Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

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

OMB Nos. 1210-0110
1210-0089

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
SEQUA PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1952

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

SEQUA CORPORATION

300 BLAISDELL ROAD
ORANGEBURG, NY 10962-2506

2b Employer Identification Number (EIN) 13-1885030

2c Sponsor's telephone number 845-230-7352

2d Business code (see instructions) 333610

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2012	MICHAEL BLICKENSDERFER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

300 BLAISDELL ROAD
ORANGEBURG, NY 10962-2506

3b Administrator's EIN
13-1885030

3c Administrator's telephone number
845-230-7352

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**	2436
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**	1675
b	Retired or separated participants receiving benefits	**6b**	4429
c	Other retired or separated participants entitled to future benefits	**6c**	4321
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	10425
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	669
f	Total. Add lines **6d** and **6e**	**6f**	11094
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	6
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 1B 1G 3H

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

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

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

A Name of plan
SEQUA PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-1885030

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

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

Part I Basic Information

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

2 Assets:

a	Market value	**2a**	52680227
b	Actuarial value	**2b**	48348944

3 Funding target/participant count breakdown:

			(1) Number of participants	**(2)** Funding Target
a	For retired participants and beneficiaries receiving payment	**3a**	919	29276950
b	For terminated vested participants	**3b**	1036	16296681
c	For active participants:			
	(1) Non-vested benefits	**3c(1)**		193611
	(2) Vested benefits	**3c(2)**		16551517
	(3) Total active	**3c(3)**	481	16745128
d	Total	**3d**	2436	62318759

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**	6.29 %
6	Target normal cost	**6**	3572971

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

09/13/2012
Signature of actuary — Date

MARK GENGENBACH,F.S.A.,E.A. — 11-07102
Type or print name of actuary — Most recent enrollment number

TOWERS WATSON PENNSYLVANIA INC. — 212-309-3400
Firm name — Telephone number (including area code)

335 MADISON AVENUE
NEW YORK, NY 10017-4605
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)	2304884	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	2304884	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 15.39%		
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		0
b	Interest on (a) using prior year's effective rate of 6.62 % except as otherwise provided (see instructions)		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.00 %
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	81.12 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2011	754000				
07/14/2011	754000				
10/14/2011	754000				
			Totals ► 18(b)	2262000	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	2190540

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:	
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** 3572971

b Excess assets, if applicable, but not greater than 31a **31b**

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	88681063	6205141
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** 9778112

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	7589197	0	7589197

36 Additional cash requirement (line 34 minus line 35)..... **36** 2188915

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)..... **37** 2190540

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

a Total (excess, if any, of line 37 over line 36) **38a** 1625

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances **38b** 1625

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** 533848

43 Excess installment acceleration amount to be carried over to future plan years **43** 0

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

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

A Name of plan
SEQUA PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-1885030

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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(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)

BUCK CONSULTANTS

13-3954297

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	15303	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

TOWERS WATSON

23-1159360

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	396180	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

BENXL TECHNOLOGIES

23-2694597

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	NONE	87614	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

KPMG, LLP

34-6565596

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	87735	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MORGAN STANLEY DEAN WITTER

13-3040307

(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?
28 50 51 52	NONE	511757	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

GOLDMAN SACHS ASSET MANAGEMENT, LP

13-3575636

(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?
28 50 51 52	NONE	335174	Yes [X] No [ ]	Yes [X] No [ ]	0	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)

IRVING PLACE CAPITAL PARTNERS

13-4122604

(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 28 50 51	NONE	0	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

UBS GLOBAL ASSET MGMT.

13-2725861

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 28 50 51 52	NONE	189455	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

THE BANK OF NEW YORK

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 25 50	NONE	310818	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

TROUTMAN SANDERS LLP

58-0946915

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	170037	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

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

A Name of plan
SEQUA PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-1885030

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: SEQUA CORPORATION MASTER TRUST

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
13-3708564-001	M	419298758

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

A Name of plan
SEQUA PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-1885030

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	795000	
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	51749976	419298758
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	52544976	419298758
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	89436	448292
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	89436	448292
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	52455540	418850466

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)	2262000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		2262000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		-17346613
(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		-15084613
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	14625196	
(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)		14625196
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)	697245	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	572401	
(4) Other	2i(4)	197237	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1466883
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		16092079
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-31176692
l Transfers of assets:			
(1) To this plan	2l(1)		397571618
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

(1) Name: KPMG, LLP (2) EIN: 13-5565207

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

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

A Name of plan
SEQUA PENSION PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-1885030

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 13-3708654

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** 72

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete items 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If item 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete items (a) through (c)

a Enter the percentage of plan assets held as:
Stock: 55% Investment-Grade Debt: 29% High-Yield Debt: 0% Real Estate: 9% Other: 7%

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):

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

Independent Auditors' Report

Employee Benefit Plans Administrative Committee

Sequa Pension Plan:

We were engaged to audit the accompanying Statements of Net Assets Available for Benefits of the Sequa Pension Plan (the Plan) as of December 31, 2011 and 2010 and the related Statements of Changes in Net Assets Available for Benefits for the years then ended. These financial statements are the responsibility of the Plan's management.

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the investment information summarized in Note 8, which was certified by The Bank of New York Mellon, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of and for the years ended December 31, 2011 and 2010 that the information provided to the plan administrator by the trustee is complete and accurate.

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

KPMG LLP

September 17, 2012

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

SEQUA PENSION PLAN

Financial Statements

December 31, 2011 and 2010

(With Independent Auditors' Report Thereon)

Sequa Pension Plan

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KPMG LLP

September 17, 2012

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

Sequa Pension Plan

Statements of Net Assets Available for Benefits

December 31, 2011 and 2010

	2011	2010
Assets		
Plan interest in Sequa Corporation Master Trust (Note 8)	$ 419,298,758	$ 51,749,976
Employer contributions receivable	-	795,000
Total assets	419,298,758	52,544,976
Liabilities		
Accrued expenses	448,292	89,436
Net assets available for benefits	$ 418,850,466	$ 52,455,540

See accompanying notes to financial statements.

Sequa Pension Plan

Statements of Changes in Net Assets Available for Benefits

For the Years Ended December 31, 2011 and 2010

	2011	2010
(Reductions) additions to net assets available for benefits:		
Investment (loss) income:		
Plan interest in Sequa Corporation Master Trust (Note 8)	$ (17,346,613)	$ 7,101,129
Less investment expenses	717,568	143,752
Total investment (loss) income	(18,064,181)	6,957,377
Employer contributions	2,262,000	795,000
Total (reductions) additions	(15,802,181)	7,752,377
Deductions from net assets available for benefits:		
Benefits paid directly to participants	14,625,196	2,888,258
Administrative expenses	579,407	182,238
Payments to PBGC	169,908	183,421
Total deductions	15,374,511	3,253,917
Net (decrease) increase before Plan merger	(31,176,692)	4,498,460
Plan merger (Note 1)	397,571,618	-
Net increase	366,394,926	4,498,460
Net assets available for benefits:		
Beginning of year	52,455,540	47,957,080
End of year	$ 418,850,466	$ 52,455,540

See accompanying notes to financial statements.

Sequa Pension Plan

Notes to Financial Statements

December 31, 2011 and 2010

(1) Description of the Plan

(a) General

The Sequa Pension Plan (the "Plan") is a non-contributory, defined benefit plan sponsored by Sequa Corporation (the "Company"). Effective July 1, 2011, the Plan covers all eligible salaried and hourly non-bargaining employees, as well as certain hourly employees, covered by collective bargaining agreements with employers that have adopted the Plan. Prior to July 1, 2011, the Plan only covered certain hourly employees covered by collective bargaining agreements with employers that have adopted the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

On June 30, 2011, the Sequa Retirement Plan merged with and into the Plan. All participants of the Sequa Retirement Plan became participants of the Plan as of the merger date. Net assets of $397,571,618 were transferred into the Plan on July 1, 2011. There were no changes to participants' eligibility or benefits as a result of the merger.

(b) Participation and Benefits

Certain collective bargaining employees become eligible for participation in the Plan upon the attainment of age 21 and the completion of one year of service, as defined in the Plan document. Participation in the Sequa Retirement Plan for non-union employees was frozen to new employees on December 31, 2005.

Participants are eligible for pension benefits upon reaching normal retirement age of 65 provided they are fully vested (credited with at least five years of service). There is no partial vesting before five years of service. Pension Plan benefit payments are determined by the collective bargaining agreements for the employees in the Plan. Sequa Retirement Plan benefit payments are based on a specified percentage of participant's average compensation multiplied by years of benefit service. Both the Plan and the Sequa Retirement Plan also contain provisions for early retirement, late retirement, disability and surviving spouse benefits.

Further information regarding eligibility for participation, the methods used to determine participants' accrued benefits, type of benefits and vesting provisions is contained in the Plan document, which is available to all Plan participants.

(c) Funding and Administrative Expenses

The Company contributes such amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to Plan participants. The amount funded normally includes the Plan's annual or normal cost for the current year and amortization of the estimated prior service cost arising from qualifying service before the establishment of any amendments to the Plan. The Company's policy is to fund pension costs accrued to meet the minimum funding requirements of ERISA. The Company was in compliance with the minimum funding requirements of ERISA. Administrative expenses are paid out of Plan assets.

(2) Summary of Accounting Policies

The accompanying financial statements of the Plan have been prepared in accordance with U.S. Generally Accepted Accounting Principles ("U.S. GAAP"). The more significant accounting policies followed by the Plan are as follows:

(a) New Accounting Pronouncements

In January 2010, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2010-06, "*Fair Value Measurements and Disclosures: Improving Disclosures about Fair Value Measurements*" ("ASU 2010-06"). ASU 2010-06 adds new requirements for disclosures about transfers into and out of Levels 1 and 2 and separate disclosures about purchases, sales, issuances and settlements relating to Level 3 measurements. It also clarifies existing fair value disclosures about the level of disaggregation and about inputs and valuation techniques used to measure fair value. ASU 2010-06 was effective for the first reporting period, beginning after December 15, 2009, except for the requirement to provide the Level 3 activity of purchases, sales, issuances and settlements on a gross basis, which was effective for fiscal years beginning after December 15, 2010. In the period of initial adoption, entities were not required to provide the amended disclosures for any previous periods presented for comparative purposes. The Plan adopted the disclosure requirements effective for 2010 and 2011. The Company believes the disclosure requirements effective did not have a material impact on the Plan's financial statements.

In May 2011, the FASB issued ASU No. 2011-04, "*Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and International Financial Reporting Standards (Topic 820) - FairValue Measurement*" ("ASU 2011-04"). ASU 2011-04 relates to fair value measurements, related disclosures and consistent meaning of the term "fair value" in U.S. GAAP and International Financial Reporting Standards. The amendment clarifies how to apply the existing fair value measurements and disclosures. For fair value measurements classified within level 3, an entity is required to disclose quantitative information about the unobservable inputs. A reporting entity is also required to disclose additional information like valuation process, a narrative description of the sensitivity of the fair value measurements to changes in unobservable inputs and the interrelationships between those unobservable inputs. This update will become effective for the Plan beginning in the first quarter of 2012 and is not expected to have a material effect on the Plan's financial statements.

(b) Investment Valuation and Income Recognition

All Plan assets are held by the Sequa Corporation Master Trust (the "Master Trust"). The Master Trust investments reflected in the accompanying financial statements have been reported at fair value.

Purchases and sales of investments are recorded on a trade-date basis. Interest income is accrued when earned. Dividend income is recorded on the ex-dividend date. Net appreciation (depreciation) includes the Master Trust's gains (losses) on the investments bought and sold as well as held during the year.

(c) Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein and disclosures of the actuarial present value of accumulated plan benefits and contingent assets and liabilities. These estimates and assumptions are based on management's best estimate and judgment. Management evaluates its estimates and assumptions on an ongoing basis using historical experience and other factors, including consideration of the current economic environment. Management adjusts such estimates when facts and circumstances dictate. As future events and their effects cannot be determined with precision, actual results may differ from those estimates and assumptions.

(d) Payment of Benefits

Benefit payments to participants are recorded upon distribution.

(3) Plan Termination

Although the Company has not expressed any intent to do so, it has the right to terminate the Plan in accordance with the Plan provisions and the provisions set forth by ERISA. Should the Plan terminate at some future time, its net assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation (the "PBGC") at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC, while other benefits may not be provided for at all.

The PBGC will guarantee the payment of most vested normal retirement-age benefits and early retirement-age benefits which employees were receiving or were entitled to receive as of the date the Plan terminated. Such benefits, however, are only guaranteed to the extent of the actuarial value of the vested benefit as of the date the Plan terminates, payable in the form of a straight life annuity commencing at age 65. For 2012, the total amount of such guaranteed benefits is subject to an overall monthly ceiling of $4,653, which is adjusted periodically by the PBGC.

Plan members will be fully vested in their rights under the Plan to the extent then funded, in the order of priority specified in the Plan. In accordance with ERISA, a more detailed description of the allocation of the Plan assets upon termination can be obtained by reference to the Plan document, which is available to all Plan participants.

(4) Trust Agreement

Under the terms of the Master Trust Agreement, The Bank of New York Mellon (the "trustee") serves as trustee of the Plan and carries out an investment policy established by the Sequa Corporation Employee Benefit Plans Investment Committee, consistent with the purposes of the Plan and the requirements of applicable laws and regulations. The trustee is considered a party-in-interest to the Plan.

(5) Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died and (c) present employees or their beneficiaries. Benefits payable under all circumstances – retirement, death, disability, and termination of employment – are included to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

Towers Watson Pennsylvania Inc., the Company's actuary and retirement consultant, estimated the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment. Benefits under the Plan are based on the benefit levels negotiated between the Company and each union, multiplied by the employee's benefit service to a maximum of 30 years. The actuarial present value of accumulated plan benefits was calculated on January 1, 2011, and therefore excludes the Sequa Retirement Plan participants as the Sequa Retirement Plan was not merged with and into the Plan on this date. Benefit obligations of the Sequa Retirement Plan were $319,094,557 on December 31, 2010.

The actuarial present value of accumulated plan benefits as of December 31, 2010 is as follows:

Vested benefits:	
Retired participants and beneficiaries	$ 25,490,913
Other participants	25,616,030
Non-vested benefits	154,182
Total actuarial present value of accumulated plan benefits	$ 51,261,125

The changes in actuarial present value of accumulated plan benefits since the date of the previous Plan valuation, December 31, 2009, are as follows:

Actuarial present value of accumulated benefits as of December 31, 2009	$ 47,932,491
Increase (decrease) attributed to:	
Benefits accumulated, plan amendments and gains and losses	1,018,393
Interest	3,721,292
Benefit payments	(2,888,258)
Assumption changes	1,477,207
	3,328,634
Actuarial present value of accumulated benefits as of December 31, 2010	$ 51,261,125

The more significant assumptions underlying the computations are as follows:

Assumed rate of return on investments	8.0% compounded annually
Mortality basis	Internal Revenue Service ("IRS") 2011 Static Mortality Table
Normal retirement	Age 65

Actuarial assumptions for the period before normal retirement include factors for mortality and termination of employment.

Assumption changes include an update in the Plan's mortality table from the RP-2000 blended mortality table projected to 2006 using Scale AA to the IRS required mortality tables (with separate rates for annuitants projected to 2018 using Scale AA and for non-annuitants projected to 2026 using Scale AA) for the 2010 valuation.

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

Future negotiated benefit increases are immediately recognized in funding costs as required by the Retirement Protection Act of 1994.

Plan Changes

The following changes in Plan provisions took place or became effective in 2011 and 2012 and are not included in the determination of accumulated Plan benefits as of December 31, 2010:

- Effective February 28, 2011, benefit accruals for active participants employed at the ARC Automotive, Inc. facility at Knoxville, Tennessee were frozen. No new employees will be eligible to participate in the Plan.

- Effective June 30, 2011, the Sequa Retirement Plan merged with and into the Plan. The Plan document was restated in its entirety on July 1, 2011 as a result of the plan merger.

- Effective January 31, 2012, benefit accruals for active participants employed at the Precoat Metals Division facility at Granite City, Illinois were frozen. No new employees will be eligible to participate in the Plan.

- Effective March 31, 2012, benefit accruals for active participants employed at the Precoat Metals Division facility at St. Louis, Missouri were frozen. No new employees will be eligible to participate in the Plan.

(6) Risks and Uncertainties

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

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could be material to the financial statements.

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

(7) Tax Status

The IRS has determined and informed the Company by a letter dated April 4, 2002, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or de-recognition of an asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2008.

(8) The Sequa Corporation Master Trust Information (Unaudited)

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the following information was certified by The Bank of New York Mellon, the trustee of the Plan and the Master Trust, and was not subject to any auditing procedures

performed by the independent auditors except for comparing such information with the related information included in the financial statements. Prior to the merger of the Sequa Retirement Plan with and into the Plan, investment income and administrative expenses relating to the Master Trust were allocated to the individual plans based upon average and month-end market values invested by each plan or by specific expense allocations by provider.

The following table presents the fair values of investments for the Master Trust as of December 31, 2011 and 2010. Investments that represent 5% or more of the Master Trust's net assets, as certified by the trustee, are listed separately:

	2011	2010
Investments at fair value:		
Common stock	$ 74,074,058**	$ 69,990,358**
Mutual funds:		
Vanguard Bond Index Fund	117,467,653	118,399,235
Morgan Stanley Emerging Growth Pooled Trust	47,640,031	52,267,222
Vanguard Value Index Fund	23,509,565	23,238,174
Vanguard Mid-Cap Index Fund	22,877,692	23,334,046
Vanguard Emerging Markets Stock Index Fund	21,432,931	26,327,776
Templeton Funds Inc. World Fund	10,750,159*	24,035,815
Other mutual funds	17,186,155	19,679,916
Collective trust funds:		
EB Daily Valued Stock Index Fund	33,989,116	33,275,147
Other collective trust funds	17,677,882	17,980,573
Limited partnerships	7,849,387	10,572,385
Total investments at fair value	394,454,629	419,100,647
Cash and cash equivalents:		
BNY Mellon Collective Short Term Investment Fund 5	24,620,112	23,172,700
Other cash and cash equivalents	2,129	43,481
Total cash and investments	419,076,870	442,316,828
Accrued interest	174,671	179,649
Receivables for securities sold, not delivered	100,103	25,412
Payables for securities purchased, not received	(52,886)	(60,968)
Net assets of Master Trust	$ 419,298,758	$ 442,460,921
Plan's interest in net assets of Master Trust	$ 419,298,758	$ 51,749,976

* This investment represented less than 5% of the Master Trust's net assets as of December 31, 2011 but is presented for comparative purposes.

** No one individual investment included in the amount was 5% or more of the Master Trust's net asset balance.

The Master Trust income, as certified by the trustee, for the years ended December 31, 2011 and 2010 is as follows:

	2011	2010
Net (depreciation) appreciation in fair value of investments	$ (6,254,139)	$ 51,707,214
Dividends	8,230,345	8,301,727
Partnership income	95,360	553,468
Interest	15,707	90,529
Investment income	$ 2,087,273	$ 60,652,938
Plan's interest in investment income of Master Trust	$ (17,346,613)	$ 7,101,129

During 2011 and 2010, the Master Trust's investments, including gains and losses on investments bought and sold as well as held during the year, (depreciated) appreciated in value by ($6,254,139) and $51,707,214, respectively, as follows:

	2011	2010
Mutual funds	$ (10,259,556)	$ 28,173,194
Common stock	2,167,389	14,210,303
Limited partnerships	1,426,750	1,161,170
Collective trust funds	411,278	8,162,547
Net (depreciation) appreciation in fair value of investments	$ (6,254,139)	$ 51,707,214

(9) Fair Value Measurements

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

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

Level 2 Inputs to the valuation methodology include:

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

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

Following is a description of the valuation methodologies used by the Master Trust for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2011 and 2010.

Common stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual funds: Valued at the net asset value of shares held by the Plan at year end.

Collective trust funds: Valued at the net asset value per unit as determined by the collective trust as of the valuation date, which approximates fair value. Except for a short-term investment fund, there are no restrictions as to the redemption of these common collective trusts nor does the Plan have any contractual obligations to further invest in any individual common collective trusts.

For the short-term investment fund, in order to control liquidity and avoid realized losses on the sale of securities, requests for cash redemptions were not permitted where participants desired to exit the fund. In making this determination to restrict participants from exiting the fund, the trustee considered the liquidity position of the fund, the anticipated need for liquidity going forward, the current market prices of the securities in the fund and the effect of the redemption on the non-redeeming participants in the fund. The Plan has no contractual obligations to further invest in the fund.

Limited partnerships: Fair value is based on the best information available and is determined by the General Partner of the Partnership by reference to information including, but not limited to, the following: projected sales, net earnings, earnings before interest, taxes, depreciation and amortization, balance sheets, public or private transactions, valuations for publicly-traded comparable companies and/or other measures and consideration of any other pertinent information including the types of securities held and restrictions on disposition. The methods employed to determine the fair value use either the market, income or cost approaches.

The trustee applied the practical expedient for valuing its investment in limited partnerships as permitted under U.S. GAAP, which allows for the estimation of the fair value of investments in investment companies for which the investment does not have a readily determinable fair value using net asset value per share, or its equivalent, as reported by the general partner. The Plan cannot withdraw from the limited partnerships prior to their dissolution. Because the limited partnership interests cannot be redeemed in the near term, the investments are included in Level 3 of the fair value hierarchy.

The following represents a summary of the redemption periods of limited partnership investments made by the Master Trust:

	Fair Value at December 31, 2011	Date of Redemption
Irving Place Capital Partners II L.P.	$ 3,598,142	April 2012 unless extended for an additional 2 years
TCW Shared Opportunity Fund IV LP	2,235,382	December 2012 unless extended for an additional 1 year
Other limited partnership interests	2,015,863	Various through 2013
	$ 7,849,387	

The primary business objective of the limited partnerships is to seek significant capital appreciation through private equity and equity-related investments in leveraged buyouts, recapitalizations and growth capital opportunities. The Plan does not have any significant contractual obligations to further invest in any of the individual limited partnerships.

The amount of liquidity provided to investors in a particular limited partnership is generally consistent with the liquidity and risk associated with the underlying portfolio (i.e., the more liquid the investments in the portfolio, the greater the liquidity provided to the investors).

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.

The investment information presented was taken from the certified amounts provided by the trustee.

The following tables set forth by level, within the fair value hierarchy, the Master Trust's investments, excluding cash and cash equivalents, at fair value as of December 31, 2011 and 2010:

Investments at Fair Value as of December 31, 2011

	Level 1	Level 2	Level 3	Total
Domestic common stock	$ 74,074,058	$ -	$ -	$ 74,074,058
Mutual funds:				
Fixed income	117,467,653	-	-	117,467,653
Small cap equity	47,640,031	-	-	47,640,031
International equity	38,619,086	-	-	38,619,086
Large cap equity	34,259,724	-	-	34,259,724
Mid cap equity	22,877,692	-	-	22,877,692
Collective trust funds:				
Domestic stock index	-	33,989,116	-	33,989,116
Mid cap equity	-	17,677,882	-	17,677,882
Limited partnerships	-	-	7,849,387	7,849,387
Total investments at fair value	$ 334,938,244	$ 51,666,998	$ 7,849,387	$ 394,454,629

Investments at Fair Value as of December 31, 2010

	Level 1	Level 2	Level 3	Total
Domestic common stock	$ 69,990,358	$ -	$ -	$ 69,990,358
Mutual funds:				
Fixed income	118,399,235	-	-	118,399,235
Large cap equity	52,267,222	-	-	52,267,222
Small cap equity	47,273,989	-	-	47,273,989
International equity	46,007,692	-	-	46,007,692
Mid cap equity	23,334,046	-	-	23,334,046
Collective trust funds:				
Domestic stock index	-	33,275,147	-	33,275,147
Mid cap equity	-	17,980,573	-	17,980,573
Limited partnerships	-	-	10,572,385	10,572,385
Total investments at fair value	$ 357,272,542	$ 51,255,720	$ 10,572,385	$ 419,100,647

The following tables set forth a summary of changes in the fair value of the Master Trust's Level 3 investments for the years ended December 31, 2011 and 2010:

	Balance, January 1, 2011	Acquisitions	Dispositions	Realized/ Unrealized Gains	Balance, December 31, 2011
Limited partnerships	$ 10,572,385	$ -	$ (4,149,748)	$ 1,426,750	$ 7,849,387

	Balance, January 1, 2010	Acquisitions	Dispositions	Realized/ Unrealized Gains	Balance, December 31, 2010
Limited partnerships	$ 13,984,922	$ 139,100	$ (4,712,807)	$ 1,161,170	$ 10,572,385

(10) Subsequent Events

We evaluated subsequent events from the date of the financial statements through September 17, 2012, which represents the date these financial statements were issued. Other than the Plan amendments which took effect in 2012, as disclosed in Note 5, there were no other events or transactions occurring during this subsequent event reporting period which require recognition or disclosure in the financial statements.

Schedule SB - Statement by Enrolled Actuary

Plan Sponsor	Sequa Corporation
EIN/PN	13-1885030 / 001
Plan Name	Sequa Retirement Plan
Valuation Date	January 1, 2011
Enrolled Actuary	Mark Gengenbach, F.S.A.
Enrollment Number	11-07102

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 Sequa Retirement Plan merged with and into the Sequa Pension Plan effective June 30, 2011. The minimum required contribution for the period during 2011 after the merger (i.e, July 1, 2011 to December 31, 2011) for the former Sequa Retirement Plan was first determined by calculating the minimum required contribution for the 2011 Plan Year had the merger not occurred (equal to a full year's Target Normal Cost and net shortfall amortization installment, plus the full amount of the acceleration adjustment). This full year amount was then prorated to develop the minimum required contribution for the period July 1, 2011 to December 31, 2011. This amount is added to the minimum required contribution for the 2011 Plan Year determined for the Sequa Pension Plan had the merger not occurred. The combined amount is shown on the attached forms.

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: Sequa Pension Plan

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN): 13-1885030

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

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

Part I Basic Information

1	Enter the valuation date: Month 1 Day 1 Year 2011			
2	Assets:			
	a Market value	2a		52,680,227
	b Actuarial value	2b		48,348,944
3	Funding target/participant count breakdown:		(1) Number of participants	(2) Funding Target
	a For retired participants and beneficiaries receiving payment	3a	919	29,276,950
	b For terminated vested participants	3b	1,036	16,296,681
	c For active participants:			
	(1) Non-vested benefits	3c(1)		193,611
	(2) Vested benefits	3c(2)		16,551,517
	(3) Total active	3c(3)	481	16,745,128
	d Total	3d	2,436	62,318,759
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		6.29 %
6	Target normal cost	6		3,572,971

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 Mark Gengenbach MBG — Signature of actuary

9/13/12 — Date

Mark Gengenbach, F.S.A., E.A. — Type or print name of actuary

11-07102 — Most recent enrollment number

Towers Watson Pennsylvania Inc. — Firm name

(212) 309-3400 — Telephone number (including area code)

335 Madison Avenue

New York NY 10017-4605 — 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)	2,304,884	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	2,304,884	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 15.39%		
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38 from prior year)		0
	b Interest on (a) using prior year's effective rate of 6.62% except as otherwise provided (see instructions)		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.00 %
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	81.12 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/14/2011	754,000				
07/14/2011	754,000				
10/14/2011	754,000				
			Totals • 18(b)	2,262,000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	2,190,540

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:	
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	3,572,971
b Excess assets, if applicable, but not greater than 31a	31b	

	Outstanding Balance	Installment
32 Amortization installments:		
a Net shortfall amortization installment	88,681,06[illegible]	6,205,141
b Waiver amortization installment	(	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	9,778,112

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	7,589,197	0	7,589,197

36 Additional cash requirement (line 34 minus line 35)	36	2,188,915
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	2,190,540
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	1,625
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	1,625
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	533,848
43 Excess installment acceleration amount to be carried over to future plan years	43	0

Schedule SB, Line 22 - Description of Weighted Average Retirement Age
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

100% at age 65 for all active participants.

Sequa Corporation
Sequa Pension Plan
Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
EIN / PN: 13-1885030 / 001

Sequa Pension Plan (prior to merger with Sequa Retirement Plan)

Actuarial Assumptions and Methods – Contributions

Economic Assumptions

Interest rate basis:	
▸ Applicable month	September 2010
▸ Yield curve basis	Segment Rates
Interest rates:	
▸ First segment rate	3.78%
▸ Second segment rate	6.31%
▸ Third segment rate	6.57%
▸ Effective interest rate	6.29%
Annual rates of increase:	
▸ Compensation	N/A
▸ Future Social Security wage bases	N/A
▸ Statutory limits on compensation	N/A

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee becomes a participant
New or rehired employees	It was assumed there will be no new or rehired employees. This plan has been closed to new entrants.
Mortality	
▸ Healthy	Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments, projected to 2026 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments projected to 2018 using Scale AA)
▸ Disabled	RP-2000 blended mortality table projected to 2006 using Scale AA set forward 10 years
Termination	Rates varying by age

Representative Termination Rates

Percentage leaving during the year	
Attained Age	Rate
20	7.90%
25	7.72%
30	7.22%
35	6.28%
40	5.15%
45	3.98%
50	2.56%
55	0.94%
60	0.09%
65	0.00%

Disability

Rates varying by age and gender

Representative Disability Rates

Percentage becoming disabled during the year		
Age	Males	Females
20	0.1130%	0.0520%
25	0.1340%	0.0730%
30	0.1732%	0.1266%
35	0.2416%	0.2046%
40	0.3516%	0.3092%
45	0.5388%	0.4622%
50	0.8886%	0.7292%
55	1.5386%	1.1840%
60	2.2236%	1.4462%
65	2.4680%	1.4770%

Retirement

100% at age 65 for all active participants

Benefit commencement date:

- Preretirement death benefit — The later of the death of the active participant or the date the participant would have attained age 55
- Deferred vested benefit — The later of age 65 or termination of employment
- Disability benefit — The later of age 40 and 10 years of service or incidence of disablement
- Retirement benefit — Upon termination of employment

Form of payment

40% of participants are assumed to elect a single life annuity,

20% are assumed to elect a 50% J&S annuity,

20% are assumed to elect a 100% J&S annuity,

10% are assumed to elect a 5 year certain and life annuity, and

10% are assumed to elect a 15 year certain and life annuity.

Percent married

For purposes of valuing pre-retirement surviving spouse benefits, 75% of participants were assumed to be married.

For purposes of determining the optional forms expected to be elected at commencement, 100% of participants were assumed to be married.

Spouse age

Wife three years younger than husband

Administrative expenses	$300,000 plus actual PBGC premiums for 2011

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year
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, benefit payments, 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.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. Towers Watson has reviewed the plan provisions with Sequa Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not.
Change in assumptions and methods since the last actuarial valuation	The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of January 2010 to September 2010. The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.

Former Sequa Retirement Plan (prior to merger with Sequa Pension Plan)

Actuarial Assumptions and Methods – Contributions

Economic Assumptions

Interest rate basis:	
▸ Applicable month	September 2010
▸ Yield curve basis	Segment rates
Interest rates:	
▸ First segment rate	3.78%
▸ Second segment rate	6.31%
▸ Third segment rate	6.57%
▸ Effective interest rate	6.22%
Annual rates of increase:	
▸ Compensation	4.00%
▸ Future Social Security wage bases	4.50%
▸ Statutory limits on compensation	4.00%

Demographic Assumptions

Inclusion Date	The valuation date coincident with or next following the date on which the employee becomes a participant
New or rehired employees	It was assumed there will be no new or rehired employees. This plan has been closed to new entrants.
Mortality	
► Healthy	Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments, projected to 2026 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments projected to 2018 using Scale AA)
► Disabled	Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments, projected to 2026 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments projected to 2018 using Scale AA)
Termination	Rates varying by age and service

Representative Termination Rates

Percentage leaving during the year

	Years of Service					
Attained Age	<1	1	2	3	4	>=5
20	30.0%	29.0%	28.0%	27.0%	26.0%	25.0%
25	30.0%	29.0%	28.0%	27.0%	26.0%	25.0%
30	21.0%	20.0%	19.0%	18.0%	17.0%	16.0%
35	15.0%	14.0%	13.0%	12.0%	11.0%	10.0%
40	10.0%	9.0%	8.0%	7.0%	6.0%	5.0%
45	7.0%	6.0%	5.0%	4.0%	3.0%	2.0%
50	5.0%	4.0%	3.0%	2.0%	1.0%	0.0%
55	4.0%	3.0%	2.0%	1.0%	0.0%	0.0%
60	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
65	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Disability	No disability rates are assumed

Retirement

Rates varying by age, average age 63

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
Age	Assumption
55	5.0%
56	3.0%
57	3.0%
58	3.0%
59	3.0%
60	3.0%
61	3.0%
62	25.0%
63	10.0%
64	10.0%
65	100.0%

Benefit commencement date:

- Preretirement death benefit — The later of the death of the active participant or the date the participant would have attained age 55
- Deferred vested benefit — The later of age 65 or termination of employment
- Retirement benefit — Upon termination of employment

Form of payment

50% of participants are assumed to elect a single life annuity and 50% are assumed to elect a 50% J&S annuity.

Percent married

For purposes of valuing pre-retirement surviving spouse benefits, 75% of participants were assumed to be married.

For purposes of determining the optional forms expected to be elected at commencement, 100% of participants were assumed to be married.

Spouse age

Wife three years younger than husband

Administrative expenses

$500,000 plus actual PBGC premiums for 2011

Methods	
Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year
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, benefit payments, 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.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. Towers Watson has reviewed the plan provisions with Sequa Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not. The plan pays small benefits (with a present value up to $5,000) in a single lump sum payment as well as lump sums to terminated participants if the value is less than $10,000. Such lump sums are not explicitly valued as such; rather such benefits are valued using the benefit choice assumptions described above.
Change in assumptions and methods since the last actuarial valuation	The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of January 2010 to September 2010. The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.

Sequa Pension Plan (union participants)

Plan Provisions

The effective date of the Plan is January 1, 1952. The plan was last restated effective January 1, 2011.

Initial Eligibility Date

Chromalloy Los Angeles	8/01/1987
Precoat St. Louis	2/01/1992
Precoat Granite City	11/21/1993
Precoat McKeesport	5/01/1996
Precoat Portage	9/01/1996
Casco	8/01/1997
MEGTEC	9/02/1997
Chromalloy Oklahoma	11/01/1997
Thermo Wisconsin	2/06/1999
ARC Knoxville	5/03/1999

Covered Employees

Precoat St. Louis, Precoat Granite City, Casco and MEGTEC

All eligible employees who were actively employed on the day prior to the initial eligibility date became eligible to participate on the initial eligibility date listed above. Employees hired after the initial eligibility date are eligible to participate on the date the employee attains age 21 and completes one year of service in which 1,000 hours are worked.

Chromalloy Los Angeles, Precoat McKeesport, Precoat Portage and Chromalloy Oklahoma

All employees who were participants in the prior plan the day prior to the initial eligibility date listed above, became participants on the date listed above. All other employees at these locations are eligible to participate on the date the employee attains age 21 and completes one year of service in which 1,000 hours are worked.

ARC Knoxville

All eligible employees who were actively employed on the day prior to the initial eligibility date became eligible to participate on the initial eligibility date listed above provided they had an offer of employment from ARC dated April 7, 1999. Employees hired after the initial eligibility date are eligible to participate on the date the employee attains age 21 and completes one year of service in which 1,000 hours are worked.

Thermo Wisconsin

All eligible employees who were actively employed on the initial eligibility date became eligible to participate on the initial

	eligibility date listed above. Employees hired after the initial eligibility date are eligible to participate on the date the employee attains age 21 and completes one year of service in which 1,000 hours are worked. Effective June 30, 2011 the Sequa Retirement Plan was merged into the Sequa Pension Plan. All participants of the Sequa Retirement Plan became participants of the Sequa Pension Plan as of the merger date. Benefits remained unchanged for the Sequa Pension Plan participants and the former Sequa Retirement Plan participants.
Participation Date	Date of becoming a covered employee

Definitions

Vesting service	One year for each 1,000-hour calendar year of employment by Sequa
Pension service	*Precoat Portage* The sum of (a) and (b): (a) Total number of years and months that the participant received credit for pension income prior to the initial eligibility date. (b) After the initial eligibility date, the participant earns one year of benefit service for each Plan Year in which he works 1,000 hours. In addition, the total number of months in which the participant has been credited with 83 hours of service. *Precoat McKeesport* The sum of (a) and (b): (a) Total number of years and months that the participant received credit for pension income prior to February 3, 1996. (b) After February 2, 1996, the participant earns one year of benefit service for each Plan Year in which he works 1,000 hours. In addition, the total number of months in which the participant has been credited with 83 hours of service. *Chromalloy Los Angeles, Precoat St. Louis, Precoat Granite City, Casco, Chromalloy Oklahoma, MEGTEC, ARC Knoxville and Thermo Wisconsin* If employee was not vested in the prior plan before being eligible to participate in the Sequa Pension Plan, the sum of (a) and (b): (a) Total number of years and months that the participant received credit for pension income prior to the initial eligibility date. (b) After the initial eligibility date, the participant earns one year of benefit service for each Plan Year in which he works 1,000 hours. In addition, the total number of months in which the participant has been credited with 83 hours of service. If employee was vested in the prior plan before being acquired by Sequa Corporation: After the initial eligibility date, the participant earns one year of benefit service for each Plan Year in which he works 1,000 hours. In addition, the total number of months in which the participant has been credited with 83 hours of service.

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65

Monthly preretirement death benefit: 50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and deferred to the participant's earliest retirement age.

Monthly pension benefit: Product of (a) and (b):

(a) Dollar amount for applicable service dates (benefit multiplier)

(b) Years of pension service (subject to stated maximum service limits)

The dollar amount and maximum service limits are determined by collective bargaining agreement.

The levels as of January 1, 2011 are:

	Annual Dollar Amount	Effective Date	Applicable Service
Chromalloy Los Angeles (last 30-year service maximum)	$222	8-01-1990	All
	$234	11-04-1996	All
	$246	11-03-1997	All
	$264	11-02-1998	All
	$324	11-08-1999	All
	$336	11-06-2000	All
	$348	11-05-2001	All
	$360	11-04-2002	All
	$372	11-08-2004	All
	$384	11-07-2005	All
	$396	11-05-2007	All
	$408	1-01-2010	All
	$420	1-01-2012	All
Precoat St. Louis (last 30-year service maximum)	$396	2-01-1992	All
	$420	2-01-2001	All
	$456	2-01-2002	All
	$528	2-01-2007	All
	$540	2-01-2009	All

	$552	2-01-2011	All
Precoat Granite City	$396	11-21-1993	All
(last 30-year service maximum)	$420	11-21-1997	All
	$456	11-21-2001	All
	$600	11-20-2002	All
	$660	1-01-2009	All
Precoat McKeesport	$285.84	8-01-1995	All
(first 30-year service maximum if hired after 2-2-1996,	$312	2-04-1999	All
no service maximum if hired before 2-3-1996)	$318	2-04-2000	All
	$324	2-04-2001	All
	$330	2-04-2002	All
	$336	2-04-2003	All
	$348	2-04-2004	All
	$372	2-04-2005	All
	$384	2-04-2006	All
	$396	2-04-2007	All
	$408	2-04-2008	All
Precoat Portage	$216	5-01-1992	All
(last 30-year service maximum)	$300	1-01-2000	All
	$420	5-01-2000	All
	$480	5-01-2005	All
	$540	5-01-2010	All
Casco	$348	8-01-1997	All
(last 30-year service maximum)	$360	8-01-1998	All
	$372	8-21-2000	All
	$384	8-20-2001	All
	$396	8-19-2002	All
Chromalloy Oklahoma	$276	11-01-1997	All
(last 30-year service maximum)	$300	11-01-1998	All
	$312	11-01-1999	All
	$336	11-01-2000	All

	$360	11-01-2001	All
	$372	11-01-2002	After 11-01-2002
	$384	11-01-2003	After 11-01-2002
	$396	11-01-2004	After 11-01-2002
	$408	11-01-2005	After 11-01-2002
	$420	11-01-2006	After 11-01-2002
	$432	11-01-2009	After 11-01-2007
	$444	11-01-2011	After 11-01-2007
MEGTEC	$420	9-02-1997	All
(last 30-year service maximum)	$456	3-18-2001	All
	$612	3-18-2002	All
ARC Knoxville	$300	5-03-1999	All
(last 30-year service maximum)	$324	5-03-2000	All
	$348	5-03-2001	All
	$360	5-03-2002	All
	$372	5-03-2003	All
	$384	5-03-2004	All
	$396	5-02-2005	All
	$408	5-02-2006	All
	$420	5-02-2007	All
	$456	1-01-2008	After 1-01-2008
	Accruals froze as of February 28, 2011		
Thermo Wisconsin	$420	2-06-1999	All
(last 30-year service maximum)	$444	6-01-2000	All
	$456	6-01-2001	All

Eligibility for Benefits	
Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of vesting service
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service or age 55
Disability	Permanent and total disability and on or after attaining age 40 and completing ten years of vesting service
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events	
Normal retirement	Monthly pension benefit determined as of NRD
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD
	For MEGTEC participants, the reduction is 5% for each year that payment precedes the participant's NRD.
Postponed retirement	Monthly pension benefit determined as of actual retirement date
Vested termination	Monthly pension benefit determined as of termination date, reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD
	For MEGTEC participants, the reduction is 5% for each year that payment precedes the participant's NRD.
Disablement	Monthly pension benefit determined as of the date of disablement, payable immediately without reduction for early commencement
Preretirement death	Monthly preretirement death benefit reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD

Other Plan Provisions

Forms of payment	Preretirement death 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 date payments begin, 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 available ongoing are a 100%, 75%, or a 50% joint and survivor annuity, or a 5-, 10-, 15-, or 20-year certain and life annuity. Actuarial equivalence is based on an interest rate of 7.00% and Revenue Ruling 2001-62 mortality table. In addition a lump sum option is available if the value of the participant's benefit does not exceed $5,000.
Pension Increases	None
Plan participants' contributions	None
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 Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Future Plan Changes

Towers Watson is not aware of any future plan changes which are required to be reflected other than scheduled pension increases contained in the Collective Bargaining Agreements.

Changes in Benefits Valued Since Prior Year

The following changes were recognized in the January 1, 2011 valuation for contribution purposes:

- For participants of the Precoat Metals Division (Portage, Indiana), the monthly benefit rate for participants was increased from $40 to $45 effective May 1, 2010. The benefit increase applies to all years of benefit service. This change was also recognized for expense purposes.
- For participants of the Precoat Metals Division (St. Louis, Missouri), the monthly benefit rate for participants was increased from $45 to $46 effective February 1, 2011. The benefit increase applies to all years of benefit service.
- For participants of the Chromalloy Gas Turbine Division (Oklahoma), the monthly benefit rate for participants was increased from $36 to $37 effective November 1, 2011. The benefit increase applies to years of benefit service after November 2007.

Former Sequa Retirement Plan (salaried / non-union participants)

Plan Provisions

The effective date of the Plan is January 1, 1952. The plan was last restated effective January 1, 2008.

Covered Employees	All employees other than employees covered by a collective bargaining agreement, non-resident aliens with total earnings constituting foreign service income for U.S. federal income tax purposes, employees who are a citizen of the United States but a permanent resident of foreign jurisdiction, and any employees accruing a pension benefit under a defined benefit plan of the employer or an affiliated employer other than this plan. Effective June 30, 2011 the Sequa Retirement Plan was merged into the Sequa Pension Plan. All participants of the Sequa Retirement Plan became participants of the Sequa Pension Plan as of the merger date. Benefits remained unchanged for the Sequa Pension Plan participants and the former Sequa Retirement Plan participants.
Participation Date	Effective January 1, 1989, an employee is eligible to participate on the date the employee attains age 21 and completes one year of service. Each employee who was a participant in the plan immediately before January 1, 1989, shall continue to be a participant in the plan. Effective December 31, 2005 all active participants who had attained age 45 on or before December 31, 2005 were required to make a one-time irrevocable election either to continue earning accruals in the plan after December 31, 2005 or to freeze accruals and to participate instead in the discretionary profit-sharing portion of the Sequa 401(k) plan. All accruals were frozen for all active participants who had not attained age 45 on or before December 31, 2005. Effective June 30, 2011 this plan was merged into the Sequa Pension Plan. All participants of this Plan became participants of the Sequa Pension Plan as of the merger date. Benefits remained unchanged.

Definitions

Vesting service	The sum of all periods of service and credited severance periods, measured in full years and completed months.
Pension service	*Retirement and Consolidated (including TACR)* The sum of all periods of service beginning at the date an employee became a participant in this plan or a prior plan. However, if an employee elected to begin making the required employee contributions on the earliest date eligible, benefit service will begin at his date of hire, subject to age restrictions (not before age 25 prior to January 1, 1985; not before age 21 on or after January 1, 1985). Effective January 1, 1989, benefit service for new employees is calculated from date of employment.

	After Six Completed months of service from the employee's date of hire. Excludes service before February 27, 1968 for Superior Pants employees.
Pensionable pay	Base pay, overtime, bonuses, commissions, and annual incentives before any voluntary salary reduction (sections 401(k), 125, or 132(f) of the Internal Revenue Code). Pensionable pay excludes severance pay, salary continuation pay paid by an insurer, short and long term disability pay, workers compensation, relocation expenses, dues, housing, furnishing and auto allowances, fringe benefits, and any nonqualified plan of deferred compensation contributions.

Definitions

Average earnings	For Retirement and Consolidated (including TACR), the monthly average of a participant's pensionable pay beginning at the later of 1994 or date of employment and ending at termination of employment. For After Six, the monthly average of a participant's pensionable pay beginning at the later of 1984 or date of employment and ending at termination of employment.
Social Security benefit	The projected amount of the participant's primary Social Security benefit according to the law in effect at the date of termination of employment assuming continuation of then current earnings to age 65.
Covered compensation	The amount of monthly compensation with respect to which old age and survivor's insurance benefits would be provided to the participant under the Social Security Act, in effect as of the date of termination, determined as if the participant's annual compensation was equal to the maximum amount of earnings subject to tax under the Federal Income Contributions Act (OASDI portion).
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65
Monthly pension benefit	For Retirement and Consolidated (including TACR) the greater of (a) or (b) plus (c): (a) The sum of (i) and (ii) (i) 0.9% of average earnings multiplied by years of pension service (ii) 0.6% of average earnings in excess of covered compensation multiplied by years of pension service not in excess of 35 years (b) 1.1% of average earnings multiplied by years of pension service (c) The product of (i), (ii), and (iii) (i) The participant's shortfall addition per year percentage

(ii) Average earnings

(iii) Pension service earned after December 31, 1996 and before January 1, 2000

Additional minimum benefits apply under this plan for certain individuals.

For After Six the greater of (a), (b), (c), or (d):

(a) 0.9% of average earnings multiplied by pension service plus 0.6% of average earnings that exceeds covered compensation multiplied by pension service not in excess of 35 years

(b) 1.1% of average earnings multiplied by pension service

(c) The monthly accrued benefit under the plan as of December 31, 1988

(d) For non-highly compensated participants who were age 55 with 10 years of service as of January1, 1989, their expected benefit under the prior plan formula prorated for termination before normal retirement date.

Monthly preretirement death benefit	50% of the monthly pension benefit as of the date of death, reduced for the 50% joint and survivor election and deferred to the participant's earliest retirement age

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing five years of vesting service. For the participants of the Chromalloy American Corporation Pension Plan, retirement before NRD and on or after both attaining age 50 and completing ten years of vesting service.
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD

	For prior plan participants in the Chromalloy American Corporation Pension Plan for Salaried Employees as of December 31, 1988, an unreduced early retirement benefit is provided for participants whose age plus years of vesting service is at least equal to 90.
Postponed retirement	Monthly pension benefit determined as of actual retirement date
Vested termination	Monthly pension benefit determined as of termination date, reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD
Preretirement death	Monthly preretirement death benefit reduced 6.67% for each of the first five years and 3.33% for each of the next five years that payment precedes the participant's NRD

Other Plan Provisions

Forms of payment	Preretirement death 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 date payments begin, 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 available ongoing are a 100%, 75%, or a 66⅔% joint and survivor annuity, or a 5-, 10-, 15-, or 20-year certain and life annuity. Actuarial equivalence is based on an interest rate of 7.00% and Revenue Ruling 2001-62 mortality table. In addition a lump sum option is available if the value of the participant's benefit does not exceed $10,000.
Pension Increases	None
Plan Participants' Contributions	As of January 1, 1989 employee contributions are no longer required.
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 Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

The Plan was amended during 2010 to provide special enhanced benefits to certain individuals impacted by restructuring activities.

Sequa Corporation

Sequa Pension Plan

Schedule SB, Line 25 – Change in Method

EIN / PN: 13-1885030 / 001

The following method changes were reflected in the 2011 actuarial valuation:

Aspect of the Valuation	Old	New
Funding Interest Rate for Contributions	IRS prescribed segment rates without 3-year transition, based on bond yields through January 2010	IRS prescribed segment rates without 3-year transition, based on bond yields through September 2010

The Sequa Retirement Plan merged with and into the Sequa Pension Plan effective June 30, 2011. The minimum required contribution for the period during 2011 after the merger (i.e, July 1, 2011 to December 31, 2011) for the former Sequa Retirement Plan was first determined by calculating the minimum required contribution for the 2011 Plan Year had the merger not occurred (equal to a full year's Target Normal Cost and net shortfall amortization installment, plus the full amount of the acceleration adjustment). This full year amount was then prorated to develop the minimum required contribution for the period July 1, 2011 to December 31, 2011. This amount is added to the minimum required contribution for the 2011 Plan Year determined for the Sequa Pension Plan had the merger not occurred. The combined amount is shown on the attached forms.

Schedule SB, Line 26 - Schedule of Active Participant Data
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

Schedule of Active Participant Data
Total Years of Credited Service

Attained Age		<1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
<25	Count	0	0	0	0	0	0	0	0	0	0
25 to 29	Count	0	8	3	0	0	0	0	0	0	0
30 to 34	Count	0	4	7	5	0	0	0	0	0	0
35 to 39	Count	0	3	9	15	3	0	0	0	0	0
40 to 44	Count	0	2	14	16	14	1	1	0	0	0
45 to 49	Count	1	7	16	35	24	6	1	0	0	0
50 to 54	Count	0	5	18	40	22	11	6	7	0	0
55 to 59	Count	0	5	8	40	14	7	0	3	7	0
60 to 64	Count	0	4	6	39	10	8	2	0	1	1
65 to 69	Count	0	0	2	9	3	2	0	0	0	0
70 & up	Count	0	0	0	3	0	2	1	0	0	0

Schedule SB, Line 32(a) - Schedule of Shortfall Amortization Bases and Installments
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

Type of Base	Plan	Date Established	Initial Amount	Remaining Period	PV of Future Installments	Amortization Installment (Full Year)	Amortization Installment (Period from 7/1/2011 to 12/31/2011)	Acceleration Adjustment (Full Year)	Acceleration Adjustment (Period from 7/1/2011 to 12/31/2011)	Total Amortization Installment (Period from 1/1/2011 to 12/31/2011)
Shortfall	Pension Plan	1/1/2010	8,770,015	6	7,893,140	1,465,704	N/A	0	N/A	1,465,704
Shortfall	Pension Plan	1/1/2011	6,076,675	15	6,076,675	588,410	N/A	74,691.00	N/A	663,101
Shortfall	Former Retirement Plan	1/1/2011	74,711,248	15	74,711,248	7,234,359	3,617,179.50	918,313.00	459,156.50	4,076,336
Total					**88,681,063**					**6,205,141**

Schedule SB, Line 15 - Adjusted Funding Target Attainment Percentage (AFTAP)
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

	Pension Plan	Former Retirement Plan	Pension Plan (After merger)
	Plan Number: 001	Plan Number: 002	Plan Number: 001
Market Value of Assets (Line 2a)	52,680,227	391,995,966	444,676,193
Actuarial Value of Assets (Line 2b)	48,348,944	359,576,239	407,925,183
Total Funding Target (Line 3d(2))	62,318,759	381,086,559	443,405,318
Carryover Balance (Line 13a)	-	53,200,928	53,200,928
Prefunding Balance (Line 13b)	-	-	-
AFTAP	N/A	N/A	80.00%

The Sequa Retirement Plan merged with and into the Sequa Pension Plan effective June 30, 2011. The 2011 AFTAP for the Pension Plan shown in Line 15 is composed of the combined Pension Plan and former Retirement Plan on a pro-forma basis had the merger occurred on January 1, 2011.

Schedule SB, Line 14 - Funding Target Attainment Percentage (FTAP)
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

	Pension Plan	Former Retirement Plan	Pension Plan (After merger)
	Plan Number: 001	**Plan Number: 002**	**Plan Number: 001**
Market Value of Assets (Line 2a)	52,680,227	391,995,966	444,676,193
Actuarial Value of Assets (Line 2b)	48,348,944	359,576,239	407,925,183
Total Funding Target (Line 3d(2))	62,318,759	381,086,559	443,405,318
Carryover Balance (Line 13a)	-	53,200,928	53,200,928
Prefunding Balance (Line 13b)	-	-	-
FTAP	N/A	N/A	80.00%

The Sequa Retirement Plan merged with and into the Sequa Pension Plan effective June 30, 2011. The 2011 FTAP for the Pension Plan shown in Line 14 is composed of the combined Pension Plan and former Retirement Plan on a pro-forma basis had the merger occurred on January 1, 2011.

Schedule SB, Line 35 - Balances Elected for Use to Offset Funding Requirement
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

	Pension Plan Plan Number: 001	Former Retirement Plan Plan Number: 002	Pension Plan (After merger) Plan Number: 001
Carryover balance at beginning of current year (Line 13)	0	53,200,928	53,200,928
Target Normal Cost (Line 31a)	1,461,646	2,111,325	3,572,971
Amortization Installments (Line 32a)	2,128,805	4,076,336	6,205,141
Total funding requirements (Line 34)			9,778,112
Balance used to offset funding requirement (Line 35)			7,589,197
Additional cash requirement (Line 36)			2,188,915
Contributions allocated towards minimum required contribution for current year adjusted to valuation date (Line 37)			2,190,540
Present value of excess contributions for current year (Line 38)			
Total (excess, if any, of line 37 over 36) (Line 38a)			1,625

Schedule SB, Line 42 - Amount of Acceleration Adjustment
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

	Pension Plan (Period from 01/01/2011 to 12/31/2011)	Former Retirement Plan (Period from 07/01/2011 to 12/31/2011)	Pension Plan (After merger)
	Plan Number: 001	Plan Number: 002	Plan Number: 001
Amount of acceleration adjustment	74,691	459,157	533,848

Schedule SB, Line 6 - Target Normal Cost
Sequa Pension Plan

EIN / PN: 13-1885030 / 001

	Pension Plan (Period from 01/01/2011 to 12/31/2011)	Former Retirement Plan (Period from 07/01/2011 to 12/31/2011)	Pension Plan (After merger)
	Plan Number: 001	Plan Number: 002	Plan Number: 001
Target Normal Cost	1,461,646	2,111,325	3,572,971