

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 <u>01/01/2011</u> and ending <u>12/31/2011</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan; or ☒ a single-employer plan; ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information
1a Name of plan <u>DHL GLOBAL MAIL 401(K) PLAN</u>	1b Three-digit plan number (PN) ► <u>001</u> 1c Effective date of plan <u>01/01/1991</u>
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>GLOBAL MAIL, INC.</u> <u>2700 S COMMERCE PKWY</u> <u>SUITE 400</u> <u>WESTON, FL 33331</u>	2b Employer Identification Number (EIN) <u>54-1427505</u> 2c Sponsor's telephone number <u>954-903-6420</u> 2d Business code (see instructions) <u>488510</u>

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

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

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/15/2012</u>	<u>ROBERT WHITAKER</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") GLOBAL MAIL, INC. 2700 S COMMERCE PKWY SUITE 400 WESTON, FL 33331	3b Administrator's EIN 54-1427505 3c Administrator's telephone number 954-903-6420
---	---

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	1178
---	----------	------

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	1291
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits.....	6c	16
d Subtotal. Add lines 6a , 6b , and 6c	6d	1307
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	0
f Total. Add lines 6d and 6e	6f	1307
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	1042
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

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

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

2E 2G 2J 2K 2T 3D

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

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor
--	---

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 DHL GLOBAL MAIL 401(K) PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 GLOBAL MAIL, INC.	D Employer Identification Number (EIN) 54-1427505	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier
HARTFORD LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0974148	88072	GA-823035	1042	01/01/2011	12/31/2011

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in item 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
62545	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WELLS FARGO INS SVCS USA INC **101 N CHERRY ST**
WINSTON SALEM, NC 27102

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
47031			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WELLS FARGO INS SVCS USA INC **101 N CHERRY ST**
WINSTON SALEM, NC 27102

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15514			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	0
5 Current value of plan's interest under this contract in separate accounts at year end	5	13354514

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	0
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	0
(4) Transferred from separate account	7c(4)	0
(5) Other (specify below)	7c(5)	0
▶		
(6) Total additions	7c(6)	0
d Total of balance and additions (add b and c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	0
(2) Administration charge made by carrier	7e(2)	0
(3) Transferred to separate account	7e(3)	0
(4) Other (specify below)	7e(4)	0
▶		
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract e(5) from d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve.....	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	
(4) Claims charged.....		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions.....	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs.....	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes.....	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges.....	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)	
(2) Claim reserves.....		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in c(2).).....		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier.....	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount.	10b	

Specify nature of costs ▶

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 <u>DHL GLOBAL MAIL 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GLOBAL MAIL, INC.</u>	D Employer Identification Number (EIN) <u>54-1427505</u>

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

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

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

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

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

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

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

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

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

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

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

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

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)

HARTFORD RETIREMENT SERVICES, LLC

26-1589907

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 23 37 38 54 55 59 60 62 63 64 65 66 99 50	N/A	7069	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(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?
25 99	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	400	Yes ☐ No ☒

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

MESIROW FINANCIAL INVESTMENT MGMT

36-3429599

(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?
49	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	25	Yes ☐ No ☒

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

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

MORNINGSTAR ASSOCIATES, LLC

36-4317381

(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?
49	N/A	0	Yes ☒ No ☐	Yes ☐ No ☒	44	Yes ☐ No ☒

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
HARTFORD RETIREMENT SERVICES, LLC	52 59 60 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.
SEE FEE AND COMPENSATION DISCLOSURE 06-0974148		SEE FEE AND COMPENSATION DISCLOSURE REPORT ATTACHMENT
(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	19 99 25	400
(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.
HARTFORD RETIREMENT SERVICES, LLC 06-0974148		SEE FEE AND COMPENSATION DISCLOSURE REPORT ATTACHMENT
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MESIROW FINANCIAL INVESTMENT MGMT	49	25
(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.
HARTFORD RETIREMENT SERVICES, LLC 06-0974148		SEE FEE AND COMPENSATION DISCLOSURE REPORT ATTACHMENT

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
MORNINGSTAR ASSOCIATES, LLC	49	44
(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.	
HARTFORD LIFE INSURANCE COMPANY 06-0974148	SEE FEE AND COMPENSATION DISCLOSURE REPORT ATTACHMENT	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

a Name: BERKOWITZ DICK POLLACK & BRANT, LLP	b EIN: 59-2742314
c Position: AUDITOR	
d Address: 200 S BISCAYNE BOULEVARD MIAMI, FL 33131-2310	e Telephone: 305-379-7000

Explanation: MANAGEMENT DECISION

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 DHL GLOBAL MAIL 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 GLOBAL MAIL, INC.	D Employer Identification Number (EIN) 54-1427505	

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: SEPARATE ACCOUNT 401

b Name of sponsor of entity listed in (a): HARTFORD LIFE INSURANCE COMPANY

c EIN-PN 06-0974148-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13354514
--	--	--

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning 01/01/2011 and ending 12/31/2011		
A Name of plan DHL GLOBAL MAIL 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GLOBAL MAIL, INC.	D Employer Identification Number (EIN) 54-1427505	

	Part I Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
1	Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
	Assets			
a	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)		
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)		
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
	(2) U.S. Government securities.....	1c(2)		
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)		
	(B) All other.....	1c(3)(B)		
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)		
	(B) Common	1c(4)(B)		
	(5) Partnership/joint venture interests	1c(5)		
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)	362479	395425
	(9) Value of interest in common/collective trusts.....	1c(9)	2527808	2297012
	(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)	12027397	11057502
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	
	(15) Other	1c(15)	0	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	
(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	14917684	13749939

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	14917684	13749939
---	-----------	----------	----------

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)	1138	
(B) Participants	2a(1)(B)	1792747	
(C) Others (including rollovers)	2a(1)(C)	54479	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1848364
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)	19005	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		19005
(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)	364396	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		364396
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-805226
(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)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1426539

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2587689	
(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)		2587689
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)	6595	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		6595
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2594284

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-1167745
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: CROWE HORWATH LLP

(2) EIN: 35-0912680

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
e Was this plan covered by a fidelity bond?.....	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.).....		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....		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 <u>DHL GLOBAL MAIL 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GLOBAL MAIL, INC.</u>	D Employer Identification Number (EIN) <u>54-1427505</u>

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>06-0974148</u>	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (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): _____

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

CONTENTS

REPORT OF INDEPENDENT AUDITORS.....	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	2
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS.....	3
NOTES TO FINANCIAL STATEMENTS	4
SUPPLEMENTAL SCHEDULE	
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR).....	11

REPORT OF INDEPENDENT AUDITORS

Employee Benefits Committee
DHL Global Mail 401(K) Plan
Weston, Florida

We were engaged to audit the financial statements and supplemental schedule of the DHL Global Mail 401(K) Plan ("Plan") as of December 31, 2011 and for the year then ended, as listed in the accompanying contents page. These 2011 financial statements and supplemental schedule are the responsibility of the Plan's management. The statement of net assets available for benefits of the Plan as of December 31, 2010 was reported on by other auditors whose report dated October 13, 2011, disclaimed an opinion for the same reasons described in the following paragraph.

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 4, which was certified by Hartford Life Insurance Company, the trustee of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the trustee as of December 31, 2011 and for the year then ended that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedule as a whole. The information included in the supplemental schedule is presented for the purpose of additional analysis and is not a required part of the 2011 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 2011 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.


Crowe Horwath LLP

Oak Brook, Illinois
October 12, 2012

DHL GLOBAL MAIL 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value (Note 4)		
Pooled separate account	\$ 13,404,177	\$ 14,594,264
Notes receivable from participants	<u>395,425</u>	<u>362,479</u>
Total assets	<u>13,799,602</u>	<u>14,956,743</u>
Liabilities		
Excess contributions payable	<u>172,056</u>	<u>197,755</u>
Total liabilities	<u>172,056</u>	<u>197,755</u>
Net assets, reflecting all investments at fair value	<u>13,627,546</u>	<u>14,758,988</u>
Adjustment from fair value to contract value for fully benefit-responsive investment contracts (Note 2)	<u>(49,663)</u>	<u>(39,059)</u>
Net assets available for benefits	<u>\$ 13,577,883</u>	<u>\$ 14,719,929</u>

See accompanying notes to financial statements.

DHL GLOBAL MAIL 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2011

Additions to net assets attributable to:

Investment income, excluding net depreciation in fair value of investments (Note 4)	
Interest and dividends	\$ 447,256

Interest income on notes receivable from participants	19,856
---	--------

Contributions	
Participants	1,819,584
Rollover	<u>54,479</u>
Total contributions	<u>1,874,063</u>

Total additions	2,341,175
-----------------	-----------

Deductions from net assets attributable to:

Net depreciation in fair value of investments (Note 4)	888,937
Benefits paid to participants	2,587,689
Administrative expenses	<u>6,595</u>
Total deductions	<u>3,483,221</u>

Net decrease	(1,142,046)
---------------------	-------------

Net assets available for benefits

Beginning of year	<u>14,719,929</u>
-------------------	-------------------

End of Year	<u>\$ 13,577,883</u>
-------------	----------------------

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN

The following description of the DHL Global Mail 401(K) Plan (the "Plan") provides only general information of plan provisions in effect for the plan year ended December 31, 2011. Effective January 1, 2012 the Plan was amended and various plan provisions were revised. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of DHL Global Mail, Inc. (the "Company") who are age twenty-one years or older and have completed 60 days of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions: Each year, participants may elect to have the Company contribute a portion of their total annual eligible compensation to the Plan ("elective deferrals"). Effective for payroll periods on or after October 1, 2010, participants may elect to make after-tax contributions to the Plan's Roth investment option, as defined in the Plan document. Effective January 1, 2007, eligible employees are automatically enrolled for a 3% deferral of their total annual compensation unless they notify the Plan administrator that they do not wish to participate in the Plan. For any calendar year, a participant's elective deferrals may not exceed the lesser of a specific dollar amount (\$16,500 in 2011) as determined by the Internal Revenue Service ("IRS"), or 100% of the participant's eligible annual compensation. For participants fifty years of age or older by December 31, 2011, an additional \$5,500 contribution is allowed in 2011. Participants may contribute amounts representing distributions from other qualified plans. The Company may make discretionary employer contributions, in the form of matching contributions, profit sharing contributions and/or qualified non-elective contributions, at the option of the Company's Board of Directors. The Company did not elect to make discretionary employer contributions for the year ended December 31, 2011.

Investment Options: Upon enrollment in the Plan, a participant may direct their contributions plus actual earnings thereon to be invested in any of the investment options offered by the Plan. Participants may change their investment options daily.

Participant Accounts: Each participant's account is credited with their voluntary contributions and allocations of (a) the Company's discretionary matching contributions (b) the Company's discretionary profit sharing contributions (c) the Company's qualified non-elective contributions and (d) Plan earnings (losses) and is charged with his or her withdrawals and an allocation of administrative expenses.. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Employer discretionary matching contributions, discretionary profit sharing contributions and qualified non-elective contributions vest based on years of continuous service in accordance with the following schedule:

<u>Years of Continuous Service</u>	<u>Vesting Percentage</u>
1	33%
2	66%
3	100%

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Notes receivable from Participants: Participants may borrow from their Plan accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. A participant may only have one general purpose loan and one residential loan outstanding at a time. Note terms range from one to five years, except for the purchase of a primary residence for which the term may be longer. The notes are secured by the participant's account and bear interest at a rate commensurate with local prevailing rates at the time the note is approved. Principal and interest is paid by the participant through bi-weekly payroll deductions.

Payment of Benefits: Upon termination of service due to death, disability or retirement, a participant becomes 100% vested and may elect to receive an amount equal to the value of the participant's interest in his or her account in either a lump-sum or installment payments. For terminations of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts: Forfeitures relating to the non-vested portion of a terminated participant's employer contributions are retained by the Plan and used first to pay administrative expenses and then to reduce future Company contributions. In 2011, approximately \$500 in forfeitures was used to pay administrative expenses. The Plan's forfeiture account balances, which are included in investments in the Statements of Net Assets Available for Benefits as of December 31, 2011 and 2010, were approximately \$21,000 and \$11,000, respectively.

Administrative Expenses: Loan origination fees associated with notes receivable from participants and the Plan's record keeping and trustee fees are paid by the Plan and are reflected in the financial statements as administrative expenses of the Plan. Investment management fees are charged to the Plan as a reduction of investment return and included in the investment income (loss) reported by the Plan. All other expenses of the Plan are paid by the Company. The Company pays some expenses related to professional fees.

NOTE 2 – SUMMARY OF SIGNICANT ACCOUNTING POLICIES

Basis of Accounting: The accounting principles and procedures followed by the Plan conform to accounting principles generally accepted in the United States of America. The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results could differ from those estimates.

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the plan's gains and losses on investments bought and sold as well as held during the year.

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SUMMARY OF SIGNICANT ACCOUNTING POLICIES (Continued)

Fully Benefit-Responsive Investment Contracts: While Plan investments are presented at fair value in the statement of net assets available for benefits, any material difference between the fair value of the Plan's direct and indirect interest in fully benefit-responsive investment contracts and their contract value is to be presented as a separate adjustment line in the statements of net assets available for benefits because contract value remains the relevant measurement attribute for that portion of the Plan's net assets available for benefits. Contract value represents contributions made to a contract, plus earnings, less participant withdrawals and administrative expenses. Participants in fully benefit-responsive contracts may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The Plan holds indirect interests in such contract through its investment in stable value funds.

Risks and Uncertainties: The Plan holds various investments. Investments are exposed to various risks such as interest rate, market, liquidity and credit risks. Due to the level of risk associated with certain investment and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

Payment of Benefits: Plan benefits are recorded when paid.

Excess Contributions: Refunds of excess participant deferral contributions may be required to satisfy the relevant nondiscrimination provisions of the Plan. Such refunds are accrued as a liability and reduction in contributions in the Plan year in which the excess deferrals were made to the Plan.

Reclassification: Certain prior year amounts have been reclassified to conform to the current year presentation.

NOTE 3 - PLAN TERMINATION

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. In the event of plan termination, participants would become 100% vested in their employer contributions and earnings thereon.

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income (loss) and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by, Hartford Life Insurance Company, the trustee of the Plan. This information has not been audited by independent accountants.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS (Continued)

The following presents investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	<u>2011</u>	<u>2010</u>
Hartford Life Insurance Company Separate Account 401	13,399,091	14,594,264
Sub-accounts of Hartford Life Insurance Company		
Separate Account 401		
PIMCO Total Return	\$ 948,880	\$ 911,255
Blackrock Lifepath 2020	1,234,308	985,045
Blackrock Lifepath 2030	703,617	675,395*
Thornburg International Value	718,776	820,669
Ridgeworth Mid Cap Value	1,012,733	1,124,341
American Fund Growth Fund	934,163	1,254,168
Davis New York Venture Fund	629,794*	774,717
Goldman Sachs Growth Opportunity Fund	623,999*	805,558
Invesco Stable Value Trust	1,740,374	1,845,961

*Amounts did not meet 5 percent, included for consistency purposes.

During the year ended December 31, 2011, the Plan's investments in pooled separate accounts (including investments bought, sold, and held during the year) depreciated in value by \$888,937.

Dividend and interest income on investments of \$447,256 was earned for the year ended December 31, 2011. Interest income from notes receivable of \$19,856 was earned for the year ended December 31, 2011.

NOTE 5 – FAIR VALUE MEASUREMENT

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (level 1 measurements) and gives the lowest priority to unobservable inputs (level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

Pooled separate accounts other than stable value funds: Participants may direct the investment of their accounts into various sub-accounts of Hartford Life Insurance Company Separate Account 401, each of which is a pooled separate account of Hartford Life Insurance Company. The fair values of participation units held in the Separate Account 401 and each of the sub-accounts of Separate Account 401, other than stable value funds, are based on the net asset values reported by the fund managers as of the financial statement dates and recent transaction prices (level 2 inputs). Each of the separate accounts of Separate Account 401 invests in a single, open-ended mutual fund which is generally identified in the name of the pooled separate account. The investment strategies of these pooled separate accounts are consistent with each of the mutual funds identified in the name of the fund. The table below presents the fair values of the various sub-accounts of Separate Account 401 held by the Plan, classified by the stated investment strategies of the underlying mutual funds. Each pooled separate account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's net asset value per unit.

Stable Value Funds: The fair values of participation units in the stable value fund are based upon the net asset values of such funds, after adjustments to reflect all fund investments at fair value, including direct and indirect interests in fully benefit-responsive contracts, as reported in the audited financial statements of the fund (Level 2 inputs). The funds invests in collective trusts, guaranteed investment contracts and readily marketable assets, with the objective of providing stability of investment return, preservation of capital and liquidity to pay plan benefits of its retirement plan investors. The fund provides for daily redemptions by the Plan at reported net asset values per share, with no advance notice requirement.

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.

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

Investments measured at fair value on a recurring basis are summarized below:

		Fair Value Measurements at December 31, 2011 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,619,895
International equity funds		-	982,935
US large cap funds		-	2,425,208
US mid cap funds		-	1,905,791
US small cap funds		-	742,916
Balanced funds		-	809,997
Real estate fund		-	137,804
Life cycle funds 2020 – 2030		-	1,937,925
Life cycle funds 2040 – 2050		-	494,501
Stable value funds		-	2,347,205

There were no significant transfers between Level 1 and Level 2 during 2011

		Fair Value Measurements at December 31, 2010 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,542,111
International equity funds		-	1,222,994
US large cap funds		-	2,872,761
US mid cap funds		-	2,190,901
US small cap funds		-	913,399
Balanced funds		-	1,132,513
Real estate fund		-	93,637
Life cycle funds 2020 – 2030		-	1,660,440
Life cycle funds 2040 – 2050		-	398,641
Stable value funds		-	2,566,867

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 - TAX STATUS

The Internal Revenue Service has issued an opinion letter dated March 31, 2008 indicating that the prototype adopted by the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). Although the Plan has been amended from the original prototype document, the plan sponsor believes that the Plan is currently being operated in accordance with the IRC.

NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain Plan investments are a pooled separate accounts managed by The Hartford, and affiliate of the plan trustee. This investment qualifies as party-in-interest investment. Notes receivable from participants and investment fees paid to Hartford also reflect party-in-interest transactions.

Certain professional fees related to the administration of the Plan were paid by the Company on behalf of the Plan. Fees charged by the trustee for plan administration and notes receivable from participants processing fees totaled \$6,595 for the year ended December 31, 2011.

NOTE 8 - RECONCILIATION TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to the Form 5500:

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$ 13,577,883	\$ 14,719,929
Excess contributions payable accrued on the financial statements	<u>172,056</u>	<u>197,755</u>
Net assets per the Form 5500	<u>\$ 13,749,939</u>	<u>\$ 14,917,684</u>

The following is a reconciliation of the change in net assets available for benefits for the year ended December 31, 2011 per the financial statements to net loss reported in the 2011 Form 5500:

Decrease in net assets available for benefits per the financial statements	\$ (1,142,046)
Less: Excess contributions payable at December 31, 2010	(197,755)
Add: Excess contributions payable at December 31, 2011	<u>172,056</u>
Net loss per the Form 5500	<u>\$ (1,167,745)</u>

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 9 – SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 12, 2012, which is the date the financial statements were available to be issued.

Effective January 1, 2012, the Plan changed trustees from Hartford Life Insurance Company to Fidelity Management Trust Company, changed the Plan sponsor from DHL Global Mail, Inc. to DPWN Holdings (USA), Inc., and amended the Plan to change various plan provisions, including but not limited to the removal of the age and service requirements to participant in the plan, change in entry date to monthly, and participants are now 10 percent vested after two years of service..

SUPPLEMENTAL SCHEDULE

DHL GLOBAL MAIL 401(K) PLAN
SCHEDULE H, LINE 4i, SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2011

Plan Sponsor:	DHL Global Mail, Inc.
Employer Identification Number:	54-1427505
Plan Number:	001

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, <u>Collateral, Par or Maturity Value</u> Separate Account , Sub-accounts	<u>Cost</u>	<u>Current Value</u>
	PIMCO	PIMCO Total Return	**	\$ 948,880
	American Funds	American Funds Income Builder	**	201,444
	Blackrock	Blackrock Lifepath 2020	**	1,234,308
	Blackrock	Blackrock Lifepath 2030	**	703,617
	Blackrock	Blackrock Lifepath 2040	**	481,955
	Blackrock	Blackrock Lifepath 2050	**	12,546
	Blackrock	Blackrock Lifepath Retirement	**	86,839
	Invesco	Invesco Real Estate	**	137,804
	American Funds	American Funds World	**	98,970
	Thornburg	Thornburg International Value	**	718,776
	Franklin Templeton	Franklin Small Cap Value	**	80,196
	Ridgeworth	Ridgeworth Small Cap Value	**	439,530
	MFS	MFS International Value	**	42,569
	Ridgeworth	Ridgeworth Mid Cap Value	**	1,012,733
	American Funds	American Fund Growth Fund	**	934,163
	Invesco	Invesco Van Kampen Growth and Income	**	644,840
	Davis NY	Davis NY Venture	**	629,794
*	The Hartford	Hartford Index HLS	**	216,411
	Goldman Sachs	Goldman Sachs Growth Opportunity Fund	**	623,999
	Goldman Sachs	Goldman Sachs Mid Cap Value	**	5,862
	PIMCO	PIMCO High Yield Fund	**	671,015
	Nuveen Investments	Nuveen Mid Cap Index	**	263,197
	Blackrock	Blackrock Small Cap Growth II	**	223,190
	Janus	Janus Overseas	**	221,590
	Janus	Janus Balanced	**	422,744
	Invesco***	Invesco Stable Value Trust	**	1,687,899
	SEI***	SEI Stable Value Fund	**	609,643
		Total Interest in Separate Account		13,354,514
	Notes receivable from participants	Interest rates ranging from 4.25% to 9.25%		395,425
				<u>\$ 13,749,939</u>

* Denotes party-in-interest

** Assets are participant directed investments; therefore cost information is not required.

***The current value for this fund represents contract value.

See Report of Independent Auditors.

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

CONTENTS

REPORT OF INDEPENDENT AUDITORS.....	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	2
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS.....	3
NOTES TO FINANCIAL STATEMENTS	4
SUPPLEMENTAL SCHEDULE	
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR).....	11

REPORT OF INDEPENDENT AUDITORS

Employee Benefits Committee
DHL Global Mail 401(K) Plan
Weston, Florida

We were engaged to audit the financial statements and supplemental schedule of the DHL Global Mail 401(K) Plan ("Plan") as of December 31, 2011 and for the year then ended, as listed in the accompanying contents page. These 2011 financial statements and supplemental schedule are the responsibility of the Plan's management. The statement of net assets available for benefits of the Plan as of December 31, 2010 was reported on by other auditors whose report dated October 13, 2011, disclaimed an opinion for the same reasons described in the following paragraph.

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 4, which was certified by Hartford Life Insurance Company, the trustee of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the trustee as of December 31, 2011 and for the year then ended that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedule as a whole. The information included in the supplemental schedule is presented for the purpose of additional analysis and is not a required part of the 2011 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 2011 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.


Crowe Horwath LLP

Oak Brook, Illinois
October 12, 2012

DHL GLOBAL MAIL 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value (Note 4)		
Pooled separate account	\$ 13,404,177	\$ 14,594,264
Notes receivable from participants	<u>395,425</u>	<u>362,479</u>
Total assets	<u>13,799,602</u>	<u>14,956,743</u>
Liabilities		
Excess contributions payable	<u>172,056</u>	<u>197,755</u>
Total liabilities	<u>172,056</u>	<u>197,755</u>
Net assets, reflecting all investments at fair value	<u>13,627,546</u>	<u>14,758,988</u>
Adjustment from fair value to contract value for fully benefit-responsive investment contracts (Note 2)	<u>(49,663)</u>	<u>(39,059)</u>
Net assets available for benefits	<u>\$ 13,577,883</u>	<u>\$ 14,719,929</u>

See accompanying notes to financial statements.

DHL GLOBAL MAIL 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2011

Additions to net assets attributable to:

Investment income, excluding net depreciation in fair value of investments (Note 4)	
Interest and dividends	\$ 447,256

Interest income on notes receivable from participants	19,856
---	--------

Contributions	
Participants	1,819,584
Rollover	<u>54,479</u>
Total contributions	<u>1,874,063</u>

Total additions	2,341,175
-----------------	-----------

Deductions from net assets attributable to:

Net depreciation in fair value of investments (Note 4)	888,937
Benefits paid to participants	2,587,689
Administrative expenses	<u>6,595</u>
Total deductions	<u>3,483,221</u>

Net decrease	(1,142,046)
---------------------	-------------

Net assets available for benefits

Beginning of year	<u>14,719,929</u>
-------------------	-------------------

End of Year	<u>\$ 13,577,883</u>
-------------	----------------------

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN

The following description of the DHL Global Mail 401(K) Plan (the "Plan") provides only general information of plan provisions in effect for the plan year ended December 31, 2011. Effective January 1, 2012 the Plan was amended and various plan provisions were revised. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of DHL Global Mail, Inc. (the "Company") who are age twenty-one years or older and have completed 60 days of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions: Each year, participants may elect to have the Company contribute a portion of their total annual eligible compensation to the Plan ("elective deferrals"). Effective for payroll periods on or after October 1, 2010, participants may elect to make after-tax contributions to the Plan's Roth investment option, as defined in the Plan document. Effective January 1, 2007, eligible employees are automatically enrolled for a 3% deferral of their total annual compensation unless they notify the Plan administrator that they do not wish to participate in the Plan. For any calendar year, a participant's elective deferrals may not exceed the lesser of a specific dollar amount (\$16,500 in 2011) as determined by the Internal Revenue Service ("IRS"), or 100% of the participant's eligible annual compensation. For participants fifty years of age or older by December 31, 2011, an additional \$5,500 contribution is allowed in 2011. Participants may contribute amounts representing distributions from other qualified plans. The Company may make discretionary employer contributions, in the form of matching contributions, profit sharing contributions and/or qualified non-elective contributions, at the option of the Company's Board of Directors. The Company did not elect to make discretionary employer contributions for the year ended December 31, 2011.

Investment Options: Upon enrollment in the Plan, a participant may direct their contributions plus actual earnings thereon to be invested in any of the investment options offered by the Plan. Participants may change their investment options daily.

Participant Accounts: Each participant's account is credited with their voluntary contributions and allocations of (a) the Company's discretionary matching contributions (b) the Company's discretionary profit sharing contributions (c) the Company's qualified non-elective contributions and (d) Plan earnings (losses) and is charged with his or her withdrawals and an allocation of administrative expenses.. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Employer discretionary matching contributions, discretionary profit sharing contributions and qualified non-elective contributions vest based on years of continuous service in accordance with the following schedule:

<u>Years of Continuous Service</u>	<u>Vesting Percentage</u>
1	33%
2	66%
3	100%

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Notes receivable from Participants: Participants may borrow from their Plan accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. A participant may only have one general purpose loan and one residential loan outstanding at a time. Note terms range from one to five years, except for the purchase of a primary residence for which the term may be longer. The notes are secured by the participant's account and bear interest at a rate commensurate with local prevailing rates at the time the note is approved. Principal and interest is paid by the participant through bi-weekly payroll deductions.

Payment of Benefits: Upon termination of service due to death, disability or retirement, a participant becomes 100% vested and may elect to receive an amount equal to the value of the participant's interest in his or her account in either a lump-sum or installment payments. For terminations of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts: Forfeitures relating to the non-vested portion of a terminated participant's employer contributions are retained by the Plan and used first to pay administrative expenses and then to reduce future Company contributions. In 2011, approximately \$500 in forfeitures was used to pay administrative expenses. The Plan's forfeiture account balances, which are included in investments in the Statements of Net Assets Available for Benefits as of December 31, 2011 and 2010, were approximately \$21,000 and \$11,000, respectively.

Administrative Expenses: Loan origination fees associated with notes receivable from participants and the Plan's record keeping and trustee fees are paid by the Plan and are reflected in the financial statements as administrative expenses of the Plan. Investment management fees are charged to the Plan as a reduction of investment return and included in the investment income (loss) reported by the Plan. All other expenses of the Plan are paid by the Company. The Company pays some expenses related to professional fees.

NOTE 2 - SUMMARY OF SIGNICANT ACCOUNTING POLICIES

Basis of Accounting: The accounting principles and procedures followed by the Plan conform to accounting principles generally accepted in the United States of America. The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results could differ from those estimates.

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the plan's gains and losses on investments bought and sold as well as held during the year.

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SUMMARY OF SIGNICANT ACCOUNTING POLICIES (Continued)

Fully Benefit-Responsive Investment Contracts: While Plan investments are presented at fair value in the statement of net assets available for benefits, any material difference between the fair value of the Plan's direct and indirect interest in fully benefit-responsive investment contracts and their contract value is to be presented as a separate adjustment line in the statements of net assets available for benefits because contract value remains the relevant measurement attribute for that portion of the Plan's net assets available for benefits. Contract value represents contributions made to a contract, plus earnings, less participant withdrawals and administrative expenses. Participants in fully benefit-responsive contracts may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The Plan holds indirect interests in such contract through its investment in stable value funds.

Risks and Uncertainties: The Plan holds various investments. Investments are exposed to various risks such as interest rate, market, liquidity and credit risks. Due to the level of risk associated with certain investment and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

Payment of Benefits: Plan benefits are recorded when paid.

Excess Contributions: Refunds of excess participant deferral contributions may be required to satisfy the relevant nondiscrimination provisions of the Plan. Such refunds are accrued as a liability and reduction in contributions in the Plan year in which the excess deferrals were made to the Plan.

Reclassification: Certain prior year amounts have been reclassified to conform to the current year presentation.

NOTE 3 - PLAN TERMINATION

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. In the event of plan termination, participants would become 100% vested in their employer contributions and earnings thereon.

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income (loss) and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by, Hartford Life Insurance Company, the trustee of the Plan. This information has not been audited by independent accountants.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS (Continued)

The following presents investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	<u>2011</u>	<u>2010</u>
Hartford Life Insurance Company Separate Account 401	13,399,091	14,594,264
Sub-accounts of Hartford Life Insurance Company		
Separate Account 401		
PIMCO Total Return	\$ 948,880	\$ 911,255
Blackrock Lifepath 2020	1,234,308	985,045
Blackrock Lifepath 2030	703,617	675,395*
Thornburg International Value	718,776	820,669
Ridgeworth Mid Cap Value	1,012,733	1,124,341
American Fund Growth Fund	934,163	1,254,168
Davis New York Venture Fund	629,794*	774,717
Goldman Sachs Growth Opportunity Fund	623,999*	805,558
Invesco Stable Value Trust	1,740,374	1,845,961

*Amounts did not meet 5 percent, included for consistency purposes.

During the year ended December 31, 2011, the Plan's investments in pooled separate accounts (including investments bought, sold, and held during the year) depreciated in value by \$888,937.

Dividend and interest income on investments of \$447,256 was earned for the year ended December 31, 2011. Interest income from notes receivable of \$19,856 was earned for the year ended December 31, 2011.

NOTE 5 – FAIR VALUE MEASUREMENT

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (level 1 measurements) and gives the lowest priority to unobservable inputs (level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

Pooled separate accounts other than stable value funds: Participants may direct the investment of their accounts into various sub-accounts of Hartford Life Insurance Company Separate Account 401, each of which is a pooled separate account of Hartford Life Insurance Company. The fair values of participation units held in the Separate Account 401 and each of the sub-accounts of Separate Account 401, other than stable value funds, are based on the net asset values reported by the fund managers as of the financial statement dates and recent transaction prices (level 2 inputs). Each of the separate accounts of Separate Account 401 invests in a single, open-ended mutual fund which is generally identified in the name of the pooled separate account. The investment strategies of these pooled separate accounts are consistent with each of the mutual funds identified in the name of the fund. The table below presents the fair values of the various sub-accounts of Separate Account 401 held by the Plan, classified by the stated investment strategies of the underlying mutual funds. Each pooled separate account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's net asset value per unit.

Stable Value Funds: The fair values of participation units in the stable value fund are based upon the net asset values of such funds, after adjustments to reflect all fund investments at fair value, including direct and indirect interests in fully benefit-responsive contracts, as reported in the audited financial statements of the fund (Level 2 inputs). The funds invests in collective trusts, guaranteed investment contracts and readily marketable assets, with the objective of providing stability of investment return, preservation of capital and liquidity to pay plan benefits of its retirement plan investors. The fund provides for daily redemptions by the Plan at reported net asset values per share, with no advance notice requirement.

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.

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

Investments measured at fair value on a recurring basis are summarized below:

		Fair Value Measurements at December 31, 2011 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,619,895
International equity funds		-	982,935
US large cap funds		-	2,425,208
US mid cap funds		-	1,905,791
US small cap funds		-	742,916
Balanced funds		-	809,997
Real estate fund		-	137,804
Life cycle funds 2020 – 2030		-	1,937,925
Life cycle funds 2040 – 2050		-	494,501
Stable value funds		-	2,347,205

There were no significant transfers between Level 1 and Level 2 during 2011

		Fair Value Measurements at December 31, 2010 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,542,111
International equity funds		-	1,222,994
US large cap funds		-	2,872,761
US mid cap funds		-	2,190,901
US small cap funds		-	913,399
Balanced funds		-	1,132,513
Real estate fund		-	93,637
Life cycle funds 2020 – 2030		-	1,660,440
Life cycle funds 2040 – 2050		-	398,641
Stable value funds		-	2,566,867

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 - TAX STATUS

The Internal Revenue Service has issued an opinion letter dated March 31, 2008 indicating that the prototype adopted by the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). Although the Plan has been amended from the original prototype document, the plan sponsor believes that the Plan is currently being operated in accordance with the IRC.

NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain Plan investments are a pooled separate accounts managed by The Hartford, and affiliate of the plan trustee. This investment qualifies as party-in-interest investment. Notes receivable from participants and investment fees paid to Hartford also reflect party-in-interest transactions.

Certain professional fees related to the administration of the Plan were paid by the Company on behalf of the Plan. Fees charged by the trustee for plan administration and notes receivable from participants processing fees totaled \$6,595 for the year ended December 31, 2011.

NOTE 8 - RECONCILIATION TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to the Form 5500:

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$ 13,577,883	\$ 14,719,929
Excess contributions payable accrued on the financial statements	<u>172,056</u>	<u>197,755</u>
Net assets per the Form 5500	<u>\$ 13,749,939</u>	<u>\$ 14,917,684</u>

The following is a reconciliation of the change in net assets available for benefits for the year ended December 31, 2011 per the financial statements to net loss reported in the 2011 Form 5500:

Decrease in net assets available for benefits per the financial statements	\$ (1,142,046)
Less: Excess contributions payable at December 31, 2010	(197,755)
Add: Excess contributions payable at December 31, 2011	<u>172,056</u>
Net loss per the Form 5500	<u>\$ (1,167,745)</u>

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 9 – SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 12, 2012, which is the date the financial statements were available to be issued.

Effective January 1, 2012, the Plan changed trustees from Hartford Life Insurance Company to Fidelity Management Trust Company, changed the Plan sponsor from DHL Global Mail, Inc. to DPWN Holdings (USA), Inc., and amended the Plan to change various plan provisions, including but not limited to the removal of the age and service requirements to participant in the plan, change in entry date to monthly, and participants are now 10 percent vested after two years of service..

SUPPLEMENTAL SCHEDULE

DHL GLOBAL MAIL 401(K) PLAN
SCHEDULE H, LINE 4i, SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2011

Plan Sponsor:	DHL Global Mail, Inc.
Employer Identification Number:	54-1427505
Plan Number:	001

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, <u>Collateral, Par or Maturity Value</u> Separate Account , Sub-accounts	<u>Cost</u>	<u>Current Value</u>
	PIMCO	PIMCO Total Return	**	\$ 948,880
	American Funds	American Funds Income Builder	**	201,444
	Blackrock	Blackrock Lifepath 2020	**	1,234,308
	Blackrock	Blackrock Lifepath 2030	**	703,617
	Blackrock	Blackrock Lifepath 2040	**	481,955
	Blackrock	Blackrock Lifepath 2050	**	12,546
	Blackrock	Blackrock Lifepath Retirement	**	86,839
	Invesco	Invesco Real Estate	**	137,804
	American Funds	American Funds World	**	98,970
	Thornburg	Thornburg International Value	**	718,776
	Franklin Templeton	Franklin Small Cap Value	**	80,196
	Ridgeworth	Ridgeworth Small Cap Value	**	439,530
	MFS	MFS International Value	**	42,569
	Ridgeworth	Ridgeworth Mid Cap Value	**	1,012,733
	American Funds	American Fund Growth Fund	**	934,163
	Invesco	Invesco Van Kampen Growth and Income	**	644,840
	Davis NY	Davis NY Venture	**	629,794
*	The Hartford	Hartford Index HLS	**	216,411
	Goldman Sachs	Goldman Sachs Growth Opportunity Fund	**	623,999
	Goldman Sachs	Goldman Sachs Mid Cap Value	**	5,862
	PIMCO	PIMCO High Yield Fund	**	671,015
	Nuveen Investments	Nuveen Mid Cap Index	**	263,197
	Blackrock	Blackrock Small Cap Growth II	**	223,190
	Janus	Janus Overseas	**	221,590
	Janus	Janus Balanced	**	422,744
	Invesco***	Invesco Stable Value Trust	**	1,687,899
	SEI***	SEI Stable Value Fund	**	609,643
		Total Interest in Separate Account		13,354,514
	Notes receivable from participants	Interest rates ranging from 4.25% to 9.25%		395,425
				<u>\$ 13,749,939</u>

* Denotes party-in-interest

** Assets are participant directed investments; therefore cost information is not required.

***The current value for this fund represents contract value.

See Report of Independent Auditors.

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

DHL GLOBAL MAIL 401(K) PLAN
Weston, Florida

FINANCIAL STATEMENTS
December 31, 2011 and 2010

CONTENTS

REPORT OF INDEPENDENT AUDITORS.....	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	2
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS.....	3
NOTES TO FINANCIAL STATEMENTS	4
SUPPLEMENTAL SCHEDULE	
SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR).....	11

REPORT OF INDEPENDENT AUDITORS

Employee Benefits Committee
DHL Global Mail 401(K) Plan
Weston, Florida

We were engaged to audit the financial statements and supplemental schedule of the DHL Global Mail 401(K) Plan ("Plan") as of December 31, 2011 and for the year then ended, as listed in the accompanying contents page. These 2011 financial statements and supplemental schedule are the responsibility of the Plan's management. The statement of net assets available for benefits of the Plan as of December 31, 2010 was reported on by other auditors whose report dated October 13, 2011, disclaimed an opinion for the same reasons described in the following paragraph.

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 4, which was certified by Hartford Life Insurance Company, the trustee of the Plan, except for comparing such information with the related information included in the 2011 financial statements and supplemental schedule. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certification from the trustee as of December 31, 2011 and for the year then ended that the information provided to the plan administrator by the trustee is complete and accurate.

Because of the significance of the information that we did not audit, we are unable to, and do not, express an opinion on the accompanying 2011 financial statements and supplemental schedule as a whole. The information included in the supplemental schedule is presented for the purpose of additional analysis and is not a required part of the 2011 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 2011 financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.


Crowe Horwath LLP

Oak Brook, Illinois
October 12, 2012

DHL GLOBAL MAIL 401(K) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2011 and 2010

	<u>2011</u>	<u>2010</u>
Assets		
Investments, at fair value (Note 4)		
Pooled separate account	\$ 13,404,177	\$ 14,594,264
Notes receivable from participants	<u>395,425</u>	<u>362,479</u>
Total assets	<u>13,799,602</u>	<u>14,956,743</u>
Liabilities		
Excess contributions payable	<u>172,056</u>	<u>197,755</u>
Total liabilities	<u>172,056</u>	<u>197,755</u>
Net assets, reflecting all investments at fair value	<u>13,627,546</u>	<u>14,758,988</u>
Adjustment from fair value to contract value for fully benefit-responsive investment contracts (Note 2)	<u>(49,663)</u>	<u>(39,059)</u>
Net assets available for benefits	<u>\$ 13,577,883</u>	<u>\$ 14,719,929</u>

See accompanying notes to financial statements.

DHL GLOBAL MAIL 401(K) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2011

Additions to net assets attributable to:

Investment income, excluding net depreciation in fair value of investments (Note 4)	
Interest and dividends	\$ 447,256

Interest income on notes receivable from participants	19,856
---	--------

Contributions	
Participants	1,819,584
Rollover	<u>54,479</u>
Total contributions	<u>1,874,063</u>

Total additions	2,341,175
-----------------	-----------

Deductions from net assets attributable to:

Net depreciation in fair value of investments (Note 4)	888,937
Benefits paid to participants	2,587,689
Administrative expenses	<u>6,595</u>
Total deductions	<u>3,483,221</u>

Net decrease	(1,142,046)
---------------------	-------------

Net assets available for benefits

Beginning of year	<u>14,719,929</u>
-------------------	-------------------

End of Year	<u>\$ 13,577,883</u>
-------------	----------------------

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN

The following description of the DHL Global Mail 401(K) Plan (the "Plan") provides only general information of plan provisions in effect for the plan year ended December 31, 2011. Effective January 1, 2012 the Plan was amended and various plan provisions were revised. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of DHL Global Mail, Inc. (the "Company") who are age twenty-one years or older and have completed 60 days of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions: Each year, participants may elect to have the Company contribute a portion of their total annual eligible compensation to the Plan ("elective deferrals"). Effective for payroll periods on or after October 1, 2010, participants may elect to make after-tax contributions to the Plan's Roth investment option, as defined in the Plan document. Effective January 1, 2007, eligible employees are automatically enrolled for a 3% deferral of their total annual compensation unless they notify the Plan administrator that they do not wish to participate in the Plan. For any calendar year, a participant's elective deferrals may not exceed the lesser of a specific dollar amount (\$16,500 in 2011) as determined by the Internal Revenue Service ("IRS"), or 100% of the participant's eligible annual compensation. For participants fifty years of age or older by December 31, 2011, an additional \$5,500 contribution is allowed in 2011. Participants may contribute amounts representing distributions from other qualified plans. The Company may make discretionary employer contributions, in the form of matching contributions, profit sharing contributions and/or qualified non-elective contributions, at the option of the Company's Board of Directors. The Company did not elect to make discretionary employer contributions for the year ended December 31, 2011.

Investment Options: Upon enrollment in the Plan, a participant may direct their contributions plus actual earnings thereon to be invested in any of the investment options offered by the Plan. Participants may change their investment options daily.

Participant Accounts: Each participant's account is credited with their voluntary contributions and allocations of (a) the Company's discretionary matching contributions (b) the Company's discretionary profit sharing contributions (c) the Company's qualified non-elective contributions and (d) Plan earnings (losses) and is charged with his or her withdrawals and an allocation of administrative expenses.. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting: Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Employer discretionary matching contributions, discretionary profit sharing contributions and qualified non-elective contributions vest based on years of continuous service in accordance with the following schedule:

<u>Years of Continuous Service</u>	<u>Vesting Percentage</u>
1	33%
2	66%
3	100%

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Notes receivable from Participants: Participants may borrow from their Plan accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. A participant may only have one general purpose loan and one residential loan outstanding at a time. Note terms range from one to five years, except for the purchase of a primary residence for which the term may be longer. The notes are secured by the participant's account and bear interest at a rate commensurate with local prevailing rates at the time the note is approved. Principal and interest is paid by the participant through bi-weekly payroll deductions.

Payment of Benefits: Upon termination of service due to death, disability or retirement, a participant becomes 100% vested and may elect to receive an amount equal to the value of the participant's interest in his or her account in either a lump-sum or installment payments. For terminations of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts: Forfeitures relating to the non-vested portion of a terminated participant's employer contributions are retained by the Plan and used first to pay administrative expenses and then to reduce future Company contributions. In 2011, approximately \$500 in forfeitures was used to pay administrative expenses. The Plan's forfeiture account balances, which are included in investments in the Statements of Net Assets Available for Benefits as of December 31, 2011 and 2010, were approximately \$21,000 and \$11,000, respectively.

Administrative Expenses: Loan origination fees associated with notes receivable from participants and the Plan's record keeping and trustee fees are paid by the Plan and are reflected in the financial statements as administrative expenses of the Plan. Investment management fees are charged to the Plan as a reduction of investment return and included in the investment income (loss) reported by the Plan. All other expenses of the Plan are paid by the Company. The Company pays some expenses related to professional fees.

NOTE 2 – SUMMARY OF SIGNICANT ACCOUNTING POLICIES

Basis of Accounting: The accounting principles and procedures followed by the Plan conform to accounting principles generally accepted in the United States of America. The financial statements of the Plan are prepared under the accrual basis of accounting.

Use of Estimates: The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results could differ from those estimates.

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the plan's gains and losses on investments bought and sold as well as held during the year.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 2 – SUMMARY OF SIGNICANT ACCOUNTING POLICIES (Continued)

Fully Benefit-Responsive Investment Contracts: While Plan investments are presented at fair value in the statement of net assets available for benefits, any material difference between the fair value of the Plan's direct and indirect interest in fully benefit-responsive investment contracts and their contract value is to be presented as a separate adjustment line in the statements of net assets available for benefits because contract value remains the relevant measurement attribute for that portion of the Plan's net assets available for benefits. Contract value represents contributions made to a contract, plus earnings, less participant withdrawals and administrative expenses. Participants in fully benefit-responsive contracts may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The Plan holds indirect interests in such contract through its investment in stable value funds.

Risks and Uncertainties: The Plan holds various investments. Investments are exposed to various risks such as interest rate, market, liquidity and credit risks. Due to the level of risk associated with certain investment and the sensitivity of certain fair value estimates to changes in valuation assumptions, it is at least reasonably possible that changes in the fair values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Notes Receivable from Participants: Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances.

Payment of Benefits: Plan benefits are recorded when paid.

Excess Contributions: Refunds of excess participant deferral contributions may be required to satisfy the relevant nondiscrimination provisions of the Plan. Such refunds are accrued as a liability and reduction in contributions in the Plan year in which the excess deferrals were made to the Plan.

Reclassification: Certain prior year amounts have been reclassified to conform to the current year presentation.

NOTE 3 - PLAN TERMINATION

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. In the event of plan termination, participants would become 100% vested in their employer contributions and earnings thereon.

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS

Substantially all information pertaining to the Plan's investments and notes receivable from participants included in the financial statements, including the associated investment income (loss) and interest earned on notes receivable from participants, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by, Hartford Life Insurance Company, the trustee of the Plan. This information has not been audited by independent accountants.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 4 – UNAUDITED INFORMATION – CERTIFIED INVESTMENTS AND NOTES RECEIVABLES FROM PARTICIPANTS (Continued)

The following presents investments that represent 5% or more of the Plan's net assets available for benefits at December 31:

	<u>2011</u>	<u>2010</u>
Hartford Life Insurance Company Separate Account 401	13,399,091	14,594,264
Sub-accounts of Hartford Life Insurance Company		
Separate Account 401		
PIMCO Total Return	\$ 948,880	\$ 911,255
Blackrock Lifepath 2020	1,234,308	985,045
Blackrock Lifepath 2030	703,617	675,395*
Thornburg International Value	718,776	820,669
Ridgeworth Mid Cap Value	1,012,733	1,124,341
American Fund Growth Fund	934,163	1,254,168
Davis New York Venture Fund	629,794*	774,717
Goldman Sachs Growth Opportunity Fund	623,999*	805,558
Invesco Stable Value Trust	1,740,374	1,845,961

*Amounts did not meet 5 percent, included for consistency purposes.

During the year ended December 31, 2011, the Plan's investments in pooled separate accounts (including investments bought, sold, and held during the year) depreciated in value by \$888,937.

Dividend and interest income on investments of \$447,256 was earned for the year ended December 31, 2011. Interest income from notes receivable of \$19,856 was earned for the year ended December 31, 2011.

NOTE 5 – FAIR VALUE MEASUREMENT

Fair value is the price that would be received by the Plan for an asset or paid by the Plan to transfer a liability (an exit price) in an orderly transaction between market participants on the measurement date in the Plan's principal or most advantageous market for the asset or liability. Fair value measurements are determined by maximizing the use of observable inputs and minimizing the use of unobservable inputs. The hierarchy places the highest priority on unadjusted quoted market prices in active markets for identical assets or liabilities (level 1 measurements) and gives the lowest priority to unobservable inputs (level 3 measurements). The three levels of inputs within the fair value hierarchy are defined as follows:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the Plan has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data.

Level 3: Significant unobservable inputs that reflect the Plan's own assumptions about the assumptions that market participants would use in pricing an asset or liability.

In some cases, a valuation technique used to measure fair value may include inputs from multiple levels of the fair value hierarchy. The lowest level of significant input determines the placement of the entire fair value measurement in the hierarchy.

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

The following descriptions of the valuation methods and assumptions used by the Plan to estimate the fair values of investments apply to investments held directly by the Plan.

Pooled separate accounts other than stable value funds: Participants may direct the investment of their accounts into various sub-accounts of Hartford Life Insurance Company Separate Account 401, each of which is a pooled separate account of Hartford Life Insurance Company. The fair values of participation units held in the Separate Account 401 and each of the sub-accounts of Separate Account 401, other than stable value funds, are based on the net asset values reported by the fund managers as of the financial statement dates and recent transaction prices (level 2 inputs). Each of the separate accounts of Separate Account 401 invests in a single, open-ended mutual fund which is generally identified in the name of the pooled separate account. The investment strategies of these pooled separate accounts are consistent with each of the mutual funds identified in the name of the fund. The table below presents the fair values of the various sub-accounts of Separate Account 401 held by the Plan, classified by the stated investment strategies of the underlying mutual funds. Each pooled separate account provides for daily redemptions by the Plan with no advance notice requirements, and has redemption prices that are determined by the fund's net asset value per unit.

Stable Value Funds: The fair values of participation units in the stable value fund are based upon the net asset values of such funds, after adjustments to reflect all fund investments at fair value, including direct and indirect interests in fully benefit-responsive contracts, as reported in the audited financial statements of the fund (Level 2 inputs). The funds invests in collective trusts, guaranteed investment contracts and readily marketable assets, with the objective of providing stability of investment return, preservation of capital and liquidity to pay plan benefits of its retirement plan investors. The fund provides for daily redemptions by the Plan at reported net asset values per share, with no advance notice requirement.

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.

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 5 – FAIR VALUE MEASUREMENTS (Continued)

Investments measured at fair value on a recurring basis are summarized below:

		Fair Value Measurements at December 31, 2011 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,619,895
International equity funds		-	982,935
US large cap funds		-	2,425,208
US mid cap funds		-	1,905,791
US small cap funds		-	742,916
Balanced funds		-	809,997
Real estate fund		-	137,804
Life cycle funds 2020 – 2030		-	1,937,925
Life cycle funds 2040 – 2050		-	494,501
Stable value funds		-	2,347,205

There were no significant transfers between Level 1 and Level 2 during 2011

		Fair Value Measurements at December 31, 2010 Using	
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Investments:			
Pooled separate accounts, categorized by nature of underlying investments:			
Fixed income funds	\$	-	\$ 1,542,111
International equity funds		-	1,222,994
US large cap funds		-	2,872,761
US mid cap funds		-	2,190,901
US small cap funds		-	913,399
Balanced funds		-	1,132,513
Real estate fund		-	93,637
Life cycle funds 2020 – 2030		-	1,660,440
Life cycle funds 2040 – 2050		-	398,641
Stable value funds		-	2,566,867

(Continued)

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 6 - TAX STATUS

The Internal Revenue Service has issued an opinion letter dated March 31, 2008 indicating that the prototype adopted by the Plan, as then designed, was in compliance with applicable requirements of the Internal Revenue Code (the "IRC"). Although the Plan has been amended from the original prototype document, the plan sponsor believes that the Plan is currently being operated in accordance with the IRC.

NOTE 7 - PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Certain Plan investments are a pooled separate accounts managed by The Hartford, and affiliate of the plan trustee. This investment qualifies as party-in-interest investment. Notes receivable from participants and investment fees paid to Hartford also reflect party-in-interest transactions.

Certain professional fees related to the administration of the Plan were paid by the Company on behalf of the Plan. Fees charged by the trustee for plan administration and notes receivable from participants processing fees totaled \$6,595 for the year ended December 31, 2011.

NOTE 8 - RECONCILIATION TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2011 and 2010 to the Form 5500:

	<u>2011</u>	<u>2010</u>
Net assets available for benefits per the financial statements	\$ 13,577,883	\$ 14,719,929
Excess contributions payable accrued on the financial statements	<u>172,056</u>	<u>197,755</u>
Net assets per the Form 5500	<u>\$ 13,749,939</u>	<u>\$ 14,917,684</u>

The following is a reconciliation of the change in net assets available for benefits for the year ended December 31, 2011 per the financial statements to net loss reported in the 2011 Form 5500:

Decrease in net assets available for benefits per the financial statements	\$ (1,142,046)
Less: Excess contributions payable at December 31, 2010	(197,755)
Add: Excess contributions payable at December 31, 2011	<u>172,056</u>
Net loss per the Form 5500	<u>\$ (1,167,745)</u>

DHL GLOBAL MAIL 401(K) PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2011 and 2010

NOTE 9 – SUBSEQUENT EVENTS

Plan management has evaluated subsequent events for recognition and disclosure through October 12, 2012, which is the date the financial statements were available to be issued.

Effective January 1, 2012, the Plan changed trustees from Hartford Life Insurance Company to Fidelity Management Trust Company, changed the Plan sponsor from DHL Global Mail, Inc. to DPWN Holdings (USA), Inc., and amended the Plan to change various plan provisions, including but not limited to the removal of the age and service requirements to participant in the plan, change in entry date to monthly, and participants are now 10 percent vested after two years of service..

SUPPLEMENTAL SCHEDULE

DHL GLOBAL MAIL 401(K) PLAN
SCHEDULE H, LINE 4i, SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2011

Plan Sponsor:	DHL Global Mail, Inc.
Employer Identification Number:	54-1427505
Plan Number:	001

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, <u>Collateral, Par or Maturity Value</u> Separate Account , Sub-accounts	<u>Cost</u>	<u>Current Value</u>
	PIMCO	PIMCO Total Return	**	\$ 948,880
	American Funds	American Funds Income Builder	**	201,444
	Blackrock	Blackrock Lifepath 2020	**	1,234,308
	Blackrock	Blackrock Lifepath 2030	**	703,617
	Blackrock	Blackrock Lifepath 2040	**	481,955
	Blackrock	Blackrock Lifepath 2050	**	12,546
	Blackrock	Blackrock Lifepath Retirement	**	86,839
	Invesco	Invesco Real Estate	**	137,804
	American Funds	American Funds World	**	98,970
	Thornburg	Thornburg International Value	**	718,776
	Franklin Templeton	Franklin Small Cap Value	**	80,196
	Ridgeworth	Ridgeworth Small Cap Value	**	439,530
	MFS	MFS International Value	**	42,569
	Ridgeworth	Ridgeworth Mid Cap Value	**	1,012,733
	American Funds	American Fund Growth Fund	**	934,163
	Invesco	Invesco Van Kampen Growth and Income	**	644,840
	Davis NY	Davis NY Venture	**	629,794
*	The Hartford	Hartford Index HLS	**	216,411
	Goldman Sachs	Goldman Sachs Growth Opportunity Fund	**	623,999
	Goldman Sachs	Goldman Sachs Mid Cap Value	**	5,862
	PIMCO	PIMCO High Yield Fund	**	671,015
	Nuveen Investments	Nuveen Mid Cap Index	**	263,197
	Blackrock	Blackrock Small Cap Growth II	**	223,190
	Janus	Janus Overseas	**	221,590
	Janus	Janus Balanced	**	422,744
	Invesco***	Invesco Stable Value Trust	**	1,687,899
	SEI***	SEI Stable Value Fund	**	609,643
		Total Interest in Separate Account		13,354,514
	Notes receivable from participants	Interest rates ranging from 4.25% to 9.25%		395,425
				<u>\$ 13,749,939</u>

* Denotes party-in-interest

** Assets are participant directed investments; therefore cost information is not required.

***The current value for this fund represents contract value.

See Report of Independent Auditors.

Fee and Compensation Disclosure Report

This document is intended to assist a plan administrator (“you”) in completing the Form 5500 Schedule C¹ by identifying different types of compensation paid with respect to the Hartford product utilized by your plan.

As permitted under the Schedule C rules, compensation is disclosed in the attached report as an actual dollar amount, an estimate or a formula or rate.

- Where an actual dollar amount of compensation is disclosed, no further notation regarding compensation calculations is generally provided.
- Where an estimate of the compensation amount is disclosed, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount.
- Where a formula or rate is provided to report compensation, we have used a reasonable method to arrive at the estimate and we have described the method used to arrive at the estimated amount. This formula or rate may be disclosed to describe the compensation to which it applies under the Schedule C rules. Alternatively, for purposes of Schedule C disclosure or in connection with your fiduciary review of the compensation paid with respect to the services, products and investment options utilized by the plan, you may calculate and disclose an actual or estimated dollar amount by multiplying the rate by the total assets to which it applies.

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2011 - 12/31/2011 and indirect compensation is presented on a calendar year basis ending 12/31/2011.

This report includes compensation actually paid to or by the Hartford within the indicated plan year as part of your Hartford product. *(Note: If the plan year period or plan year end indicated in this Schedule C reporting package is incorrect, please notify your Hartford customer service representative immediately).* This report does not include amounts deducted from plan assets and paid to third parties (other than Hartford). In addition, the report does not include compensation related to investments held by the plan that are not serviced on our recordkeeping system. You should contact your other service providers for reportable compensation information. You may also receive information on the compensation reported here from other service providers as is described below.

Please note that we have provided suggested service codes with respect to services provided through our Hartford product. Please review all Schedule C and other Form 5500 materials with your experienced benefits counsel and other professionals to determine the most appropriate codes for your plan. In addition, please note that because plans with fewer than 100 participants (as of the beginning of the plan year) are generally not required to file Schedule C, you should refer to the instructions provided by the IRS for Schedule C and/or review the applicability of Schedule C to your plan with your experienced tax/benefits counsel, to determine whether it is necessary for the plan to report the information contemplated by this report.

Please contact your Hartford Service Team should you require additional information regarding the compensation paid to or by Hartford with respect to your plan.

Information provided in this document and related materials we provide are not intended to be and shall not be deemed tax advice, tax form preparation services, legal advice, advice to plans regarding compliance with ERISA reporting compliance, or accounting or other professional services. As described above, the information contained in this report may not cover all of the compensation received by the plan’s service providers. We strongly encourage you to review all Schedule C and other Form 5500 materials with experienced benefits counsel and other professionals.

¹ Please refer to the Schedule C of the Form 5500 and its instructions (available at: <http://www.dol.gov/ebsa/5500main.html>), and please confer with experienced benefits counsel and other professionals, to determine the applicability of Schedule C to your plan.

FORM 5500 SCHEDULE C REPORT
SCHEDULE C, LINE 2(h) AND LINE 3(e) FORMULA DESCRIPTION

DHL GLOBAL MAIL 401(K) PLAN (823035)

EIN #: 54-1427505

Please note that, unless otherwise indicated in the descriptions contained in this report, direct compensation is presented on a plan year basis 01/01/2011 - 12/31/2011 and indirect compensation is presented on a calendar year basis ending 12/31/2011.

For use with lines 2(h), 3(c), 3(d), 3(e)

Total Direct Compensation Paid **\$7,068.88**

The total amount identified above reflects all fees deducted from plan assets at the plan administrator's direction for the plan year. Service providers which have received portions of these direct fees are listed below, along with the amount of fees they received. Please note that if there is a discrepancy between the total direct fees reported above and the sum of the direct fees reported below, you should contact your other service providers or your plan records to identify the recipient(s) of the fees and any other information relevant to your Schedule C filing.

Recipient: Hartford Life Insurance Company EIN: 06-0974148

Service Codes: 15, 23, 37, 38, 54, 55, 59, 60, 62, 63, 64, 65, 66, 99, 50 (if direct compensation amount reflected below)

Direct Compensation **\$7,068.88**

The total amount identified above reflects fees deducted from plan assets at the plan administrator's direction for the 2011 plan year for the above named recipient. Please review other service providers, below, to determine whether direct fees were also paid to them. Also, please review your records to determine whether other service providers may have received any compensation not reported below (e.g., a reimbursement paid to any plan fiduciary, your employee benefits counsel, or a plan auditor).

Note: Due to system accounting protocols (including 'cash basis' accounting), amounts reported as Direct Compensation and amounts reported as paid to Hartford Life Insurance Company are the net result of aggregating direct compensation after the effects of adjustments processed in 2011, some of which may have pertained to prior years.

Please review the detailed breakdown at the end of the report for further information.

Indirect Compensation

Float compensation **\$10.69**

Bank accounts and investments associated with short-term investment pool, 200 Hopmeadow Road, Simsbury, CT 06089

This is an estimate based on the annual average rate of float (0.01% for 2011) earned on the bank accounts and investments associated with the short-term investment pool for the 2011 calendar year multiplied by an estimate of the assets related to uncashed checks.* This estimate does not include float earned for any other reason (e.g., if amounts remitted to The Hartford cannot be immediately invested because they are not in good order). Please review or request a copy of the current float disclosure for more information about the other circumstances in which float is earned.

* A complete listing of distribution checks that remain outstanding is available on the Retirement Plan Access web site under the Standard Reports section (Report R03998-Outstanding Distribution Checks). Uncashed check assets will continue to remain in a float-earning bank account until such time direction is received from the Plan Sponsor. The Plan Sponsor should consult with their tax advisor or benefits counsel to determine if assets attributable to uncashed checks should be included on the Form 5500 filing.

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. Hartford's Code of Ethics and Business Conduct generally restricts Hartford employees from giving to or receiving gifts from customers and/or business partners having a value of over \$100, in any individual situation, without prior approval. However, it is possible that one or more of your service providers for the calendar year, including Hartford, engaged in transactions generating nonmonetary compensation. Information concerning reportable transactions undertaken between or among non-Hartford parties may not be available to The Hartford.

Please consult with your legal or tax advisors if you have any questions.

Compensation paid with respect to Funds

<i>Investment Option Name</i>	<i>EIN</i>	<i>Revenue Sharing Rate (%) Paid to The Hartford (rates as of 12/31/2011)</i>	<i>Underlying Fund Gross Expense Ratio as of the Fund's Year End*</i>
AMERICAN FUNDS CAP INC BUILDR R1	95-1411037	1.10% x assets	1.41%
AMERICAN FUNDS CP WLD GR INC-R1	95-1411037	1.10% x assets	1.56%
AMERICAN FUNDS GR FD OF AMER R1	52-0792143	1.10% x assets	1.43%
BLACKROCK LIFEPATH 2020 A	51-0318674	0.75% x assets	1.44%
BLACKROCK LIFEPATH 2030 A	51-0318674	0.75% x assets	1.44%
BLACKROCK LIFEPATH 2040 A	51-0318674	0.75% x assets	1.44%
BLACKROCK LIFEPATH 2050 A	51-0318674	0.75% x assets	1.56%
BLACKROCK LIFEPATH RETIREMENT A	51-0318674	0.75% x assets	1.43%
BLACKROCK SMALL CAP GRWTH II R	13-3806694	0.80% x assets	1.90%
DAVIS NEW YORK VENTURE R	13-2601967	0.60% x assets plus \$12/participant	1.22%
FRANKLIN SMALL CAP VALUE R	13-3151768	0.60% x assets plus \$12/participant	1.52%
GOLDMAN SACHS GROWTH OPPS R	13-4019460	0.80% x assets	1.66%
GOLDMAN SACHS MDCAP VALUE A	13-4019460	0.55% x assets	1.16%
HARTFORD INDEX HLS IB	22-2937447	0.50% x assets	0.59%
INVESCO REAL ESTATE R	76-0343427	0.85% x assets	1.56%
INVESCO STABLE VALUE TRUST R	84-1251725	1.00% x assets	1.23%
INVESCO VAN KAMPEN GR AND IN R	76-0343427	0.80% x assets	1.09%
JANUS BALANCED R	84-0592523	0.75% x assets	1.34%
JANUS OVERSEAS R	84-0592523	0.75% x assets	1.48%
MFS INTERNATIONAL VALUE R2	04-3158862	0.85% x assets	1.53%
NUVEEN MID CAP INDEX R3	41-1418224	0.75% x assets	1.09%
PIMCO HIGH-YIELD R	33-0629048	0.65% x assets	1.15%
PIMCO TOTAL RETURN R	33-0629048	0.65% x assets	1.10%
RIDGEWORTH MIDCAP VALUE EQUITY A	23-2678674	0.75% x assets	1.35%
RIDGEWORTH SM CAP VALUE EQUITY A	23-2678674	0.75% x assets	1.52%
SEI STABLE ASSET 19	23-2177800	1.00% x assets	1.30%
THORNBURG INTERNATIONAL VALUE R3	06-1158764	0.75% x assets	1.63%

Under the variable investment options available through your plan's group annuity contract or funding agreement, contract values are invested in Hartford Life Insurance Company separate accounts that, in turn, invest in underlying registered investment companies (i.e., mutual funds) and collective investment funds.

The list includes any investment option held by the plan on at least one month end during the 2011 calendar year. To arrive at an estimate of the dollar amount that Hartford received from each investment option, multiply the rate of fees received from each investment option by your plan's year-end balance (or if the investment option was liquidated prior to year end, the balance on the liquidation date) and, if applicable,

the per participant fee by the number of participants in the investment option at year end (or the liquidation date if earlier). This will be an estimate because your plan's balance and number of participants will vary over the course of the year, so the year-end balance and number of participants may be higher or lower than the daily balance. In addition, these fees are calculated on a daily basis.

* This amount is the sum of the fund's distribution, management and other fees, which are also identified in the fund's prospectus. Please note that affiliates of Hartford Life Insurance Company act as advisor to the Hartford funds. Such affiliates are identified in the fund's prospectus and receive management fees in the following amounts:

Hartford Index HLS IB	0.30% x assets
-----------------------	----------------

Recipient: WELLS FARGO INS SVCS INV ADV, INC EIN: 56-1839855

Service Codes:

Please contact your Service Provider for the list of applicable services performed and Service Codes.

Direct Compensation

\$0.00

Our records indicate that this recipient did not receive any Direct Compensation. Please review your records to determine whether this service provider may have received any compensation not reported.

Indirect Compensation

* Sales commission	Payor: Hartford Life Insurance Company	EIN: 06-0974148	\$47,030.67
* <i>Sales Commissions are reported on a Plan Year basis.</i>			

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. Hartford's Code of Ethics and Business Conduct generally restricts Hartford employees from giving to or receiving gifts from customers and/or business partners having a value of over \$100, in any individual situation, without prior approval. However, it is possible that one or more of your service providers for the 2011 calendar year, including Hartford, engaged in transactions generating nonmonetary compensation. Information concerning reportable transactions undertaken between or among non-Hartford parties may not be available to The Hartford.

Please consult with your legal or tax advisors if you have any questions.

Recipient: WELLS FARGO INS SVCS USA INC EIN: 56-1882208

Service Codes:

Please contact your Service Provider for the list of applicable services performed and Service Codes.

Direct Compensation **\$0.00**

Our records indicate that this recipient did not receive any Direct Compensation. Please review your records to determine whether this service provider may have received any compensation not reported.

Indirect Compensation

* Sales commission	Payor: Hartford Life Insurance Company	EIN: 06-0974148	\$15,513.50
---------------------------	--	-----------------	--------------------

* *Sales Commissions are reported on a Plan Year basis.*

Non Monetary Compensation

Please note that items of nonmonetary compensation need to be reported for Schedule A or C (Form 5500) purposes if they exceed certain *de minimus* amounts. Transactions generating nonmonetary compensation may include gifts, gratuities, or certain types of in-kind benefits. Hartford's Code of Ethics and Business Conduct generally restricts Hartford employees from giving to or receiving gifts from customers and/or business partners having a value of over \$100, in any individual situation, without prior approval. However, it is possible that one or more of your service providers for the 2011 calendar year, including Hartford, engaged in transactions generating nonmonetary compensation. Information concerning reportable transactions undertaken between or among non-Hartford parties may not be available to The Hartford.

Please consult with your legal or tax advisors if you have any questions.

Recipient: Morningstar Associates, LLC EIN: 36-4317381

Service Code: 49

Indirect Compensation

"Managed by You" services fee	Payor: Hartford Life Insurance Company	EIN: 06-0974148	\$43.60
-------------------------------	--	-----------------	----------------

This is an estimate determined by dividing a flat annual fee paid to Morningstar by the number of plans to whom this feature is made available.

Recipient: Reliance Trust Company EIN: 58-1428634

Indirect Compensation

Trust service fee (if Reliance Trust Company is acting as directed trustee)	\$400.00
---	-----------------

Service Codes: 25, 99

Payors: Hartford Life Insurance Company	EIN: 06-0974148
Hartford Retirement Services, LLC	EIN: 26-1589907

Recipient: Mesirow Financial Investment Management, Inc. EIN: 36-3429599

Indirect Compensation

Annual platform package fee ("Model My Goals") **\$25.42**
Service code: 49

Payor: Hartford Life Insurance Company EIN: 06-0974148

This is an estimate based on the annual platform package fee paid to Mesirow divided by the number of plans using this feature.

Direct Revenue Detail

Recipient: *Hartford Life Insurance Company*

<u>Fee Description</u>	<u>Dollar Amount</u>
Loan Set-up Fee	\$2,050.00
Holding Account: Internal Fee	\$474.00
One-Time Distribution Fee	\$3,398.88
Loan Administration Fee	\$1,146.00
Total Direct Revenue:	\$7,068.88
 Grand Total Direct Fees:	 \$7,068.88