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. . . . . ▶ [ ]

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
DUFF & PHELPS SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/1996

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

DUFF & PHELPS, LLC

55 EAST 52ND STREET, 31ST FLOOR
NEW YORK, NY 10055

2b Employer Identification Number (EIN) 36-4090666

2c Sponsor's telephone number 212-871-2549

2d Business code (see instructions) 523900

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.	10/12/2012	MARVIN ADLER
	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")
DUFF & PHELPS, LLC

55 EAST 52ND STREET, 31ST FLOOR
NEW YORK, NY 10055

3b Administrator's EIN
36-4090666

3c Administrator's telephone number
212-871-2549

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**	1341
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**	1012
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	446
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	1458
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	1458
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1263
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	20
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:
2E 2F 2G 2J 2K 2T 3D 3H

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

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)		**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)		0	**A** (Insurance Information)
(4)	X		**C** (Service Provider Information)
(5)	X		**D** (DFE/Participating Plan Information)
(6)			**G** (Financial Transaction Schedules)

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
DUFF & PHELPS SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
DUFF & PHELPS, LLC

D Employer Identification Number (EIN)
36-4090666

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

WILMINGTON TRUST FIDUCIARY SERVICES

26-3523944

(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 72	NONE	293334	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

UBS FINANCIAL SERVICES, INC

13-2638166

(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 33 63 72	NONE	254180	Yes [X] No [ ]	Yes [ ] No [X]	0	Yes [X] No [ ]

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

NEWPORT RETIREMENT SERVICES, INC

62-1868111

(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?
12 15 37 50 60 64	NONE	15084	Yes [X] No [ ]	Yes [X] No [ ]	11335	Yes [ ] No [X]

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)

RELIANCE TRUST COMPANY

58-1428634

(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?
12 19 62	NONE	0	Yes [X] No [ ]	Yes [ ] No [X]	7761	Yes [ ] No [X]

(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
NEWPORT RETIREMENT SERVICES, INC	15 60	11335

(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.
RELIANCE TRUST COMPANY 58-1428634	REVENUE SHARING USED TO OFFSET PLAN EXPENSE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC.	33 63	0

(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.
FRED ALGER MANAGEMENT INC 13-2665689	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC.	33 63	0

(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.
ASTON ASSET MANAGEMENT LLC 20-4747475	25 BASIS POINTS OF FUND VALUE

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
UBS FINANCIAL SERVICES, INC.	33 63	0

(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.
ARTIO GLOBAL MANAGEMENT LLC 13-6174048	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC.	33 63	0

(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.
BLACKROCK INC 51-0318674	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC.	33 63	0

(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.
INVESCO FUNDS 76-0528004	25 BASIS POINTS OF FUND VALUE

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
UBS FINANCIAL SERVICES, INC	33 63	0

(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.
IVY INVESTMENT MANAGEMENT COMPANY 04-6006759	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC	33 63	0

(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.
VAN ECK ASSOCIATES CORPORATION 13-3210061	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
UBS FINANCIAL SERVICES, INC	33 63	0

(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.
COHEN & STEERS CAPITAL MGT INC 14-1904657	25 BASIS POINTS OF FUND VALUE

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
UBS FINANCIAL SERVICES, INC	33 63	0

(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.
FIRST EAGLE FUNDS 13-3392291	25 BASIS POINTS OF FUND VALUE

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
RELIANCE TRUST COMPANY	12 19 65	7761

(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.
NEWPORT RETIREMENT SERVICES, INC 62-1868111	TRUSTEE/CUSTODIAN FEES FOR PLAN YEAR

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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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
DUFF & PHELPS SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
DUFF & PHELPS, LLC

D Employer Identification Number (EIN)
36-4090666

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: WT-FIXED INCOME INDEX PORT

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783732-927	C	4176413

a Name of MTIA, CCT, PSA, or 103-12 IE: WTRISC CIT II METLIFE 25554

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-0142858-094	C	8871157

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-S&P 500 INDEX PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783703-921	C	9577405

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-STRATEGIC BALANCED PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783639-913	C	291721

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-LARGE COMPANY VALUE PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783371-907	C	6218183

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-INTERNATIONAL VALUE PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783871-938	C	5844216

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-INTERNATIONAL GROWTH PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

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)
26-3783561-911	C	3070408

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-INTER FIXED INCOME PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783383-908	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6549120

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-STRATEGIC GROWTH FUND PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783632-912	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 504280

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-MID CAP FUNDAMENTAL VALUE PORT

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783919-945	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3426196

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-MID CAP GROWTH PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783748-929	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1827227

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-SMALL COMPANY GROWTH PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783319-901	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4098888

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-SMALL COMPANY VALUE

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783724-926	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4640136

a Name of MTIA, CCT, PSA, or 103-12 IE: WT-TOTAL RETURN REIT PORTFOLIO

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES COMPANY

c EIN-PN 26-3783868-937	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3120360

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
DUFF & PHELPS SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
DUFF & PHELPS, LLC

D Employer Identification Number (EIN)
36-4090666

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	303667	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	421429	410550
(2) Participant contributions	1b(2)		12034
(3) Other	1b(3)	5892	0
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)	1184379	1103260
(9) Value of interest in common/collective trusts	1c(9)	65150284	67224382
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	9075233	11026854
(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	76140884	79777080
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	309559	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	309559	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	75831325	79777080

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)	4644183	
	(B) Participants	2a(1)(B)	8194267	
	(C) Others (including rollovers)	2a(1)(C)	914056	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		13752506
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)	51122	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		51122
	(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)	371031	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		371031
	(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)		586508
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-2295973
c Other income	2c		-1141
d Total income. Add all **income** amounts in column (b) and enter total	2d		12464053
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7955412	
(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)		7955412
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)	15084	
(3) Investment advisory and management fees	2i(3)	547514	
(4) Other	2i(4)	288	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		562886
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		8518298
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		3945755
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: KPMG **(2)** EIN: 13-5565207

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		2500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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
DUFF & PHELPS SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
DUFF & PHELPS, LLC

D Employer Identification Number (EIN)
36-4090666

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): 58-1428634 27-1228437

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 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: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

DUFF & PHELPS SAVINGS PLAN

Financial Statements and Supplemental Schedule

December 31, 2011 and 2010

(With Independent Auditors' Report Thereon)

DUFF & PHELPS SAVINGS PLAN

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Note: All other schedules are omitted since they are not applicable or are not required based upon the disclosure requirements of the Employee Retirement Income Security Act of 1974 and applicable regulations issued by the Department of Labor.

KPMG LLP
345 Park Avenue
New York, NY 10154-0102

Independent Auditors' Report

Plan Administrator
Duff & Phelps Savings Plan:

We were engaged to audit the accompanying statements of net assets available for benefits of the Duff & Phelps Savings Plan (the Plan) as of December 31, 2011 and 2010, and the related statements of changes in net assets available for benefits for the years then ended, and the supplemental schedule H, line 4i – schedule of assets held (held at end of year) as of December 31, 2011. These financial statements and supplemental schedule are the responsibility of 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 the Reliance Trust Company, the former custodian of the Plan, for the year ended December 31, 2010 and for the period from January 1, 2011 to March 31, 2011 and by Wilmington Trust Fiduciary Services Company, the current custodian of the Plan, for the period from April 1, 2011 to December 31, 2011 except for comparing such information with the related information included in the Plan's financial statements and supplemental schedule. We have been informed by the plan administrator that the custodians hold the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the custodians as of December 31, 2011 and 2010 and for the years then ended, that the information provided to the plan administrator by the custodian 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 these accompanying financial statements and supplemental schedule taken as a whole. The supplemental schedule is presented for the purpose of additional analysis and is not a required part of the financial statements but is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the custodian, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

KPMG LLP

October 10, 2012

KPMG LLP is a Delaware limited liability partnership, the U.S. member firm of KPMG International Cooperative ("KPMG International"), a Swiss entity.

DUFF & PHELPS SAVINGS PLAN

Statements of Net Assets Available for Benefits

December 31, 2011 and 2010

	2011	2010
Assets:		
Cash	$ —	303,667
Investments:		
Investments, at fair value, as certified by the custodian (note 3):		
Common and collective trust funds	67,224,382	65,150,284
Mutual funds	11,026,854	9,075,233
Total investments at fair value	78,251,236	74,225,517
Receivables:		
Employer contributions	410,550	421,429
Employee contributions	12,034	—
Participant loans	1,103,260	1,184,379
Due from broker for securities sold	—	5,892
Total receivables	1,525,844	1,611,700
Total assets	79,777,080	76,140,884
Liabilities:		
Due to broker for securities purchased	—	309,559
Total liabilities	—	309,559
Net assets available for benefits before adjustment to contract value	79,777,080	75,831,325
Adjustment from fair value to contract value for interests in collective trust relating to fully benefit-responsive investment contracts (Note 5)	(470,673)	(133,322)
Net assets available for benefits	$ 79,306,407	75,698,003

See accompanying notes to financial statements.

DUFF & PHELPS SAVINGS PLAN

Statements of Changes in Net Assets Available for Benefits

Years ended December 31, 2011 and 2010

	2011	2010
Additions:		
Additions to net assets attributed to:		
Investment income, as certified by the custodian (note 3):		
Net (depreciation) appreciation in fair value of investments	$ (2,046,815)	8,295,224
Dividends	371,031	379,712
	(1,675,784)	8,674,936
Other	(1,141)	130
Total investment (loss) income	(1,676,925)	8,675,066
Interest on participant loans	51,122	57,709
Contributions:		
Employer	4,644,183	4,610,115
Participants	8,194,266	8,074,821
Rollover contributions	914,056	1,030,128
Other	—	—
Total contributions	13,752,505	13,715,064
Total additions	12,126,702	22,447,839
Deductions:		
Deductions from net assets attributed to:		
Benefits paid to participants	7,955,412	6,555,564
Administrative expenses	562,886	467,086
Total deductions	8,518,298	7,022,650
Net increase	3,608,404	15,425,189
Net assets available for benefits:		
Beginning of year	75,698,003	60,272,814
End of year	$ 79,306,407	75,698,003

See accompanying notes to financial statements.

(1) Description of Plan

The following brief description of the Duff & Phelps Savings Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

(a) General

The Plan is a defined contribution plan, which became effective October 1, 1996, for the employees of Duff & Phelps, LLC and subsidiaries (collectively, the Company or the Plan Sponsor), and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Wilmington Trust Fiduciary Services Company (Wilmington) serves as the trustee and custodian. The Newport Group (Newport) serves as the record keeper. Effective April 1, 2011, Wilmington replaced Reliance Trust Company (Reliance) as the custodian.

(b) Eligibility

Employees will automatically become an eligible participant in the Plan on their date of hire. Union employees, certain nonresident aliens and leased employees are not eligible to participate.

(c) Contributions

Eligible employees may contribute a percentage of their pretax annual compensation as determined by the participant, as defined by the Plan, and subject to the Internal Revenue Code (IRC) limitations on maximum deferral contributions, which was $16,500 ($22,000 for eligible employees 50 or older) for 2011 and 2010. The annual compensation of each employee taken into account under the Plan may not exceed $245,000 for 2011 and 2010.

(d) Matching Contributions

At the election of the Plan Sponsor, the Company contributes an amount equal to 100% of salary deferrals up to 3% of each employee's compensation and 50% of salary deferrals up to the next 3% of each employee's compensation.

(e) Vesting

Participants are immediately vested in both their voluntary and matching contributions plus actual earnings thereon.

(f) Participant Accounts

Each participant's account is credited with the participant's deferral contributions and allocations of the Company's matching contributions and Plan earnings. The benefit to which a participant is entitled is the benefit which can be provided from the participant's account.

(g) Rollover Contributions

Participants may transfer to their Plan accounts part or all of an eligible rollover distribution received from other qualified plans. Rollover contribution accounts will be subject to the terms of this Plan and will always be fully vested and nonforfeitable.

(h) Distributions from Plan

A participant's vested interest may be distributed only after the participant's disability, termination from employment, attainment of early retirement age of 55, attainment of normal retirement age of 65 or death. If one of the aforementioned conditions is met, participants may withdraw all or any part of their vested account at any time. Participants are required to start receiving benefits on April 1 following the later of the calendar year in which the participant reaches age 70½ or stops working for the Company.

For eligible rollover distributions to participants that are not transferred directly to the trustee of another qualified plan or to an IRA, the Plan administrator will typically withhold 20% of the distribution for taxes.

(i) Forfeitures

Forfeitures due to excess employer match paid out to participants are used to reduce future contributions from the Plan Sponsor. Forfeited nonvested accounts amounted to $3,415 and $8,473 for the years ended December 31, 2011 and 2010, respectively. In 2011 and 2010, the Plan utilized $8,575 and $0 of forfeited amounts to reduce contributions made by the Plan Sponsor, respectively.

(j) Administrative Expenses

Certain administrative expenses are paid by the Plan. All other administrative expenses are paid by the Company, including trustee and recordkeeping fees.

(k) Termination of Plan

Although it has not expressed any intent 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 provisions of ERISA. The Company will instruct the trustee either (a) to continue to administer the Plan until all funds are depleted, or (b) to distribute the assets remaining in the funds. If the funds are to be distributed, the trustee will distribute to each participant the amount credited to his/her account on the distribution date.

(l) Loan Provisions

The Plan allows participants to borrow money from employee accounts only if such loans: (a) are available to participants on a reasonably equivalent basis; (b) are not available to highly compensated employees in an amount greater than the amount that is available to other participants; (c) bear a reasonable rate of interest of prime plus 1%; (d) provide for periodic repayment within a specified period of time not less frequently than quarterly; (e) be payable within a period not exceeding five years from the date the participant receives the loan from the Plan, unless the loan is for the purchase of the participant's primary residence, in which case the loan must be payable

(Continued)

within a reasonable time commensurate with the repayment period permitted by commercial lenders for similar loans but not exceed the participant's normal retirement date as outlined in the Plan; (f) do not exceed, for any participant, the lesser of 50% of the participant's total vested interest in the Plan or $50,000; and (g) become due and payable in full immediately upon the participant's termination of employment. The loans are secured by the vested balance in the participant's account. As of December 31, 2011, there were 133 loans to 93 participants with interest rates ranging from 4.25% to 8.75% at various maturities through November 15, 2026. As of December 31, 2010, there were 131 loans to 99 participants with interest rates ranging from 4.00% to 8.75% at various maturities through October 31, 2025. Participant loans are carried at amortized cost.

(m) Hardship Withdrawals

Participants may withdraw their employee pretax contributions (but not the earnings on the pretax contributions) and rollover contributions, if applicable, to satisfy immediate and heavy financial needs. In accordance with Internal Revenue Service (IRS) regulations, participants must first exhaust all other assets available before obtaining a hardship withdrawal. All hardship withdrawals must be approved by the Plan administrator. After a hardship withdrawal, a participant is not allowed to make a contribution to the Plan for six months.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

The accompanying financial statements of the Plan were prepared on the accrual basis of accounting in conformity with U.S. generally accepted accounting principles (GAAP).

(b) Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions and deductions during the reporting period. These estimates and assumptions are based on the Plan administrator's best estimate and judgment. The Plan administrator evaluates its estimates and assumptions on an ongoing basis using historical experience and other factors, including consideration of the current economic environment. The Plan administrator adjusts these estimates when facts and circumstances dictate. As future events cannot be determined with precision, actual results could differ from those estimates and assumptions.

(c) Investment Valuation and Income Recognition

Investments in mutual funds are valued at the net asset value of shares held by the Plan at year end, which are generally based on quoted market values of the underlying investments held by the mutual funds. Investments in common and collective trust funds are stated at fair value as determined by the fund manager based on the unit value of the accounts or trusts. Unit value of the accounts or trusts is determined based on the fair value of the underlying assets of the funds divided by units outstanding at the valuation date.

The Plan reports investment contracts at fair value. However, contract value is the relevant measurement attribute for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan. The accompanying statements of net assets available for benefits presents the fair value of the investment contracts, as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits reflects fair value which is then adjusted to contract value basis and is included in net appreciation in fair value of investments.

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

(d) Payments of Benefits

Benefits are recorded when paid.

(e) Impact of New Accounting Standards and Interpretations

In January 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2010-06, *Fair Value Measurements and Disclosures (Topic 820): Improving Disclosures about Fair Value Measurements*. ASU No. 2010-06 outlines certain new disclosures and clarifies some existing disclosure requirements about fair value measurement as set forth in ASC Topic 820-10. ASU No. 2010-06 amends ASC Topic 820-10 to now require that (a) a reporting entity disclose separately the amounts of significant transfers in and out of Level 1 and Level 2 fair value measurements and describe the reasons for the transfers; and (b) in the reconciliation for fair value measurements using significant unobservable inputs, a reporting entity should present separately information about purchases, sales, issuances, and settlements. In addition, ASU No. 2010-06 clarifies existing disclosures on (a) how a reporting entity should provide fair value measurement disclosures for each class of asset and liability, and (b) how a reporting entity should provide disclosures about the valuation techniques and inputs used to measure fair value for both recurring and nonrecurring fair value measurements. Topic 820 is effective for the Plan in 2010, except for the disclosures about purchases, sales, issuances, and settlements in the rollforward of activity in Level 3 fair value measurements. These disclosures became effective for the Plan in 2011. Management determined that the adoption of the guidance did not have a material impact on the Plan's financial statements.

In May 2011, the FASB issued ASU 2011-04: Fair Value Measurement (Topic 820), *Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRS* resulting in additional disclosure requirements for fair value measurements. The update permits a reporting entity to measure the fair value of a group of financial assets and liabilities on the basis of the reporting entity's net exposure to market risks or to credit risk on a recurring basis, subject to specific requirements. The update also specifies that in the absence of Level 1 inputs, a reporting entity should apply premiums or discounts when market participants would take them into account when pricing the asset or liability. In addition, the update enhances the disclosure requirements which require reporting entities to provide quantitative information about the inputs used in fair value measurement, particularly information about unobservable input used within Level 3 of the fair

value hierarchy. The update also requires a reporting entity to disclose the valuation processes used for fair value measurements within Level 3. These amendments are to be applied prospectively, and are effective for annual periods beginning after December 15, 2011. Management does not expect the adoption to have a significant impact on the financial statements.

(f) Reclassifications

Certain 2010 amounts have been reclassified to conform to the 2011 presentation.

(3) Information Certified by the Plan's Custodian (Unaudited)

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to the information certified by Reliance and Wilmington (the custodians), except for comparing such information certified by the custodians to information included in the Plan's financial statements and supplemental schedule.

The following is a summary of investments as of December 31, 2011 and 2010, which has been certified as accurate and complete by the custodians:

	2011	2010
Common and collective trust funds:		
WTFSC Small Company Growth Portfolio	$ 4,098,887*	4,246,846*
WTFSC Large Company Value Portfolio	6,218,183*	6,152,509*
WTFSC International Growth Portfolio	3,070,408	3,437,046
WTFSC Strategic Balanced Portfolio	291,721	486,268
WTFSC Strategic Growth Fund	5,042,280*	5,374,090*
WTFSC S&P 500 Index Portfolio	9,577,405*	9,116,611*
WTFSC Small Company Value Portfolio	4,640,136*	4,894,093*
WTFSC Fixed Income Index Portfolio	4,176,413*	4,957,952*
WTFSC Inter Fixed Income Portfolio	6,549,120*	5,689,530*
WTFSC Mid Cap Growth Portfolio	1,827,227	1,777,007
WTFSC Total Return REIT Portfolio	3,120,360	2,859,906
WTFSC International Value Portfolio	5,844,216*	6,655,356*
Wilmington Trust Retirement and Institutional Services Company Collective Investment Trust III for MetLife Guaranteed Annuity Contract No. 25554	9,341,830*	5,902,355*
WTFSC Mid Cap Fundamental Value	3,426,196	3,600,715*
Total common and collective trust funds	67,224,382	65,150,284

(Continued)

		2011	2010
Mutual funds:			
Alger Health Sciences Fund A	$	564,223	402,280
Artio Global High Income Fund A		2,490,396	2,414,975
Aston/LakePartners Lasso Alt		516,443	—
BlackRock Inflation Protected Bond Fund A		1,695,661	815,197
Cohen & Steers International Realty Fund A		502,284	481,261
Diamond Hill Financial Long-Short Fund		—	370,617
AST Collective Emerging Markets Equity Index ETF		912,346	—
First Eagle Sogen Global		43,310	—
Invesco Developing Markets Fund A		1,359,991	1,725,102
Ivy Global Natural Resources Fund A		1,495,165	1,828,280
Ivy Science and Technology Fund A		528,646	584,334
Van Eck International Investors Gold Fund A		918,389	453,187
Total mutual funds		11,026,854	9,075,233
Total investments at fair value	$	78,251,236	74,225,517

* Individual investments that represent 5% or more of the Plan's net assets available for benefits.

The contract value of the Plan's investment in the Wilmington Trust Retirement and Institutional Services Company Collective Investment Trust III for MetLife Guaranteed Annuity Contract No. 25554 has also been certified as accurate and complete by the custodian (see note 5).

During 2011 and 2010, the Plan's investments (including gains and losses on investments bought and sold, as well as held, during the year) (depreciated) appreciated in value as follows:

		2011	2010
Common and collective trusts	$	249,157	7,690,878
Mutual funds		(2,295,972)	604,346
Total	$	(2,046,815)	8,295,224

As stated on the statements of changes in net assets available for benefits for the years ended December 31, 2011 and 2010, dividends amounted to $371,031 and $379,712, respectively.

(Continued)

(4) Fair Value of Financial Instruments

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

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

Level 2: Inputs to the valuation methodology include:

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value at December 31, 2011 and 2010. There were no changes in methodologies used at December 31, 2010 and 2011.

Common collective funds: The fair value of the funds is calculated by the issuer utilizing quoted market prices, most recent bid prices in the principal market in which the securities are normally traded, pricing services and dealer quotes. The fair value of the underlying wrapper contracts held by the fund are valued using a discounted cash flow model, which considers (i) recent fee bids as determined by recognized dealers, (ii) discount rate, and (iii) the duration of the underlying portfolio securities.

Mutual funds: Valued at the quoted net asset value (NAV) of shares held by the Plan at year-end.

The following table presents investments in common and collective trust funds and investments in mutual funds which are measured at fair value on a recurring basis as of December 31, 2011:

Description	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Significant unobservable inputs (Level 3)	Total
Common and collective trust funds	$ —	67,224,382	—	67,224,382
Mutual funds	11,026,854	—	—	11,026,854
Total assets	$ 11,026,854	67,224,382	—	78,251,236

The Plan does not have any material financial assets in a market that is not active.

The following table presents investments in common and collective trust funds and investments in mutual funds which are measured at fair value on a recurring basis as of December 31, 2010:

Description	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Significant unobservable inputs (Level 3)	Total
Common and collective trust funds	$ —	65,150,284	—	65,150,284
Mutual funds	9,075,233	—	—	9,075,233
Total assets	$ 9,075,233	65,150,284	—	74,225,517

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There were no changes in methodologies used at December 31, 2011 and 2010.

(5) Investments in Fully Benefit-Responsive Investment Contracts

Wilmington Trust Retirement and Institutional Services Company Collective Investment Trust III for MetLife Guaranteed Annuity Contract No. 25554 (the Fund) is a collective trust fund. The Fund's primary investment objective is to preserve invested principal while providing a competitive current rate of return. To accomplish the primary objective, the Fund invests primarily in investment contracts such as traditional guaranteed investment contracts (GICs) and enter into wrapper contracts (synthetic GICs). The Fund also

invests in separate account GICs. In a traditional GIC, the issuer of guaranteed investment contracts takes a deposit from the Funds and purchases investments that are held in the issuer's general account. The issuer is contractually obligated to repay the principal and a specified rate of interest guaranteed to the Fund.

In a synthetic GIC structure, the underlying investments are owned by the Funds and held in trust for plan participants. The Fund enters into wrapper contracts from high-quality insurance companies or banks that serve to substantially offset the price fluctuations in the underlying investments caused by movements in interest rates. Each wrapper contract obligates the wrapper provider to maintain the "contract value" of the underlying investments. The contract value is generally equal to the principal amounts invested in the underlying investments, plus interest accrued at a crediting rate established under the contract, less any adjustments for withdrawals (as specified in the wrapper agreement). Under the terms of the wrapper contract, the realized and unrealized gains and losses on the underlying investments are, in effect, amortized over the duration of the underlying investments, through adjustments to the future contract interest crediting rate (which is the rate earned by participants in the Fund for the underlying investments). The wrapper contract provides that the adjustments to the interest crediting rate will not result in a future interest crediting rate that is less than zero. This ensures that participants' principal and accrued interest will be protected.

In general, if the contract value of the wrapper agreement exceeds the market value of the underlying investments (including accrued interest), the wrapper provider becomes obligated to pay that difference to the Fund in the event that shareholder redemptions result in total contract liquidation. In the event that there are partial shareholder redemptions that would otherwise cause the contract's crediting rate to fall below zero percent, the wrapper provider is obligated to contribute to the Fund an amount necessary to maintain the contract's crediting rate at least zero percent. The circumstances under which payments are made and the timing of payments between the Fund and the wrapper provider may vary based on the terms of the wrapper contract.

Wrapper contracts' crediting interest rates are typically reset on a monthly or quarterly basis according to each contract. While there may be slight variations from one contract to another, most wrapper contracts use a formula that is based on the characteristics of the underlying fixed income portfolio. The crediting interest rate for a wrapper contract is determined by the issuer considering factors, including:

- the level of market interest rates
- the amount and timing of participant contributions, transfers, and withdrawals into/out of the wrapper contract
- the investment returns generated by the fixed income investments that back the wrapper contract
- the duration of the underlying fixed income investments backing the wrapper contract

Because changes in market interest rates affect the yield to maturity and the market value of the underlying investments, they can have a material impact on the wrapper contract's interest crediting rate. In addition, participant withdrawals and transfers from the Funds are paid at contract value but funded through the market value liquidation of the underlying investments, which also impacts the interest crediting rate. The resulting difference between the market value of the underlying investments relative to the wrapper contract value is presented as the "adjustment from fair value to contract value." If the adjustment from fair

value to contract value is positive for a given contract, this indicates that the wrapper contract value is greater than the market value of the underlying investments. The embedded market value losses will be amortized in the future through a lower interest crediting rate than would otherwise be the case. If the adjustment from fair value to contract value is negative, this indicates that the wrapper contract value is less than the market value of the underlying investments. The amortization of the embedded market value gains will cause the future interest crediting rate to be higher than it otherwise would have been.

The average yield earned by the Plan from the Wilmington Trust Retirement and Institutional Services Company Collective Investment Trust III for MetLife Guaranteed Annuity Contract No. 25554 was 6.45% and 5.42% for the years ended December 31, 2011 and 2010, respectively. The average yield earned by the Plan with an adjustment to reflect the actual interest rate credited to participants in the Plan was 2.96% and 3.13% for the years ended December 31, 2011 and 2010, respectively.

(6) Income Tax Status

The Plan Sponsor previously adopted a prototype nonstandardized profit sharing plan with a cash or deferral arrangement, which received a favorable opinion letter from the IRS on September 16, 2003, which stated that the Plan is acceptable under section 401(a) of the IRC. Effective October 1, 2007, the Plan adopted a new volume submitter cross-tested profit sharing 401(k) plan, which received a favorable opinion from the IRS on October 15, 2004, which stated that the Plan is acceptable under section 401(a) of the IRC. Although the Plan has been amended since receiving the opinion letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not 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 de-recognition of an asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

(7) Party-In-Interest Transactions

Certain Plan investments as of December 31, 2011 and 2010 are shares of common and collective trust funds managed by Wilmington. Wilmington was the trustee as defined by the Plan at December 31, 2011 and 2010, and, therefore, these transactions qualify as party-in-interest. The Plan Sponsor paid administrative expenses of $562,886 and $467,086 for 2011 and 2010, respectively, which included trustee and investment management costs for the collective trust payable to Wilmington. These expenses are paid by the Plan Sponsor and reimbursed by the Plan.

(8) Concentrations of Risks and Uncertainties

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

The Plan's exposure to a concentration of credit risk is limited by diversification of investments across all participant-directed fund elections. Additionally, the investments within each participant-directed fund election are further diversified into various financial instruments.

The Plan's investment in the Fund, by its nature, is subject to credit risk. If the contract issuers are unable to perform according to the provisions of the contracts, the value of the accounts could be substantially impaired. The Plan does not expect nonperformance by the contract issuers.

A portion of the underlying assets of the common and collective trust funds in which the Plan has invested may include derivative financial instruments. The Plan does not own any of these instruments directly. These instruments are used primarily to hedge exposures associated with currency exchange rates, interest rates, and other factors which may affect the value of securities.

The Plan may indirectly invest in securities with contractual cash flows, such as asset backed securities, collateralized mortgage obligations and commercial mortgage backed securities, including securities backed by subprime mortgage loans. The value, liquidity and related income of these securities are sensitive to changes in economic conditions, including real estate value, delinquencies or defaults, or both, and may be adversely affected by shifts in the market's perception of the issuers and changes in interest rates.

(9) Reconciliation to Form 5500

Certain financial information in the accompanying financial statements differs from the financial information on Form 5500 as of and for the years ended December 31, 2011 and 2010. The differences arise from the fact that the fully benefit-responsive investment contracts are reported at contract value on the Plan's financial statements, while the Form 5500 reports such contracts at fair value. The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 as of December 31, 2011 and 2010:

		2011	2010
Net assets available for benefits per the financial statements	$	79,306,407	75,698,003
Adjustment from fair value to contract value for fully benefit-responsive investment contracts		470,673	133,322
Net assets available for benefits per Form 5500	$	79,777,080	75,831,325

(Continued)

The following is a reconciliation of investment income per the financial statements to the Form 5500 for the years ended December 31, 2011 and 2010:

		2011	2010
Total investment (loss) income per the financial statements	$	(1,676,925)	8,675,066
Participant loan interest		51,122	57,709
Adjustment from fair value to contract value for fully benefit-responsive investment contracts – current year		470,673	133,322
Adjustment from fair value to contract value for fully benefit-responsive investment contract – prior year		(133,322)	751,648
Total investment income per Form 5500	$	(1,288,452)	9,617,745

(10) Subsequent Events

In September 2012, the Plan Sponsor received a letter from the IRS. The letter states that the Plan has been selected for examination for the year ended December 31, 2010.

Subsequent to December 31, 2011 and through October 10, 2012, the date through which management evaluated subsequent events and on which the financial statements were available for issuance, management has concluded that there were no subsequent events to be disclosed.

DUFF & PHELPS SAVINGS PLAN

Schedule H, line 4i – Schedule of Assets (Held at End of Year)

December 31, 2011

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment		(e) Current value
	Common and collective trust funds:			
*	WTFSC Small Company Growth Portfolio	Collective trust fund	31,413.909 units	$ 4,098,887
*	WTFSC Large Company Value Portfolio	Collective trust fund	78,287.038 units	6,218,183
*	WTFSC International Growth Portfolio	Collective trust fund	183,856.749 units	3,070,408
*	WTFSC Strategic Balanced Portfolio	Collective trust fund	6,541.572 units	291,721
*	WTFSC Strategic Growth Fund	Collective trust fund	286,021.895 units	5,042,280
*	WTFSC S&P 500 Index Portfolio	Collective trust fund	531,723.579 units	9,577,405
*	WTFSC Small Company Value Portfolio	Collective trust fund	106,043.285 units	4,640,136
*	WTFSC Fixed Income Index Portfolio	Collective trust fund	195,177.742 units	4,176,413
*	WTFSC Inter Fixed Income Portfolio	Collective trust fund	151,585.974 units	6,549,120
*	WTFSC Mid Cap Growth Portfolio	Collective trust fund	127,876.495 units	1,827,227
*	WTFSC Total Return REIT Portfolio	Collective trust fund	104,643.357 units	3,120,360
*	WTFSC International Value Portfolio	Collective trust fund	319,390.955 units	5,844,216
*	Wilmington Trust Retirement and Institutional Services Company Collective Investment Trust III for MetLife Guaranteed Annuity Contract No. 25554	Collective trust fund	548,828.679 units	9,341,830
*	WTFSC Mid Cap Fundamental Value	Collective trust fund	280,812.698 units	3,426,196
	Total common and collective trust funds			67,224,382
	Mutual funds:			
	Alger Health Sciences Fund A	Mutual fund	28,467.363 units	564,223
	Artio Global High Income Fund A	Mutual fund	255,687.498 units	2,490,396
	Aston/Lake Partners Lasso Alt	Mutual fund	43,803.493 units	516,443
	BlackRock Inflation Protected Bond Fund A	Mutual fund	146,683.502 units	1,695,661
	Cohen & Steers International Realty Fund A	Mutual fund	55,933.643 units	502,284
	AST Collective Emerging Markets Equity Index ETF	Mutual fund	9,949.245 units	912,346
	First Eagle Sogen Global	Mutual fund	959.880 units	43,310
	Invesco Developing Markets Fund A	Mutual fund	47,668.801 units	1,359,991
	Ivy Global Natural Resources Fund A	Mutual fund	88,158.317 units	1,495,165
	Ivy Science and Technology Fund A	Mutual fund	18,873.481 units	528,646
	Van Eck International Investors Gold Fund A	Mutual fund	48,133.598 units	918,389
	Total mutual funds			11,026,854
*	Participant loans	133 loans to 93 participants at various maturities with interest rates ranging from 4.25% to 8.75%		1,103,260
	Total			$ 79,354,496

* A party-in-interest as defined by ERISA. WTFSC is the Wilmington Trust Fiduciary Services Company.

See accompanying independent auditors' report

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan: DUFF & PHELPS SAVINGS PLAN

►

Employer Identification Number:► 36-4090666
For plan year (beginning/ending):► 01/01/2011 - 12/31/2011 Plan number:► 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	WT-FSC-FIXED INCOME INDEX	Collective Trust Fund		4,176,413
	WT-FSC-S&P 500 INDEX	Collective Trust Fund		9,577,405
	WT-FSC-INTERNATIONAL GROWTH	Collective Trust Fund		3,070,408
	WT-FSC-INTERNATIONAL VALUE	Collective Trust Fund		5,844,216
	WT-FSC-MID CAP FUNDAMENTAL	Collective Trust Fund		3,426,196
	WT-FSC-MID CAP GROWTH	Collective Trust Fund		1,827,227
	WT-FSC-SMALL COMPANY GROWTH	Collective Trust Fund		4,098,888
	WT-FSC-SMALL COMPANY VALUE	Collective Trust Fund		4,640,136
	WT-FSC-STRATEGIC BALANCED	Collective Trust Fund		291,721
	WT-FSC-LARGE COMPANY VALUE	Collective Trust Fund		6,218,183
	WT-FSC-INTERM FIXED INCOME	Collective Trust Fund		6,549,120
	WT-FSC-STRATEGIC GROWTH FUND	Collective Trust Fund		5,042,280
	WTRISC CIT III METLIFE GR ANN	Collective Trust Fund		8,871,157
	WT-FSC-TOTAL RETURN REIT	Collective Trust Fund		3,120,360
	EMERGING MARKETS ETF	Mutual Fund		912,345
	INVESCO DEVELOPING MARKETS	Mutual Fund		1,359,991
	IVY GLOBAL NAT RESOURCES A	Mutual Fund		1,495,165
	IVY SCIENCE & TECHNOLOGY FUND	Mutual Fund		528,646
	ALGER HEALTH SCIENCES	Mutual Fund		564,223
	COHEN & STEERS INTL REALTY	Mutual Fund		502,284
	ARTIO GLOBAL HIGH INCOME	Mutual Fund		2,490,396
	LOAN FUND	Various Maturity Dates not more than 30 years. Various Rates		1,103,260
	BLACKROCK INFLATION PROTECTED	Mutual Fund		1,695,661
	VAN ECK INTL INVESTORS GOLD A	Mutual Fund		918,389
	FIRST EAGLE GLOBAL	Mutual Fund		43,310
	ASTON/LAKE PRTNRS LASSO ALT	Mutual Fund		516,443