Form 5500-SF

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA), and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500-SF.**

OMB Nos. 1210-0110
1210-0089

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for: [X] a single-employer plan [ ] a multiple-employer plan (not multiemployer) [ ] a one-participant plan

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
PENSION PLAN FOR EMPLOYEES OF TYLINTER, INC. REPRESENTED BY THE UNITED STEELWORKERS OF AMERICA AFL-CIO ON BEHALF OF LOCAL 8573

1b Three-digit plan number (PN) ▶ 004

1c Effective date of plan 08/28/1969

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
TYLINTER, INC.

200 PEACH ORCHARD ROAD
SALISBURY, NC 28147

2b Employer Identification Number (EIN) 34-0826607

2c Sponsor's telephone number 704-633-5384

2d Business code (see instructions) 332900

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")
TYLINTER, INC. 200 PEACH ORCHARD ROAD
SALISBURY, NC 28147

3b Administrator's EIN 34-0826607

3c Administrator's telephone number 704-633-5384

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

5a Total number of participants at the beginning of the plan year	**5a**	45
b Total number of participants at the end of the plan year	**5b**	44
c Number of participants with account balances as of the end of the plan year (defined benefit plans do not complete this item)	**5c**	

6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) [X] Yes [ ] No

b Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) [X] Yes [ ] No

If you answered "No" to either 6a or 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.

Part III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	695352	673482
b Total plan liabilities	7b		
c Net plan assets (subtract line 7b from line 7a)	7c	695352	673482

8 Income, Expenses, and Transfers for this Plan Year		(a) Amount	(b) Total
a Contributions received or receivable from: **(1)** Employers	8a(1)	87800	
(2) Participants	8a(2)		
(3) Others (including rollovers)	8a(3)		
b Other income (loss)	8b	-19172	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		68628
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	54284	
e Certain deemed and/or corrective distributions (see instructions)	8e		
f Administrative service providers (salaries, fees, commissions)	8f		
g Other expenses	8g	36214	
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		90498
i Net income (loss) (subtract line 8h from line 8c)	8i		-21870
j Transfers to (from) the plan (see instructions)	8j		

Part IV Plan Characteristics

9a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1B 1G 1I 3D

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

Part V Compliance Questions

10 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? (See instructions and DOL's Voluntary Fiduciary Correction Program)	**10a**		X	
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	**10b**		X	
c Was the plan covered by a fidelity bond?	**10c**	X		1000000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**10d**		X	
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service or other organization that provides some or all of the benefits under the plan? (See instructions.)	**10e**		X	
f Has the plan failed to provide any benefit when due under the plan?	**10f**		X	
g Did the plan have any participant loans? (If "Yes," enter amount as of year end.)	**10g**		X	
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**10h**			
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**10i**			

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500)) X Yes ☐ No

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? ☐ Yes X No

(If "Yes," complete 12a or 12b, 12c, 12d, and 12e below, as applicable.)

a 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 letter ruling granting the waiver. Month _____ Day _____ Year _____

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year	**12b**	
c Enter the amount contributed by the employer to the plan for this plan year	**12c**	
d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount)	**12d**	

e Will the minimum funding amount reported on line 12d be met by the funding deadline? ☐ Yes ☐ No ☐ N/A

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year? ☐ Yes X No

If "Yes," enter the amount of any plan assets that reverted to the employer this year **13a**

b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? ☐ Yes X No

c 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.)

13c(1) Name of plan(s):	**13c(2)** EIN(s)	**13c(3)** PN(s)

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, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2012	JUDITH OSGOOD
	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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

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

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

A Name of plan
PENSION PLAN FOR EMPLOYEES OF TYLINTER, INC. REPRESENTED BY THE UNITED STEELWORKERS OF AMERICA AFL-CIO ON BEHALF OF LOCAL 8573

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
TYLINTER, INC.

D Employer Identification Number (EIN)
34-0826607

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

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

Part I Basic Information

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

2 Assets:

a	Market value	**2a**	695010
b	Actuarial value	**2b**	626838

3 Funding target/participant count breakdown:

			(1) Number of participants	**(2)** Funding Target
a	For retired participants and beneficiaries receiving payment	**3a**	18	487366
b	For terminated vested participants	**3b**	13	115236
c	For active participants:			
	(1) Non-vested benefits	**3c(1)**		20326
	(2) Vested benefits	**3c(2)**		265354
	(3) Total active	**3c(3)**	14	285680
d	Total	**3d**	45	888282

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a	Funding target disregarding prescribed at-risk assumptions	**4a**	
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5	Effective interest rate	**5**	6.25 %
6	Target normal cost	**6**	10235

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

Date

FRANK KROPF

11-06650

Type or print name of actuary

Most recent enrollment number

TOWERS WATSON DELAWARE

704-620-6542

Firm name

Telephone number (including area code)

150 NORTH COLLEGE STREET, STE. 3050
CHARLOTTE, NC 28202-2173

Address of the firm

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	65480
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	65480
10	Interest on line 9 using prior year's actual return of 14.25%		9331
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		33
b	Interest on (a) using prior year's effective rate of 6.62 % except as otherwise provided (see instructions)		2
c	Total available at beginning of current plan year to add to prefunding balance		35
d	Portion of (c) to be added to prefunding balance		35
12	Other reductions in balances due to elections or deemed elections		74846
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	70.56 %
15	Adjusted funding target attainment percentage	15	70.56 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	67.48 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/10/2011	5000		08/09/2011	5000	
02/11/2011	5000		10/05/2011	5000	
03/10/2011	2000		11/02/2011	5000	
05/09/2011	5000		12/05/2011	5000	
06/13/2011	5000		01/05/2012	5000	
07/19/2011	5000		02/02/2012	3600	
			Totals ► 18(b)	87800	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	82999

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

Part II Beginning of year carryover and prefunding balances

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

Part III Funding percentages

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

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
05/04/2012	5000	0			
06/05/2012	8600	0			
08/03/2012	10000	0			
09/05/2012	8600	0			
			Totals ► 18(b)		18(c)

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☐ No

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
3.78%	6.31%	6.57 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	65

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes	☐ No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

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

a Target normal cost (line 6)	**31a**	10235
b Excess assets, if applicable, but not greater than 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	261444	54849
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	65084

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

36 Additional cash requirement (line 34 minus line 35)	**36**	65084
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	82999

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

a Total (excess, if any, of line 37 over line 36)	**38a**	17915
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

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

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

2011 Schedule SB, line 22 –
Description of Weighted Average Retirement Age
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

The weighted average retirement age is equal to the normal retirement age of 65. Participants are assumed to retire at age 65 so the average retirement age is 65.

2011 Schedule SB, Part V –
Statement of Actuarial Assumptions/Methods
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

Discount rates

Current plan year PPA effective interest rate: 6.250%

Three segment rates:

Applicable month	September 2010
First segment rate (0-5 years)	3.78%
Second segment rate (5-20 years)	6.31%
Third segment rate (after 20 years)	6.57%

Inclusion date

Participation in the plan was frozen as of March 31, 2006, and only participants on that date are included in the valuation.

Assumed cost of living adjustments

None.

Administrative expenses

1½% of the market value of assets as of the valuation date, excluding any receivable contributions, is added to the normal cost.

Mortality

For non-disabled participants: The prescribed mortality assumption under Section 430(h)(3)(A) of the Internal Revenue Code using static tables with separate mortality rates for annuitants and non-annuitants.

Retirement age

Age 65 with 5 years of vesting service.

Disability rates

1965 Railroad Retirement System with 10-19 years of service.

Disabled mortality

Revenue Ruling 96-7 mortality table for participants disabled after December 31, 1994.

Compensation increases

None.

Future increases in Social Security

None.

Future increases in Maximum Benefits and Plan Compensation Limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC Section 415. No provision is made for future increases in the maximum annual benefit.

Plan compensation

Not Applicable.

Representative termination rates not due to disability, retirement or mortality

Attained Age	Percentage leaving during the year (Scale 155)
20	0.074
25	0.049
30	0.034
35	0.024
40	0.013
45	0.007
50	0.000
55	0.000
60 and over	0.000

Form of payment

Participants are assumed to elect the normal form.

Marriage

For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of male participants and 50% of female participants are assumed to be married with husbands assumed to be three years older than their wives.

Employees

It was assumed that there will be no new or rehired employees.

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22) . The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2010 plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Participant data

Employee data was supplied by W.S. Tyler.

Benefits not included in valuation

We believe that we have reflected all significant plan provisions in this valuation.

PBGC Premium Funding Target

For purposes of determining the PBGC Premium Funding Target in Section 2.2D, the Alternative Premium Funding Target was determined using the assumptions described above.

Nature of Actuarial Calculations

The results documented in this report are estimates based on data that may be imperfect and on assumptions about future events. Certain plan provisions may be approximated or deemed insignificant and therefore are not valued. Assumptions may be made about participant data or other factors. Reasonable efforts were made in this valuation to ensure that items that are significant in the context of the actuarial liabilities or costs are treated appropriately, and not excluded or included inappropriately.

A range of results, different from those presented in this report could be considered reasonable. The numbers are not rounded, but this is for convenience only and should not imply precision, which is not inherent in actuarial calculations. Certain percentages determined in this report, such as the Funding Target Attainment Percentage, are truncated to be consistent with the instructions for Schedule SB of the Form 5500.

The assumptions selected for this valuation other than those prescribed by law, generally reflect long-term average expectations. If overall future plan experience is less favorable than assumed, the relative level of plan costs or contribution requirements determined in this valuation will likely increase in future valuations. Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: plan experience differing from that anticipated by the economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for the measurements (such as the end of an amortization period); and changes in plan provisions or applicable law. It is beyond the scope of this actuarial valuation to analyze the potential range of future pension contributions, but we can do so upon request.

Changes in Assumptions and Methods Since Last Actuarial Valuation

None, other than the prescribed changes in interest rates and mortality.

2011 Schedule SB, Part V – Statement of Plan Provisions
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

Effective Date and Most Recent Amendment

August 28, 1969 as amended effective March 31, 2006.

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

Participation in the plan was closed to new entrants as of March 31, 2006, and participants in the plan will not accrue any additional benefits after that date.

Vesting Service

Years and months from date of employment.

Pension Service

Years and months from date of employment. Service for benefit accruals stops accruing on March 31, 2006.

Accrued Benefit

The benefit calculated as of March 31, 2006, when the Plan was frozen. This monthly benefit is payable according to the following schedule of benefit levels and service maximums (with service accruals stopping on March 31, 2006):

Date of Retirement	Benefit Level	Maximum Service Credited
10/20/1997 to 10/24/1998	13.75	35
10/25/1998 to 10/24/1999	14.75	35
10/25/1999 to 10/22/2000	15.25	35
10/23/2000 and later	15.75	35

Normal Retirement

1. Normal Retirement Date: The first of the month coincident with or next following age 65 or the fifth anniversary of employment.

2. Monthly Benefit: Monthly pension benefit determined as of March 31, 2006.

Early Retirement

1. Early Retirement Date: The first of the month coincident with or next following age 60 or 10 years of continuous vesting service.

2. Monthly Benefit: Monthly pension benefit determined as of March 31, 2006, reduced 0.6% for each month of payment before age 65.

Postponed Retirement

1. Postponed Retirement Date: Retirement after the Normal Retirement Date.

2. Monthly Benefit: Monthly pension benefit determined as of March 31, 2006.

Disability Benefit and Retirement

1. Disability Retirement Date: Retirement upon total and permanent disablement after completing 10 years of continuous vesting service.

2. Monthly Benefit: Monthly pension benefit determined as of March 31, 2006, payable without reduction after six months of disablement. After normal retirement, the benefit becomes the normal retirement benefit (see above).

Vested Benefits Upon Termination of Service

1. Eligibility: Termination for reasons other than death or retirement after completing five years of vesting service.

2. Monthly Benefit: Monthly pension benefit determined as of March 31, 2006. The participant may begin receiving payments at age 60 reduced 0.6% for each month of payment before age 65.

Death Benefits for Participants in Active Service

1. Eligibility: Death after meeting the vesting requirements of the Plan, but prior to the commencement of the retirement benefits, with a surviving spouse.

2. Monthly Benefit: Monthly preretirement spouse benefit of 50% of the participant's benefit determined as of March 31, 2006, payable the later of death or age 60.

Death Benefits for Retired Participants

If the member has a spouse, the standard benefit is converted to a reduced joint and 50% survivor option unless such conversion is waived with the consent of the spouse.

Optional Forms of Retirement Income in Lieu of Normal Form

Preretirement spouse benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the benefit commencement date, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a 75% joint and survivor annuity, or (for single participants) a life annuity.

Maximum on Benefits and Pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Changes in Plan Provisions since Last Actuarial Valuation

None.

2011 Schedule SB, line 26 – Schedule of Active Participant Data
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

	Credited Service Under 1			Credited Service 1 to 4			Credited Service 5 to 9		
Attained		Average			Average			Average	
Age	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.
under 25									
25 to 29									
30 to 34									
35 to 39				1			1		
40 to 44							1		
45 to 49							1		
50 to 54							2		
55 to 59									
60 to 64									
65 to 69									
70 & up									

	Credited Service 10 to 14			Credited Service 15 to 19			Credited Service 20 to 24		
Attained		Average			Average			Average	
Age	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.
under 25									
25 to 29									
30 to 34									
35 to 39									
40 to 44									
45 to 49							1		
50 to 54				1			1		
55 to 59									
60 to 64	1								
65 to 69									
70 & up									

	Credited Service 25 to 29			Credited Service 30 to 34			Credited Service 35 to 39		
Attained		Average			Average			Average	
Age	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.	No.	Comp.	Cash Bal.
under 25									
25 to 29									
30 to 34									
35 to 39									
40 to 44									
45 to 49									
50 to 54	1								
55 to 59				2					
60 to 64				1					
65 to 69									
70 & up									

	Credited Service 40 & up		
Attained		Average	
Age	No.	Comp.	Cash Bal.
under 25			
25 to 29			
30 to 34			
35 to 39			
40 to 44			
45 to 49			
50 to 54			
55 to 59			
60 to 64			
65 to 69			
70 & up			

Note: This plan benefit is not pay-related and the plan is now frozen.

2011 Schedule SB, line 32 – Schedule of Amortization Bases
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

	Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1	Shortfall	01/01/2011	51,813	7	51,813	8,525
2	Shortfall	01/01/2010	77,218	6	69,981	12,995
3	Shortfall	01/01/2009	87,880	5	72,493	15,594
4	Shortfall	01/01/2008	106,036	4	67,157	17,735
Total					261,444	54,849

SCHEDULE SB ATTACHMENTS

Schedule SB - Statement by Enrolled Actuary

Plan Sponsor	Tylinter, Inc.
EIN/PN	34-0826607/004
Plan Name	The Pension Plan for Employees of Tylinter, Inc. Represented by the United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied-Industrial and Service Workers Union, AFL-CIO, CLC on Behalf of Local Union 8573
Valuation Date	January 1, 2011
Enrolled Actuary	Frank Kropf
Enrollment Number	11-06650

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

2011 Schedule SB, line 19 – Discounted Employer Contributions
Pension Plan for Employees of Tylinter, Inc
EIN/PN: 34-0826607/004

Date	Applicable Plan Year	Contribution	Applicable Effective Rate	Interest Adjusted Contribution
01/10/2011	2011	5,000	6.25%	4,992
02/11/2011	2011	5,000	6.25%	4,966
03/10/2011	2011	2,000	6.25%	1,977
05/09/2011	2011	5,000	6.58%	4,888
06/13/2011	2011	5,000	6.25%	4,865
07/19/2011	2011	5,000	6.33%	4,834
08/09/2011	2011	5,000	6.31%	4,818
10/05/2011	2011	5,000	6.25%	4,775
11/02/2011	2011	5,000	6.49%	4,744
12/05/2011	2011	5,000	6.25%	4,727
01/05/2012	2011	5,000	6.25%	4,703
02/02/2012	2011	3,600	6.44%	3,364
05/04/2012	2011	5,000	6.25%	4,609
06/05/2012	2011	8,600	6.25%	7,887
08/03/2012	2011	10,000	6.25%	9,082
09/05/2012	2011	8,600	6.25%	7,768
Total		87,800		82,999

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

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

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

A Name of plan

Pension Plan for Employees of Tylinter, Inc.

B Three-digit plan number (PN) ▶ 004

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

Tylinter, Inc.

D Employer Identification Number (EIN)

34-0826607

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

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

Part I Basic Information

1	Enter the valuation date: Month 1 Day 1 Year 2011			
2	Assets:			
	a Market value		2a	695,010
	b Actuarial value		2b	626,838
3	Funding target/participant count breakdown:		(1) Number of participants	(2) Funding Target
	a For retired participants and beneficiaries receiving payment	3a	18	487,366
	b For terminated vested participants	3b	13	115,236
	c For active participants:			
	(1) Non-vested benefits	3c(1)		20,326
	(2) Vested benefits	3c(2)		265,354
	(3) Total active	3c(3)	14	285,680
	d Total	3d	45	888,282
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]			
	a Funding target disregarding prescribed at-risk assumptions		4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor		4b	
5	Effective interest rate		5	6.25 %
6	Target normal cost		6	10,235

Statement by Enrolled Actuary

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

SIGN HERE

FK

Signature of actuary

10/12/12

Date

Frank Kropf

Type or print name of actuary

11-06650

Most recent enrollment number

Towers Watson Delaware

Firm name

(704) 620-6542

Telephone number (including area code)

150 North College Street, Ste. 3050

Charlotte NC 28202-2173

Address of the firm

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

Part II Beginning of year carryover and prefunding balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	65,480
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	65,480
10	Interest on line 9 using prior year's actual return of 14.25 %		9,331
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		33
b	Interest on (a) using prior year's effective rate of 6.62 % except as otherwise provided (see instructions)		2
c	Total available at beginning of current plan year to add to prefunding balance		35
d	Portion of (c) to be added to prefunding balance		35
12	Other reductions in balances due to elections or deemed elections		74,846
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	70.56 %
15	Adjusted funding target attainment percentage	15	70.56 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	67.48 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
01/10/2011	5,000		08/09/2011	5,000	
02/11/2011	5,000		10/05/2011	5,000	
03/10/2011	2,000		11/02/2011	5,000	
05/09/2011	5,000		12/05/2011	5,000	
06/13/2011	5,000		01/05/2012	5,000	
07/19/2011	5,000		02/02/2012	3,600	
			Totals • 18(b)	87,800	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	82,999

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
3.78 %	6.31 %	6.57 %	

b Applicable month (enter code)	21b	4
22 Weighted average retirement age	22	65

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	31a	10,235
b Excess assets, if applicable, but not greater than 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	261,444	54,849
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	65,084

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

36 Additional cash requirement (line 34 minus line 35)	36	65,084
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	82,999
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	17,915
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

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

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

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

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

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