. Participants in the Simplicity Plan as of that date, who were not vested as of that date, will continue to earn vesting service after December 31, 2000; however, service after December 31, 2000, will not be factored in when determining benefits under the Simplicity Plan. Employees not participating in the Simplicity Plan on December 31, 2000, will not be allowed to enter the Simplicity Plan.

On December 9, 2005, the Simplicity Plan was amended to reflect the March 18, 1999 collective bargaining agreement that limited eligibility to employees hired before March 16, 1999.

Administration

The Plan is administered by an Administrative Committee appointed by the Company.

2. Significant Accounting Policies

Basis of accounting

The accompanying financial statements have been prepared on the accrual basis.

Investment valuation
Plan investments are maintained in the Terex Corporation Master Retirement Plan Trust (the "Master Trust"), which has a December 31 year-end, and are stated at fair value as determined by Fidelity Management Trust Company ("Fidelity" or the "Trustee"), on the last business day of the year (See Note 3 - "Fair Value Measurement of Investments and Certification by Trustee unaudited"). Purchases and sales of securities are recorded on a trade-date basis. Interest and other income is recorded on the accrual basis. Terex Corporation Master Retirement Plan Trust investment gain is comprised of all realized and unrealized appreciation (depreciation) during the year.

Expenses of the plan
Expenses of operating the Plan are paid by the Plan.

Regulatory requirements
The Plan provides for retirement and death benefits and is subject to the provisions of ERISA. In addition, the Plan provides for disability benefits.

Termination provisions
Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provision set forth in ERISA. In the event the Plan is terminated, the Plan has provisions for the allocation of net assets among the participants and pensioners. To the extent unfunded vested benefits exist, such benefits would be payable by the Pension Benefit Guaranty Corporation (the "PBGC"), up to specified limits, as prescribed by ERISA. Should the Plan terminate at some future time, its net assets will generally not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC's benefit guaranty, while other benefits may not be provided for at all.

Funding policy
The Company's contributions were made in amounts sufficient to fund the Plan in accordance with ERISA funding requirements. The funding requirements for the December 31, 2011 plan year have been met for the Plan. See Note 7 for further discussion.

Benefit payments
Benefit payments to participants are recorded upon distribution.

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

Risks and uncertainties
Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and participant demographics, all of which are subject to change. Investments are exposed to various risks, such as interest rate, market and credit. Due to uncertainties inherent in the estimations and assumptions process and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in these estimates, assumptions and risks in the near term would be material to the financial statements and the actuarial present value of accumulated plan benefits.

Recent Accounting Pronouncements

In May 2011, the Financial Accounting Standard Board ("FASB") issued Accounting Standards Update ("ASU") 2011-04, "Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRSs," which amends Accounting Standard Codification ("ASC") 820. The amendment is the result of work by the FASB and the International Accounting Standards Board to develop common requirements for measuring fair value and for disclosing information about fair value measurements in accordance with U.S. generally accepted accounting principles and International Financial Reporting Standards. The amendment clarifies that the concepts of highest and best use in a fair value measurement are relevant only when measuring the fair value of nonfinancial assets and are not relevant when measuring the fair value of financial assets or liabilities. The guidance expanded the disclosures for fair value measurements categorized within Level 3 of the fair value hierarchy to include the valuation processes used by the reporting entity and the sensitivity of the fair value measurement to changes in unobservable inputs and the interrelationships between those unobservable inputs, if any. ASU 2011-04 is effective for interim and annual periods beginning after December 15, 2011. Adoption of this guidance is not expected to have a significant impact on the determination or reporting of the Plan's financial results.

3. Fair Value Measurement of Investments and Certification by Trustee (unaudited)

The Plan measures its investments under the provisions of ASC 820. ASC 820 defines fair value as the price that would be received from selling an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. When determining the fair value measurements for assets and liabilities required to be recorded at fair value, the Plan considers the principal or most advantageous market in which it would transact and considers assumptions that market participants would use when pricing the asset or liability, such as inherent risk, transfer restrictions, and risk of nonperformance.

ASC 820 also establishes a fair value hierarchy that requires the Plan to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. A financial instrument's categorization within the fair value hierarchy is based upon the lowest level of input that is significant to the fair value measurement. Determining which category an asset or liability falls within this hierarchy requires judgment. ASC 820 establishes three levels of inputs that may be used to measure fair value:

Level 1 - Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities;

Level 2 - Quoted prices in markets that are not active, or inputs which are observable, either directly or indirectly, for substantially the full term of the asset or liability; and

Level 3 - Prices or valuation techniques that require inputs that are both significant to the fair value measurement and unobservable (i.e., supported by little or no market activity).

The Plan's investments are maintained in the Master Trust which is considered a single-employer trust. Investments in the Master Trust measured at fair value on a recurring basis consisted of the following types of instruments as of December 31, 2011 and 2010 (Level 1 and 2 inputs are defined above):

Notes to Financial Statements

	12/31/11	Level 1	Level 2
Interest bearing cash, including money market funds	$ 1,484,514	$ 1,484,514	$ -
Common/collective trust funds:			
Equity index	13,851,790	-	13,851,790
Large cap	13,869,274	-	13,869,274
Small/Mid cap	6,116,316	-	6,116,316
International	10,977,672	-	10,977,672
Bond	65,149,013	-	65,149,013
Interest receivable	370	370	-
Total investments measured at fair value	$ 111,448,949	$ 1,484,884	$ 109,964,065

	12/31/10	Level 1	Level 2
Interest bearing cash, including money market funds	$ 460,563	$ 460,563	$ -
Common/collective trust funds:			
Equity index	13,161,813	-	13,161,813
Large cap	13,351,151	-	13,351,151
Small/Mid cap	6,112,582	-	6,112,582
International	10,312,181	-	10,312,181
Bond	55,332,585	-	55,332,585
Interest receivable	226	226	-
Total investments measured at fair value	$ 98,731,101	$ 460,789	$ 98,270,312

The Plan's valuation methodology used to measure the fair value of the common/collective trust, consisting of mutual funds, is priced based on the market value of the underlying investments in the portfolio which may include common stock, U.S. Treasury bonds, corporate bonds, mortgage-backed securities, asset-backed securities and collateralized mortgage obligations.

The investment and related income amounts in the accompanying financial statements of the Plan have been certified by the Trustee as complete and accurate. In addition, the Trustee has certified the financial information of the Master Trust as of December 31, 2011 and 2010 and for the year ended December 31, 2011.

The following table is a summary of the investment earnings and the net appreciation in the fair market value of the Master Trust for the year ended December 31, 2011:

Investment income:	
Common/collective trust and other equity investments:	
Realized gain net	$ 4,496,958
Unrealized gain net	4,770,398
	9,267,356
Interest and other	7,244
	$ 9,274,600

4. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump sum distributions, which are attributable, under the Plan's provisions, to the service participants have rendered. Accumulated plan benefits include benefits expected to be paid to (i) retired or terminated participants or their beneficiaries; (ii) beneficiaries of participants who have died with remaining benefits; and (iii) present participants or their beneficiaries.

The actuarial present value of accumulated plan benefits is determined by the Plan's independent 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 and the probability of payment (by means of decrements such as for death, withdrawal, or retirement) between the valuation date and the expected date of payment. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment are included to the extent they are deemed attributable to participant service rendered prior to the valuation date.

The Projected Unit Credit Cost Method of valuation was used for the Plan. The significant assumptions underlying the actuarial computations are as follows:

Interest rate:	8.00%
Mortality rates:	IRS 2012 Static Mortality Table
	For disabled participants, as defined in Revenue Ruling 96-7.
Retirement:	Later of valuation age or normal retirement date
Marriage assumptions:	80% of participants are assumed to be married

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

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

	2011	2010
Vested benefits:		
Participants currently receiving benefits	$ 81,673,233	$ 76,671,831
Other	22,493,319	26,306,056
	104,166,552	102,977,887
Nonvested benefits	41,380	75,711
Total actuarial present value of accumulated plan benefits	$ 104,207,932	$ 103,053,598

The following is an analysis of the change in the present value of accumulated plan benefits:

Actuarial present value of accumulated plan benefits as of December 31, 2010	$ 103,053,598
Accumulation of benefits and actuarial (gains) losses	3,060,078
Increase for interest due to decrease in the discount period	7,853,902
Benefits paid	(9,759,646)
Actuarial present value of accumulated plan benefits as of December 31, 2011	$ 104,207,932

5. Income Tax Status

The Plan obtained its latest determination letter on May 27, 2008, in which the Internal Revenue Service ("IRS") stated that the Plan, as amended was in compliance with the applicable requirements of the Internal Revenue Code (the "IRC"). The Plan has been amended subsequent to receiving the determination letter. On February 22, 2012, the plan has submitted to the IRS for an updated determination letter. The plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

U.S. generally accepted accounting principles 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 position that more likely than not would be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2011, 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 jurisdiction; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examination for years prior to 2008.

6. Party-in-Interest

Certain expenses incurred by the Plan were paid to parties-in-interest. These expenses consist of investment manager/trustee, actuarial, audit, and legal fees and were $1,405,826 for the year ended December 31, 2011.

7. Contribution Agreement

In July 2011, the Company reached an agreement with the PBGC to contribute approximately $16.9 million in addition to minimum funding requirements, to be paid in equal annual installments on or before December 31st of 2012, 2013, and 2014. This agreement related to the transfer of manufacturing operations located in Cedarapids, Iowa to other North American facilities which affected participants in the Cedarapids Plan. Accordingly, the contribution agreement amount was accrued as of December 31, 2011 and 2010 and is included in Contributions receivable on the Statement of Net Assets Available for Benefits.

8. Subsequent Event

The Plan has evaluated subsequent events through October 4, 2012, which is the date the financial statements were available to be issued. During July 2012, the Moving Ahead for Progress in the 21st Century Act ("MAP 21") was signed into law. MAP 21 provides short-term relief of minimum contribution requirements by increasing the interest rates used to value pension liabilities beginning January 1, 2012, and increases the premiums due to the PBGC beginning in 2013 through 2015. As a result of the enactment of MAP 21, and existing funding commitments, there are no minimum contribution requirements for the 2012 Plan year.

9. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of the net assets available for benefits per the financial statements to the Plan's Form 5500 as of December 31, 2011:

Net assets available for plan benefits per the financial statements	$	130,205,508
Adjustment for contributions applicable to future plan years per agreement with PBGC (see Note 7)		(11,266,000)
Net assets available for plan benefits per Form 5500	$	118,939,508

The following is a reconciliation of the net increase in assets available for benefits per the financial statements to the Form 5500 at December 31, 2011:

Total net increase in assets available for benefits per the financial statements	$	4,027,255
Adjustment for contributions applicable to future plan years per agreement with PBGC (see Note 7)		5,633,000
Total net income per the Form 5500	$	9,660,255