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 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

2018

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [X] 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
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

1b Three-digit plan number (PN) ▶ 006

1c Effective date of plan 01/01/2018

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
FOSTER WHEELER, INC.

1105 LAKEWOOD PARKWAY
SUITE 300
ALPHARETTA, GA 30009

2b Employer Identification Number (EIN)
22-3800664

2c Plan Sponsor's telephone number
770-630-0600

2d Business code (see instructions)
541330

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.	10/11/2019	MARY OSBOURNE
	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 [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	1585
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	81
a(2) Total number of active participants at the end of the plan year	**6a(2)**	59
b Retired or separated participants receiving benefits	**6b**	747
c Other retired or separated participants entitled to future benefits	**6c**	697
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	1503
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	71
f Total. Add lines **6d** and **6e**.	**6f**	1574
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	0
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A 1C 3H 1I

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) Insurance	[ ]	**(1)** Insurance	[ ]
(2) Code section 412(e)(3) insurance contracts	[ ]	**(2)** Code section 412(e)(3) insurance contracts	[ ]
(3) Trust	[X]	**(3)** Trust	[X]
(4) General assets of the sponsor	[ ]	**(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)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[X]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2018 Form M-1 annual report. If the plan was not required to file the 2018 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

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

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

▶ **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
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

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

D Employer Identification Number (EIN)
22-3800664

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 2018

2 Assets:

a Market value	**2a**	167065003
b Actuarial value	**2b**	167065003

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	777	141245545	141245545
b For terminated vested participants	740	32941227	32941227
c For active participants	81	8202922	8263059
d Total	1598	182389694	182449831

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	5.52 %
6 Target normal cost	**6**	1160000

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary	10/08/2019 Date
ANTHONY WAGMAN Type or print name of actuary	17-07407 Most recent enrollment number
MERCER Firm name	404-442-3100 Telephone number (including area code)
3560 LENOX ROAD SUITE 2400 ATLANTA, GA 30326 Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	20290828
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	8486754
9	Amount remaining (line 7 minus line 8)	0	11804074
10	Interest on line 9 using prior year's actual return of 15.27 %	0	1802482
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.73%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
	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	4689952
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	8916604

Part III Funding Percentages

14	Funding target attainment percentage	14	86.68%
15	Adjusted funding target attainment percentage	15	86.68%
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	89.15%
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
			Totals ► 18(b)	0	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	0

20 Quarterly contributions and liquidity shortfalls:

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

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

c If line 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:	
3.92%	5.52%	6.29%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	66

23 Mortality table(s) (see instructions)

Prior regulation: ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Current regulation: ☐ 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 subject to 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**	1160000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	24301432	4554118
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**	5714118

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	5714118	5714118

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0

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

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

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

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

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.**	**2018** **This Form is Open to Public Inspection.**

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

C Plan sponsor's name as shown on line 2a of Form 5500
FOSTER WHEELER, INC.

D Employer Identification Number (EIN)
22-3800664

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

POINTER MANAGEMENT, LLC

30-0115725

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

EVANSTON CAPITAL MANAGEMENT, LLC

30-0046847

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

ARCM FEEDER FUND II LTD

WALKERS CORPORATE LIMITED CAYMAN CORP CENTRE, 27 HOSPITAL RD
GEORGE TOWN, GRAND CAYMAN KY1-9008 KY

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

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

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

MERCER

13-2834414

(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	NONE	261957	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MILLIMAN, INC.

91-0675641

(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	NONE	168138	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LEGAL ANG GENERAL INVESTMENT MANAGE

35-7085469

(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	NONE	147322	Yes ☐ No ☒	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)

THE KILTEARN GLOBAL EQUITY FUND

27-4585908

(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	NONE	84478	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

STATE STREET

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
25 28	NONE	80148	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

J.H. ELLWOOD & ASSOCIATES, INC.

36-3121777

(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	NONE	53270	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)

EISNERAMPER LLP

13-1639826

(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	NONE	42749	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 ☐

(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

2018

This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
FOSTER WHEELER, INC.

D Employer Identification Number (EIN)
22-3800664

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: FOSTER WHEELER INC. MASTER TRUST

b Name of sponsor of entity listed in (a): FOSTER WHEELER, INC.

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)
22-3800664-007	M	139930529

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

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

C Plan sponsor's name as shown on line 2a of Form 5500
FOSTER WHEELER, INC.

D Employer Identification Number (EIN)
22-3800664

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(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)	0	139930529
(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	0	139930529
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	0	139930529

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)		
	(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)		0
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
	(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

		(a) Amount	(b) Total
(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)		-9359382
(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		-9359382
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	15998148	
(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)		15998148
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)	472845	
(2) Contract administrator fees	2i(2)	25946	
(3) Investment advisory and management fees	2i(3)	339290	
(4) Other	2i(4)	971165	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		1809246
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		17807394
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-27166776
l Transfers of assets:			
(1) To this plan	2l(1)		167097305
(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) [X] Unqualified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

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

(1) Name: EISNERAMPER LLP **(2)** EIN: 13-1639826

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 lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 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	

			Yes	No	Amount
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		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ..... ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 4166402. (See instructions.)

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 sections 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

2018

This Form is Open to Public Inspection.

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

A Name of plan
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

C Plan sponsor's name as shown on line 2a of Form 5500
FOSTER WHEELER, INC.

D Employer Identification Number (EIN)
22-3800664

Part I Distributions

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

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

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

EIN(s): 04-1867445

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

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 0

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 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 lines 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 lines 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 lines 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 lines 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 lines 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 lines 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 line 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 lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: 45.0 % Investment-Grade Debt: 43.0 % High-Yield Debt: 0.0 % Real Estate: 0.0 % Other: 12.0 %

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 line 19(b)?
☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

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Foster Wheeler Inc. Pension Plan for Certain Employees

Financial Statements
December 31, 2018

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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator, Participants and Beneficiaries
of the Foster Wheeler Inc. Pension Plan for Certain Employees

Report on the Financial Statements

We have audited the accompanying financial statements of Foster Wheeler Inc. Pension Plan for Certain Employees (the "Plan"), which comprise the statements of net assets available for benefits and of accumulated plan benefits as of December 31, 2018, and the related statements of changes in net assets available for benefits and of changes in accumulated plan benefits for the year ended December 31, 2018, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements, in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the Plan's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial status of the Plan as of December 31, 2018, and the changes in its financial status for the year ended December 31, 2018, in accordance with accounting principles generally accepted in the United States of America.

EisnerAmper LLP

EISNERAMPER LLP
Iselin, New Jersey
October 10, 2019

Foster Wheeler Inc.
Pension Plan for Certain Employees
Statement of Net Assets Available for Benefits
As of December 31, 2018

	2018
Assets	
Investments, at fair value:	
Plan interest in Foster Wheeler Inc. Master Trust	$ 139,930,529
Net assets available for benefits	$ 139,930,529

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

Foster Wheeler Inc.
Pension Plan for Certain Employees
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2018

Additions to/(deductions from) net assets attributable to:	
Plan interest investment loss in Foster Wheeler Inc. Master Trust	$ (9,359,382)
Benefits paid	(15,998,148)
Administrative expenses	(1,809,246)
Net decrease prior to transfer	(27,166,776)
Spin-out from the Foster Wheeler Inc. Salaried Employees Pension Plan	167,097,305
Net assets available for benefits	
Beginning of year	-
End of year	$ 139,930,529

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

Foster Wheeler Inc.
Pension Plan for Certain Employees
Statement of Accumulated Plan Benefits
As of December 31, 2018

	2018
Actuarial present value of accumulated plan benefits	
Vested benefits:	
Retired participants and beneficiaries receiving benefits	$ 151,017,688
Other participants	38,430,415
	189,448,103
Non-vested benefits	41,982
Total actuarial present value of accumulated plan benefits	$ 189,490,085

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

Foster Wheeler Inc.
Pension Plan for Certain Employees
Statement of Changes in Accumulated Plan Benefits
For the Year Ended December 31, 2018

Actuarial present value of accumulated plan benefits at January 1, 2018	$ 0
Increase/(decrease) during the year attributable to	
Spin-out of liabilities from the Foster Wheeler Inc. Salaried Employees Pension Plan	204,632,039
Benefits accumulated, including experience (gains) and losses	1,779,247
Change in average discount period	9,014,453
Benefits paid	(15,998,149)
Change in actuarial assumptions	(9,937,505)
Net increase	189,490,085
Actuarial present value of accumulated plan benefits at December 31, 2018	$ 189,490,085

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

1. Description of the Plan

Effective January 1, 2018, the Foster Wheeler Inc. Pension Plan for Certain Employees ("Certain Plan") was created by spinning out 1,607 participants, related accumulated plan benefits, and plan assets from the Foster Wheeler Inc. Salaried Employees Pension Plan ("Salaried Plan") based on actuarial calculations using certain criteria as permitted by the Internal Revenue Code and ERSA regulations. Also effective January 1, 2018, the Foster Wheeler Inc. Master Trust was established. See Master Trust Note 3 for further details.

The Foster Wheeler Inc. (the "Company") Pension Plan for Certain Employees (the "Plan") is a noncontributory defined benefit pension plan.

The Company was a wholly-owned subsidiary of Foster Wheeler AG until Amec plc's acquisition of Foster Wheeler AG in November 2014. The combined company was renamed Amec Foster Wheeler plc ("Amec Foster Wheeler"). On October 9, 2017, John Wood Group PLC acquired Amec Foster Wheeler. The Company is now a wholly-owned subsidiary of John Wood Group PLC.

The following brief description of the Plan is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

Eligible employees of the Plan consist of 1,607 salaried employees of many domestic subsidiaries of the Company hired prior to June 2003, who are named in Appendix A of the Plan document. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The plan administrator was the Amec Foster Wheeler Fiduciary Committee through December 31, 2018 and is the Wood Fiduciary Committee effective January 1 2019. The plan administrator determines the appropriateness of the investments including the allocation of Plan funds among various investment institutions and securities. Those investment institutions are responsible for determining the underlying investments, in accordance with guidelines set forth by the plan administrator.

The Plan provides benefits under a final pay feature ("FPF") for participants as of December 31, 1998 or eligible employees hired before January 1, 1999, who made such an irrevocable election. The FPF benefit is calculated as 1.2% of final average monthly earnings multiplied by service earned subsequent to April 1, 1976 and through May 31, 2003. Final average monthly earnings represent the average of the monthly earnings during the highest 60 consecutive months during the last 120 months prior to retirement or termination of employment.

Benefits for participants as of December 31, 1998 who did not make such an irrevocable election or those eligible employees hired after December 31, 1998, are determined using a cash balance formula. For those employees who elected the cash balance formula, the accrued benefit that they have earned through December 31, 1998, under the Plan, if any, will be preserved and paid from the Plan in accordance with the applicable Plan provisions. The balances of those participants who did not elect the cash balance formula were maintained under the existing FPF benefit formula.

The cash balance formula provides a notional cash account which is increased each year by a contribution credit and an interest credit. For participants covered by the cash balance option, the contribution credit was equal to a percentage of the participant's earnings, as defined in the amended Plan, in accordance with stratified schedules based on the participant's age. Participants under the cash balance formula were not credited with contribution credits after May 31, 2003. The interest credit for the Plan year is equal to the 12 month average of the 30 Year Treasury Bond rate as declared by the Federal Reserve Board for the preceding calendar year, but in no event will the interest be credited at a rate less than 4.5%. The cash balance credit rate was 5.0% as of the most recent and prior year's actuarial valuations.

Effective May 31, 2003, credited service ceased and no longer accrued on behalf of Plan participants. However, service continues to be credited for purposes of determining eligibility for early retirement and vesting.

Eligibility and Vesting Service
Eligible employees are those spun-off from the Foster Wheeler Inc. Salaried Employee Pension Plan and listed in Appendix A of the Plan document. Participants in the Plan without cash balance accounts are vested after completing five years of vesting service. Participants with cash balance accounts who had a least one hour of service on or after January 1, 2008 are vested after three years of vesting service. A year of vesting service is defined as a plan year during which at least 1,000 hours of service is credited. Participants who terminated before becoming fully vested forfeited the right to receive their accumulated benefits.

Pension, Disability and Death Benefits
The Plan permits early retirement at ages 55 to 64 with ten years of credited service. The early retirement benefit may begin at the date of early retirement, reduced by 3% for each of the first five years and 5% for each additional year by which the early retirement date precedes the normal retirement date. All participants may elect to receive their pension benefits in the form of a joint and survivor annuity or a life annuity payable monthly from the date of retirement. If any vested participant dies prior to the date their pension payments commence, the surviving spouse of that deceased vested participant receives benefits at least equal to the amount which would have been payable to the spouse under a 50% joint and survivor annuity. Under the life annuity, there are no continuing payments after the death of the retiree.

Vested participants, who have completed ten or more years of credited service and whose employment has terminated due to a permanent disability shall be entitled to an immediate retirement benefit commencing as of the first day of the following month in an amount equal to 50% of the normal retirement benefits they have accumulated under the Plan as of the time they became disabled. If these participants are terminated before rendering five years of service, they forfeit the right to receive their accumulated benefits. Disability benefits are paid until normal retirement age, at which time disabled participants begin receiving normal retirement benefits under the Plan.

2. Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements are prepared on the accrual basis in conformity with accounting principles generally accepted in the United States of America.

Recent accounting pronouncement

In February 2017, the FASB issued Accounting Standards Update No. 2017-06 ("ASU 2017-06"), Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965) Employee Benefit Plan Master Trust Reporting. The ASU is intended to improve the usefulness of plan financial statements and disclosures, and to provide clarity. It is effective for fiscal years beginning after December 15, 2018. Earlier adoption is permitted.

The Plan adopted ASU 2017-06 as of and for the year ended December 31, 2018.

In August, 2018, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update No. 2018-13 ("ASU 2018-13"), Fair Value Measurement (Topic 820) Disclosure Framework-Changes to the Disclosure Requirements for Fair Value Measurement. The amendments in this update apply to all entities that are required to make disclosures about recurring or nonrecurring fair value measurements. Certain of the disclosures that are required by the amendments are not required for nonpublic entities .ASU 2018-13, eliminates, adds and modifies certain disclosure requirements for fair value measurements as part of its disclosure framework project. ASU 2018-13 is effective for fiscal years beginning after December 15, 2019 and interim periods within those fiscal years. The amendments on changes in unrealized gains and losses, the range and weighted average of significant unobservable inputs used to develop Level 3 fair value measurements, and the narrative description of measurement uncertainty should be applied prospectively for only the most recent annual period presented in the year of adoption. All other amendments should be applied retrospectively to each period for which the financial statements are presented. Early adoption is permitted. An entity is permitted to early adopt any removed or modified disclosures and delay adoption of the additional disclosures until their effective date.

The Plan elected to adopt ASU 2018-13 as of and for the year ended December 31, 2018.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The plan administrator determines the Plan's valuation policies utilizing information provided by its custodians, investment advisors and investment managers. See Note 4 for a discussion of fair value measurement.

Purchases and sales of securities in the Master Trust are recorded on a trade-date basis. Interest and other income are recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net depreciation in the value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses
The Plan's expenses are paid either by the Master Trust on behalf of the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from the Plan's financial statements. Certain expenses incurred in connection with the general administration of the Plan such as actuarial, investment management, custodial, auditing, and Pension Benefit Guaranty Corp. ("PBGC") fees are paid by the Master Trust on behalf of the Plan and are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. In addition, certain investment related expenses are included in the interest in investment loss of the master trust presented in the accompanying Statement of Changes in Net Assets Available for Benefits. See Master Trust Note 3 for further details.

Benefit Payments
Benefits payments are recorded when paid.

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

Subsequent Events
The Company evaluated subsequent events through October 10, 2019, which is the date the financial statements were available to be issued.

3. Plan interest in the Master trust

Effective January 1, 2018, simultaneously with the creation of this Plan, the Foster Wheeler Inc., Master Trust was created. The Certain Plan's investments are held in a master trust which was established for both the assets of the Certain plan and the Salaried Plan. The assets of the master trust are held by State Street Bank and Trust Company as the custodian. The assets of the Master Trust are held within two separate pools, of which one is divided and one is undivided. The Salaried Plan holds a divided interest in pool one (the AXA contract). The remaining assets of the master trust are held within an undivided pool.

The investment and income therefrom, are allocated to the participating plans based on each plan's divided and undivided interest in the investment options within the master trust. Accordingly, the Plan's investment loss for the year ended December 31, 2018 includes its allocable share of the master trust's interest and dividends and net depreciation in fair value of investments.

Benefit payments are allocated specifically to the participant's applicable plan. Expenses attributed to a specific plan are allocated to that plan whereas general expenses are allocated to the individual plan based upon its interest in the master trust.

As of December 31, 2018, the Plan's interest in the master trust was approximately 66%.

The following table presents the fair value of assets, including investments, of the Master Trust and the applicable interest of the Plan.

	December 31, 2018	
	Master Trust Balances	**Plan's Interest in Master Trust Balances**
Investments at fair value:		
Mutual funds	$ 94,693,054	$ 58,914,956
Comingled Funds	94,801,644	64,497,206
Hedge Funds	24,262,099	16,611,736
Total investments at fair value	**213,756,797**	**140,023,898**
Plus:		
Accrued interest	6,624	4,246
Less:		
Accrued expenses	197,850	97,615
Total	**$213,565,571**	**$139,930,529**

The investment loss for the master trust for the year ended December 31, 2018 is as follows:

Investment loss:	
Net depreciation in fair value of investments	$ (17,063,747)
Interest	105,871
Dividends	3,504,560
Total investment loss	**(13,453,316)**

4. Fair Value Measurements

FASB ASC 820, *Fair Value Measurements and Disclosures,* provides the 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 under FASB ASC 820 are described as follows:

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 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 for the master trust investment assets measured at fair value at December 31, 2018.

Mutual Funds. The Master Trust invests in mutual funds that invest in equity securities. Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Master Trust are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Master Trust are deemed to be actively traded.

Commingled Funds. The Master Trust invests in various commingled investment funds, representing assets in trusts and limited partnerships which are exempt from federal income taxation under the Internal Revenue Code, and are primarily designed for pension, profit sharing and other employee benefit plans. Shares or units in these funds are valued at their NAV. The NAV as provided by the investment manager or sponsor of the fund is used as a practical expedient to estimate the fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV. Participant transactions (such as purchases and sales) may occur daily.

Hedge Funds. The Master Trust invests in hedge funds of derivative contracts and multi-strategy "fund-of-funds" formed to invest predominantly in limited partnerships and similar pooled investment vehicles. Shares or units in these funds are valued at their NAV. The NAV as provided by the investment manager or sponsor of the fund is used as a practical expedient to estimate the fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV. Participant transactions (such as purchases and sales) may occur quarterly.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although 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 closing prices reported in the active markets in which the securities are traded are used to value the investments in the master trust. The following table set forth, by level, within the fair value hierarchy, the master trust's fair value measurements at December 31, 2018.

Master Trust Investment Assets at Fair Value as of December 31, 2018

	Level 1	Level 2	Level 3	Total
Mutual Funds	$ 94,693,054	$	$	$ 94,693,054
Commingled funds measured at NAV(1)				94,801,644
Hedge funds measured at NAV(1)				24,262,099
Total investment assets in the fair value	$ 94,693,054	$ -	$ -	$ 213,756,797

(1) These investments are measured at fair value using the net asset value per share as a practical expedient and have not been categorized in the fair value hierarchy in accordance with the Plan's adoption of ASU 2015-07. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Statements of Net Assets Available for Benefits.

Changes in the Master Trust Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in the economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another.

The following table summarizes the Master Trust investments measured at fair value based on NAV per share as of December 31, 2018:

	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Commingled funds:				
Bonds/fixed income [1]	$ 90,697,209	$ 658.565	Daily - 48 Month Lock-up	1 - 6 Days
Short-term investments [2]	$ 4,104,434	N/A	Daily	N/A
Hedge funds:				
Multi-strategy fund of funds [3]	$ 24,262,099	N/A	Quarterly – 2 Year lock-up with Semi Annual Redemption	65 - 105 Days

(1) The funds invest in mortgage related securities, public and private high-yield non-investment grade and non-rated debt securities and collective investment funds. Additionally, an investment in distressed Asia Pacific debt and equity securities totaling $261,609 as of December 31, 2018 is redeemable after the expiration of a 48-month lock-up period. Finally, an investment in senior secured loans to middle market companies or other issuers totaling $1,151,777 as of December 31, 2018 has a further capital call totaling $658,565 and this investment is redeemable after the expiration of a 36-month lock-up period.

(2) The fund invests in obligations, issued or guaranteed by the U.S. government or its agencies or instrumentalities, in repurchase agreements collateralized by U.S. government securities and in money market mutual funds and other investment pools.
(3) The fund invests in private investments (i.e., fund of funds invested in equities and fixed income markets) that employ a variety of investment techniques and strategies.

The following table summarizes the Plan's interest in the Master Trust investments measured at fair value based on NAV per share as of December 31, 2018:

	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
Commingled funds:				
Bonds/fixed income [1]	$ 62,098,423	$ 450,905	Daily - 48 Month Lock-up	1 - 6 Days
Short-term investments [2]	$ 2,398,783	N/A	Daily	N/A
Hedge funds:				
Multi-strategy fund of funds [3]	$ 16,611,736	N/A	Quarterly – 2 Year lock-up with Semi Annual Redemption	65 - 105 Days

(1) The funds invest in mortgage related securities, public and private high-yield non-investment grade and non-rated debt securities and collective investment funds. Additionally, the plans interest in the Master trust investment in distressed Asia Pacific debt and equity securities totaling $179,118 as of December 31, 2018 is redeemable after the expiration of a 48-month lock-up period. Finally, an investment in senior secured loans to middle market companies or other issuers plan share totaling $788,597 as of December 31, 2018 has a further capital call plan share totaling $450,905 and this investment is redeemable after the expiration of a 36-month lock-up period.
(2) The fund invests in obligations, issued or guaranteed by the U.S. government or its agencies or instrumentalities, in repurchase agreements collateralized by U.S. government securities and in money market mutual funds and other investment pools.
(3) The fund invests in private investments (i.e., fund of funds invested in equities and fixed income markets) that employ a variety of investment techniques and strategies.

5. Risk and Uncertainties

Investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of uncertainty related to 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 Statement of Net Assets Available for Benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are prepared 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 estimates and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Volatility in the financial markets may significantly impact the subsequent valuation of the Master Trust Plan's investments and the allocable portion of the Plan. Accordingly, the valuation of

investments at December 31, 2018 may not necessarily be indicative of amounts that could be realized in a current market exchange.

6. Contributions and Benefits

Funding Policy

The Company's funding policy is to comply with the minimum funding requirements defined by ERISA. The Company has met the minimum funding requirement defined by ERISA for the plan year ended December 31, 2018.

A carryover amount totaling $5,714,118 was applied to the minimum required contribution for the plan year ended December 31, 2018.

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 which participants have rendered to date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated participants or their beneficiaries, (b) beneficiaries of participants who have died, and (c) present participants or their beneficiaries. Benefits payable under all circumstances – retirement, death, disability or termination of employment – are included to the extent they are deemed attributable to participant service rendered to the valuation date. The actuarial present value of accumulated plan benefits is determined by the Plan's credentialed independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits 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 dates of payment.

For participants who elected the cash balance formula, the accumulated plan benefit for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date.

The significant actuarial assumptions used in the valuations for the plan year ending December 31, 2018 was as follows

Mortality Basis	Adjusted Generational RP-2014 Separate Annuitant and Non-Annuitant Mortality Tables, projected with Scale MMP-2018 for the plan year ended December 31, 2018
Discount Rate	5.15% for the years ended December 31, 2018
Retirement	Stratified between the ages of 55 and 70

The foregoing actuarial assumptions are based on the presumption that the Plan will not terminate. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The computation of the actuarial present value of accumulated plan benefits was made as of January 1, 2019 for the 2018 Plan year. Had the valuation been performed as of December 31, 2018 there would be no material difference.

7. Tax Status

As noted in footnote 1, the Plan was spun-out of the Salaried Plan. All of the plan provisions of the Salaried Plan were incorporated into the Certain Plan. The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated February 4, 2016 that the Foster Wheeler Inc. Salaried Employees Pension Plan is qualified under the Internal Revenue Code ("IRC") and therefore the related trust is exempt from taxation. Because the Certain Plan's provisions are identical to those of the Salaried Plan and its assets are held within the same master trust, the Plan Administrator believes that the Certain Plan is also qualified under the IRC and therefore the related trust is exempt from taxation.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by a government authority. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2018 there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine examinations by taxing jurisdictions; however, there are currently no examinations for any tax periods in progress.

Several of the Master Trust's investments are incorporated as either a Cayman Island exempted limited company or a Cayman Island exempted limited partnership. Plan management ensures compliance with the foreign tax filing requirements related to these investments.

8. Related Party and Party In Interest Transactions

For the year ended December 31, 2018, total fees of $935,697 were paid by the Plan to parties in interest for trustee, advisory, investment management, actuarial, recordkeeping, and audit services.

9. Termination Priorities

Although it has not expressed any intent to do so, in the event of termination, the Plan provides that the net assets be allocated among the participants and beneficiaries of the Plan in the order provided for in ERISA and its related regulations and, to the extent unfunded vested benefits exist, ERISA provides that such benefits are payable by the Pension Benefit Guaranty Corporation to participants, up to specified limitations, as described in ERISA.

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

a. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding Plan termination.
b. Other vested benefits insured by the Pension Benefit Guaranty Corporation.

c. All other vested benefits (that is, vested benefits not insured by the PBGC).
d. All non-vested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. The maximum guarantee is set by law and it is updated each calendar year. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. A statutory ceiling exists, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For plan terminations occurring during 2018, that ceiling is $5,420 per month. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). The amount is higher for those who retire later and lower for those that retire earlier or elect survivor benefits. Further limitations apply for plans created or amended to increase benefits within five years before the Plan's termination date. The PBGC guarantees the largest of 20% of the benefit increase or $20 per month for each full year the benefit increase was in effect.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide accumulated benefit obligations and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

10. Adjusted Funding Target Attainment Percentage ("AFTAP")

The Pension Protection Act (the "Act") of 2006 includes many provisions and numerous revisions to rules surrounding defined benefit plans that govern pension plan funding. The Act established new minimum funding standards for defined benefit plans and limits benefit increases and accruals for underfunded plans. Pursuant to the Act, each year actuaries are required to certify to a plan's funded percentage. The Plan received such certification for the 2018 Plan year for the AFTAP, which is one way of measuring the funded status of a plan using actuarial assumptions mandated by the IRS, and the actuary determined that the 2018 AFTAP for the Plan is 86.68%.

11. Mutual Fund Fees

Investments in mutual funds are subject to sales charges in the form of front-end loads, back-end loads or 12b-1 fees. 12b-1 fees, which are ongoing fees allowable under Section 12b-1 of the Investment Company Act of 1940, are annual fees deducted to pay for marketing and distribution cots of the funds. These fees are deducted prior to the allocation of the Master Trust investment earnings activity, and thus not separately identifiable as an expense.

Schedule SB, line 26 — Schedule of Active Participant Data

ATTAINED AGE	YEARS OF CREDITED SERVICE										
	UNDER 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & UP	TOTAL
Under 25											
25–29											
30–34											
35–39											
40–44											
45–49			7	4							11
50–54		1	11	13	4						29
55–59		3	6	3		1					13
60–64			1			5	7				13
65–69				2	1	2	8				13
70 & up						1	1				2
Total											
		4	25	22	5	9	16				81

In each cell, the top number is the count of active participants for each age/service combination

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

ACTUARIAL ASSUMPTIONS

DISCOUNT RATE SPONSOR ELECTIONS			
• Segment rates or full yield curve	Segment		
• Look-back months	4		
	Stabilized	**Non-stabilized**	
• First 5 years	3.92%	1.75%	
• Next 15 years	5.52%	3.76%	
• Over 20 years	6.29%	4.66%	
Mortality sponsor elections			
• Healthy participants	Section 430(h)(3) prescribed separate generational annuitant and nonannuitant mortality tables.		
417(e) lump sums	Not applicable		
Non-417(e) lump sums	Lump sum equals cash balance account balance		
Cash balance interest accumulation rates	5.00%		
Other economic assumptions			
• Salary increases	Not applicable		
• Flat-dollar benefit increases	Not applicable		
• Social Security taxable wage base increases	Not applicable		
• Inflation	Not applicable		
• Expected investment return	5.50% per year for 2018		
• Expenses	$1,160,000		

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

RATIONALE FOR ECONOMIC ASSUMPTIONS

- Cash balance interest accumulation rate – The cash balance crediting rate is equal to the 12 month average of 30-Year Treasury Rates, with a minimum annual rate of 4.50%. The assumption is based on a long-term outlook of 30-Year Treasury Rates and meets the minimum annual rate.
- Expected investment return – Expected returns are based on the median simulated investment return using capital market assumptions published in Mercer Investment Consulting's Capital Market Outlook for the plan's target asset mix, net of adjustments for additional return expected from active management and for expected expenses.
- Expenses – This assumption is the amount of administrative expenses expected to be paid from the trust based on the actual amount paid during the prior year, adjusted to reflect the estimated change in PBGC premiums for the current year.

DEMOGRAPHIC ASSUMPTIONS

• Withdrawal	See table of sample rates	
• Disability incidence	Not applicable	
• Retirement age	**Attained age** / **Rate of Retirement** 55-63 / 2% 64 / 10% 65 / 20% 66-69 / 15% 70 and above / 100%	
• Benefit commencement age for		
– Future vested deferred	Immediate upon termination for cash Balance benefits 64 for non-Cash Balance benefits	
– Current vested deferred	64	
• Spouse assumptions	**Male participants**	**Female participants**
– Percentage married	80%	80%
– Spouse age difference	3 years younger	3 years older

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

• **Form of payment — non-Cash Balance benefits**	**Single Life**	**Single Life with 10 Years Certain**	**50% J&S**	**100% J&S**
• Active retirements	40%	15%	20%	25%
• Future vested deferred	40%	15%	20%	25%
• Future disabilities	N/A	N/A	N/A	N/A
• Future deaths	0%	0%	100%	0
• Current vested deferred	40%	15%	20%	25%
Form of payment — Cash Balance benefits	100% lump sum equal to account balance			
Unpredictable contingent event assumptions	Not applicable			

Table of Sample Rates

ATTAINED AGE	WITHDRAWAL	
	MALE	FEMALE
20	11.25%	14.00%
25	11.25%	14.00%
30	11.25%	14.00%
35	9.00%	10.50%
40	7.50%	7.80%
45	6.40%	6.40%
50	4.80%	4.80%
55	0.00%	0.00%

RATIONALE FOR DEMOGRAPHIC ASSUMPTIONS

- Withdrawal – This assumption is based on recent plan experience as evaluated in a 2016 study by Milliman.
- Retirement age – This assumption is based on recent plan experience as evaluated in a 2016 study by Milliman.
- Benefit commencement age – This assumption is based on recent plan experience as evaluated in a 2016 study by Milliman.
- Form of payment – This assumption is based on recent plan experience as evaluated in a 2016 study by Milliman.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

ACTUARIAL METHODS FOR FUNDING

Asset Methods

The asset valuation method is an average of the adjusted market value for each year during the last two years preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110% and no less than 90% of the fair market value, as defined in IRC Section 430. Since the 2018 plan year is the first plan year, the actuarial value of assets equals the market value of assets.

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant Methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts:** The plan does not have any insurance contracts.

Minimum Funding Methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target**

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

normal cost is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.

- The plan's target normal cost is the sum of the individual target normal costs, and the plan's funding target is the sum of the individual funding targets for all participants under the plan.

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

2018

This Form is Open to Public Inspection

For calendar plan year 2018 or fiscal plan year beginning 01/01/2018 and ending 12/31/2018

▶ **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
FOSTER WHEELER INC. PENSION PLAN FOR CERTAIN EMPLOYEES

B Three-digit plan number (PN) ▶ 006

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

D Employer Identification Number (EIN)
22-3800664

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 2018

2 Assets:

a Market value	**2a**	167,065,003
b Actuarial value	**2b**	167,065,003

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	777	141,245,545	141,245,545
b For terminated vested participants	740	32,941,227	32,941,227
c For active participants	81	8,202,922	8,263,059
d Total	1,598	182,389,694	182,449,831

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	5.52%
6 Target normal cost	**6**	1,160,000

Statement by Enrolled Actuary

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

SIGN HERE

Anthony Wagman APW
Signature of actuary

10/8/2019
Date

ANTHONY WAGMAN
Type or print name of actuary

1707407
Most recent enrollment number

MERCER
Firm name

404-442-3100
Telephone number (including area code)

3560 LENOX ROAD
SUITE 2400
ATLANTA GA 30326
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	20,290,828
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	8,486,754
9	Amount remaining (line 7 minus line 8)	0	11,804,074
10	Interest on line 9 using prior year's actual return of 15.27%	0	1,802,482
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.73%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		
	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	4,689,952
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	8,916,604

Part III Funding Percentages

14	Funding target attainment percentage	14	86.68%
15	Adjusted funding target attainment percentage	15	86.68%
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	89.15%
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
			Totals ► 18(b)	0	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	0

20 Quarterly contributions and liquidity shortfalls:

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

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

c If line 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:	
3.92%	5.52%	6.29%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	66

23 Mortality table(s) (see instructions)

Prior regulation: ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Current regulation: ☐ 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 subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	**31a**	1,160,000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	24,301,432	4,554,118
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	5,714,118

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	5,714,118	5,714,118

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

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

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

Schedule SB, Line 7 — Explanation of Discrepancy in the Prior Year Funding Standard Carryover Balance or Prefunding Balance Change in Method

Effective January 1, 2018, the assets and liabilities associated with certain participants were spun off from the Foster Wheeler Inc. Salaried Employees Pension Plan (EIN 22-3800664 / PN 002) ("Original Plan") to the newly created separate Foster Wheeler Inc. Pension Plan for Certain Employees (EIN 22-3800664 / PN 006) ("Spin Off Plan") also sponsored by Wood. The amount shown on line 7 is equal to the amount shown on line 13 of the 2017 Form 5500 SB for the Original Plan, which was subsequently allocated between the Original Plan and the Spin Off Plan in conjunction with the spinoff. The development of the balance at the beginning of the current year (January 1, 2018) for the pre-spinoff Original Plan, and the allocation between the Original Plan and the Spin Off Plan is shown in this attachment.

	Carryover balance	**Prefunding balance**
Balance as of January 1, 2017	$ 0	$ 20,290,828
Portion applied in prior year	0	(8,486,754)
Interest at prior year investment return of 15.27%	0	1,802,482
Amount remaining as of January 1, 2018	$ 0	$ 13,606,556
Prior year excess contributions		
Discounted contributions allocated toward minimum required		$ 0
Minimum funding requirement (after applied credits)		0
Interest-adjusted excess contributions = discounted contributions minus minimum funding requirement (after applied credits)		$ 0
Interest to end of plan year on excess contributions not attributed to credit balance use at prior year effective interest rate of 5.73%		0
Interest to end of plan year on excess contributions attributed to credit balance use at prior year investment return of 15.27%		0
Total available to add to prefunding balance		$ 0
Portion added to prefunding balance		0
Reduction in balances due to election or deemed election effective January 1, 2018	**$ 0**	**$ 0**
Balance as of January 1, 2018	**$ 0**	**$ 13,606,556**
Credit balance available to offset minimum	**$ 0**	**$ 13,606,556**

Schedule SB, Line 7 — Explanation of Discrepancy in the Prior Year Funding Standard Carryover Balance or Prefunding Balance Change in Method

Summary of Credit Balances

		Allocated results	
	Before Spin-off	**Salaried**	**Certain**
Market value of assets	$ 254,883,443	$ 87,818,440	$ 167,065,003
Market value of assets minus credit balance[1]	241,276,887	83,128,488	158,148,399
Credit balance	**$ 13,606,556**	**$ 4,689,952**	**$ 8,916,604**

[1] Allocated in accordance with allocation of market value of assets.

Schedule SB, line 22 — Description of Weighted Average Retirement Age

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown below. The average retirement age is 66.

(A) Retirement age	(B) Retirement Percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
55	2%	10,000	200	11,000
56	2%	9,800	196	10,976
57	2%	9,604	192	10,949
58	2%	9,412	188	10,918
59	2%	9,224	184	10,884
60	2%	9,039	181	10,847
61	2%	8,858	177	10,807
62	2%	8,681	174	10,765
63	2%	8,508	170	10,720
64	10%	8,337	834	53,360
65	20%	7,504	1501	97,548
66	15%	6,003	900	59,430
67	15%	5,103	765	51,280
68	15%	4,337	651	44,239
69	15%	3,687	553	38,156
70	100%	3,134	3134	219,352
Total			**10,000.00**	**661,230**
Average				**66.12**

Schedule SB, Part V — Summary of Plan Provisions

SUMMARY OF MAJOR PLAN PROVISIONS

Effective date and plan year	Original plan: January 1, 2018 Plan year: January 1 to December 31
Status of the plan	Plan was frozen as of May 31, 2003. No participant may enter or accrue additional benefits under the plan after this date.
Significant events that occurred during the year	Effective January 1, 2018, Wood plc spun off assets and liabilities for certain participants from the Foster Wheeler, Inc. Salaried Employees Pension Plan to create this plan.
DEFINITIONS	
• Eligibility	Eligibility was frozen effective May 31, 2003.
• Employee contributions	Employee contributions ceased March 31, 1989. Balances remaining in the plan are credited with 5% interest to the earlier of withdrawal or benefit commencement date.
• Vesting service	Each plan year in which employee completes at least 1,000 hours of service. For the short plan year April 1, 1998 – December 31, 1998, year was granted if at least 750 hours completed
• Credited union service	Each plan year after April 1, 1976 in which member of Local 66 International Federation of Professional and Technical Engineers, AFL-CIO completes at least 1,000 hours of service. Frozen effective May 31, 2003
• Credited non-union service	Each plan year after April 1, 1976 in which non-union Salaried employee completes at least 1,000 hours of service. Frozen effective May 31, 2003.
• Pensionable earnings	Base pay plus bonus, excluding overtime pay.
• Average monthly earnings	Average of earnings during highest 60 consecutive months during final 120 months of employment. Frozen effective May 31, 2003.
• Cash balance amendment	Effective January 1, 1999, the benefit formula was amended to be a Cash Balance formula for all eligible employees hired after December 31, 1998. All eligible employees hired before January 1, 1999 were given a one-time irrevocable election to continue under the existing benefit formula or be covered under the Cash Balance formula for benefit accruals after December 31, 1998.
NORMAL RETIREMENT	
• Eligibility	Later of a) age 65 or b) earlier of i) 5th anniversary of participation, ii) 5 years of vesting service, or iii) date otherwise fully vested.

Schedule SB, Part V — Summary of Plan Provisions

• Benefit	**Participants who elected to continue under pre-1999 formula:** Sum of (1) + (2), not less than (3): (1) Sum of (A) + (B) (A) .012 x Average Monthly Earnings x (Credited Union Service + Credited Non-Union Service) (B) For participants with credited service under the Bargaining Plan, $8.50 x credited service prior to April 1, 1976 under the Bargaining Plan, minus sum of accrued benefits under the Bargaining Plan and the Non-Contributory Plan (Basic Non-Contributory Retirement Plan for the Employees of Foster Wheeler Corporation which was terminated January, 31 1987) (2) Frozen Contributory Monthly Benefit = March 31, 1989 accrued benefit under the contributory portion of the Plan in effect prior to April 1, 1989, but not less than the Employee-Provided Benefit (accrued benefit derived from employee contributions) (3) Minimum Benefit = $20.35 x Credited Service, less accrued benefits from any other Employer-sponsored Defined Benefit Plans **Participants who did not elect to continue under pre-1999 formula or who were hired after December 31, 1988:** Sum of (1) + (2): (1) December 31, 1988 accrued benefit under the Plan (2) Cash Balance formula. Interest credit equals the 12-month average of 30-Year Treasury Bond rates for the preceding calendar year, with minimum 4.5%, and is determined on the last day of the Plan Year. Contribution credits frozen effective May 31, 2003. **Participants with Bargaining Plan benefits only (as determined under provisions of Bargaining Plan):** $23.00 per month per year of Credited Service prior to July 1, 2001, $11.00 per month per year of Credited Service from July 1, 2001 through May 31, 2002 and $10 per month per year of Credited Service thereafter, less the monthly life annuity benefit purchased under the prior plan. Members of Local 68 received $26.00 per month per year of Credited Service through December 31, 2002. For this purpose, members received a year of Credited Service for the period April 1, 2002 through December 31, 2002 if 750 or more hours of service were worked.

Schedule SB, Part V — Summary of Plan Provisions

EARLY RETIREMENT	
• Eligibility	First day of the month following later of attainment of age 55 and completion of 10 years of vesting service.
• Benefit	Accrued benefit is reduced for early commencement as follows: For the $8.50 x Bargaining Plan service piece of pre-1999 formula, and Bargaining Plan only benefits, the following Bargaining Plan reduction factors are applied: Age Factor 55 .60 56 .65 57 .70 58 .75 59 .80 60 .87 61 .90 62 .98 63 .985 64 .99 65 1.00 For the Cash Balance formula taken as an annuity, actuarial equivalent of the cash balance account at commencement. Otherwise, the reduction is 3% per year for first 5 years and 5% per year for next 5 years.
LATE RETIREMENT	
• Eligibility	First day of any month following a participant's Normal Retirement Date in which participant elects to retire.
• Benefit	Accrued benefit determined as of late retirement date. Participants who were age 65 or older as of September 2006 will receive actuarially increased benefits at actual retirement.

Schedule SB, Part V — Summary of Plan Provisions

DEFERRED VESTED	
• Eligibility	3 years of vesting service for participants with a Cash Balance account. Otherwise, 5 years of vesting service. Employee-Provided Benefit is always 100% vested.
• Benefit	• Accrued benefit may commence at Early Retirement Date if 10 years of vesting service at termination. Cash Balance account may be paid immediately; if paid as an annuity, it's the actuarial equivalent of the cash balance account. All other annuity benefits are reduced as follows: Age Factor 55 .453 56 .484 57 .519 58 .588 59 .601 60 .649 61 .703 62 .764 63 .832 64 .911 65 1.000
PRE-RETIREMENT DEATH	
• Benefit attributable to Cash Balance formula	If married, Cash Balance annuity benefit paid immediately to spouse, or any other designated beneficiary with spousal consent. If single, Cash Balance account paid immediately to beneficiary.
• Benefit prior to early retirement attributable to pre-1999 formula / Bargaining Plan	If married, 50% of pre-1999 formula / Bargaining Plan accrued benefits payable at participant’s earliest retirement date and reduced for early commencement. If single, single sum payment to beneficiary equal to participant’s accumulated employee contributions with interest.

Schedule SB, Part V — Summary of Plan Provisions

• Benefit after early retirement attributable to pre-1999 formula / Bargaining Plan	If married, 50% of pre-1999 formula / Bargaining Plan accrued benefits payable immediately and reduced for early commencement. If single, benefit otherwise payable to spouse will be divided equally among all eligible children. Payments to each eligible child cease at age 19, or age 23 if a full-time student, unless child becomes totally and permanently disabled from performing any gainful occupations, and remains so disabled.
FORM OF BENEFITS	
• Automatic form for unmarried participants	Modified Cash Refund Annuity for Frozen Contributory Monthly Benefit; otherwise, Single Life Annuity
• Automatic form for married participants	Joint and 50% Survivor Annuity
• Optional form of payment	Single Life Annuity, Modified Cash Refund Annuity (Frozen Contributory Monthly Benefit), Joint and 50% Survivor Annuity, Joint and 100% Survivor Annuity, 10-Year Certain and Life Annuity, Lump Sum (Cash Balance Account only unless less than $5,000)
• Optional form conversion factors	10-Year Certain and Life Annuity: 6.00% interest rate and 1971 GAM mortality table Lump Sum: 417(e) interest rates for month of December prior to plan year and 417(e) mortality for the plan year All other forms: 7.00% interest rate and UP84 mortality table with a one-year age set-forward for the participant and a 4-year age set-back for the beneficiary
MISCELLANEOUS	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2018, the limit is $220,000.

Schedule SB, Part V — Summary of Plan Provisions

Benefits Included or Excluded

Unless noted below, all benefits provided by the plan, as restated and amended, are included in this valuation:

- **Most recent plan amendments included:** All amendments included in the restatement effective as of January 1, 2018 are included.

- **Plan amendments excluded:** None.

- **Late retirement increases:**
  - *Active participants:* The plan provides suspension notices to participants who were younger than age 65 as of September 2006 and work beyond normal retirement. There are no active participants in the plan who were age 65 or older as of September 2006, so the valuation does not include late retirement actuarial increases.
  - Deferred vested participants: Current deferred vested participants over normal retirement age are valued including the late retirement actuarial increase.

- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.

- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Schedule SB, Part V — Summary of Plan Provisions

PLAN PROVISIONS SPECIFIC TO FUNDING

Additional Benefits Included or Excluded

- **IRC Section 436 benefit restrictions:**
  - *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits that occurred before the valuation date but includes contingent event benefits which are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
  - *Plan amendments:* See above.
  - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
  - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals.

Unpredictable contingent event benefits: The plan does not have any unpredictable contingent event benefits.

PLAN PROVISION CHANGES SINCE PRIOR VALUATION

- Effective January 1, 2018, Wood plc spun off assets and liabilities for certain participants from the Foster Wheeler, Inc. Salaried Employees Pension Plan to create this plan.

Schedule SB, line 32 — Schedule of Amortization Bases

The total shortfall amortization charge is the sum of the individual shortfall amortization installment for each plan year covered under PPA. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than $0.

SHORTFALL BASES					
YEAR ESTABLISHED		OUTSTANDING BALANCE	YEARS REMAINING		2018 INSTALLMENT
2016	$	7,806,112	5	$	1,683,531
2017		8,117,123	6		1,502,848
2018		8,378,197	7		1,367,739
Total	$	24,301,432		$	4,554,118

Schedule SB, line 25 — Change in Method

Effective January 1, 2018, the assets and liabilities associated with certain participants were spun off from the Foster Wheeler Inc. Salaried Employees Pension Plan (EIN 22-3800664 / PN 002) ("Original Plan") to the newly created separate Foster Wheeler Inc. Pension Plan for Certain Employees (EIN 22-3800664 / PN 006) ("Spin Off Plan") also sponsored by Wood. Said spin off is considered a change in funding method. A request for IRS approval for the change in funding method was submitted on or before March 15, 2019. A copy of the IRS acknowledgement of receipt is included as part of this attachment. To date, a formal IRS approval has not been received. The change in funding method request included the following:

Funding target and target normal cost. The funding target for minimum funding calculations is computed using the traditional unit credit method of funding.

A detailed description of the calculation follows:

- The valuation date is the beginning of the plan year.

- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year. An individual's **target normal cost** is the present value of the benefit expected to accrue during the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.

- The plan's **target normal cost** is the sum of the individual target normal costs described above plus expected expenses to be paid from plan assets during the plan year, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

Asset valuation method. The Original Plan's asset valuation method is an average of the adjusted market value for each year during the last two years preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is to be adjusted to be no greater than 110% and no less than 90% of the fair market value, as defined in IRC Section 430. The Spinoff Plan will use this method as well. Since the 2018 plan year is the first plan year for the Spinoff Plan, there is only one determination date, so the actuarial value of assets equals the market value of assets. For the actuarial value of assets as of January 1, 2019 for the Spinoff Plan, the average value will only include the January 1, 2018 and January 1, 2019 determination dates since the Spinoff plan has no valuation dates prior to January 1, 2018. As required under 1.430(g)-1(c)(2)(ii)(C), the assets spun off to the Spinoff Plan as of January 1, 2018 are treated in the same manner as a distribution when calculating the average asset value for the Original Plan.

Proposed minimum required contribution calculation for the 2018 plan year.
The January 1, 2018 funding target for the Spinoff Plan was determined based on the plan participants in the Spinoff Plan as of January 1, 2018.

Schedule SB, line 25 — Change in Method

Credit balance as of January 1, 2018 will be allocated between the Spinoff Plan and the Original Plan in accordance with the approach described in Rev. Proc. 81-212. This approach involves two asset allocation calculations following the rules of IRS Regulation 1.414(l)-1(n), one with assets unreduced by the prefunding balance and one with assets reduced by the prefunding balance. The difference between these two calculations defines that amount of prefunding balance allocated to each plan. The asset allocation is based on the priority categories specified by ERISA §4044 and the assumptions used by the PBGC as of the spinoff date.

Unamortized prior year bases will be allocated between the Spinoff Plan and the Original Plan in proportion to each plan's share of the funding shortfall as of January 1, 2018.

Proposed quarterly contribution calculation for the 2018 plan year. Quarterly contributions for each plan for the 2018 plan year will equal the lesser of 25% of the full minimum required contribution for 2017 for the Original Plan or 90% of 25% of the 2018 minimum required contribution for the respective plans. For both plans, using 90% of 25% of the 2018 minimum required contribution results in the smaller amount and thus determines the required quarterlies for 2018. While it might be reasonable to allocate the 2017 minimum required contribution for the Original Plan between the two plans for purposes of the lookback calculation in order to determine a lower quarterly requirement for 2018, we have not attempted to do so.

Proposed method for determining at-risk status and sponsor's ability to use credit balance for the Spinoff Plan's 2018 and 2019 plan years. The 2017 Funding Target Attainment Percentage (FTAP) for the Original Plan is used for purposes of determining whether either of the successor plans is at-risk for 2018. Each plan's respective FTAP for 2018 is used to determine at-risk status for 2019. The 1/1/2017 FTAP (based on the not-at-risk funding target) is 89.15%. Accordingly, neither of the successor plans is at-risk for 2018. Both plans have a 1/1/2018 FTAP in excess of 80%, therefore neither plan is at-risk for 2019.

Similar logic was used to conclude that both plans are eligible to apply prefunding balances during both the 2018 and 2019 plan years.

Schedule SB, line 25 — Change in Method

Foster Wheeler Inc. Pension Plan for Certain Employees
(EIN / PN: 22-3800664 / 006)

Request for IRS approval for the change in funding method resulting from a January 1, 2018 spinoff of the Foster Wheeler Inc. Pension Plan for Certain Employees (Spinoff Plan) EIN / PN: 22-3800664 / 006 from the Foster Wheeler Inc. Salaried Employees Pension Plan (Original Plan)

Exhibit III - Calculation of 2018 Minimum Required Contribution and AFTAP

2018 Funding Calculations Without Regard to Plan Spinoff

	Original Plan	
Valuation date	1/1/2018	
Effective interest rate	5.51%	
Funding target liability	272,205,183	
Actuarial value of assets	243,855,677	
Carryover credit balance	-	
Prefunding credit balance	13,606,556	
Shortfall amortization		
- Date established	1/1/2016	1/1/2017
- Shortfall amortization installments	2,751,001	2,455,753
- Years remaining	5	6
- Shortfall amortization base	12,755,704	13,263,915

2018 Funding Calculations After Reflecting Plan Spinoff

	Original Plan	Spinoff Plan
Valuation date	1/1/2018	1/1/2018
Effective interest rate	5.51%	5.52%
2018 Adjusted Funding Target Attainment Percentage		
- Funding target liability	89,755,352	182,449,831
- Actuarial value of assets	79,036,596	167,065,003
- Carryover credit balance	-	-
- Prefunding credit balance	4,689,952	8,916,604
- Funding Shortfall	15,408,708	24,301,432
- 2018 AFTAP	82.83%	86.68%
Target normal cost		
- Benefit accrual	-	-
- Expected expenses	1,130,000	1,160,000
- Total	1,130,000	1,160,000
Minimum required contribution		
- Target normal cost	1,130,000	1,160,000
- Excess assets	-	-
- Target normal cost less excess assets	1,130,000	1,160,000
- Shortfall amortization charges (see Exhibit III - Shortfall Develop)	2,887,611	4,554,118
- Waiver amortization charge	-	-
- Minimum required contribution	**4,017,611**	**5,714,118**

Schedule SB, line 25 — Change in Method

Foster Wheeler Inc. Pension Plan for Certain Employees
(EIN / PN: 22-3800664 / 006)

Request for IRS approval for the change in funding method resulting from a January 1, 2018 spinoff of the Foster Wheeler Inc. Pension Plan for Certain Employees (Spinoff Plan) EIN / PN: 22-3800664 / 006 from the Foster Wheeler Inc. Salaried Employees Pension Plan (Original Plan)

Exhibit III - Development of 2018 Actuarial Value of Assets

2018 Actuarial Value of Assets Without Regard to Plan Spinoff

Determination dates	Market value[1]	Net cash flow[2]	Expected earnings[3]	Adjusted market value[4]
January 1, 2016	270,590,134	(56,837,579)	30,333,358	244,085,913
January 1, 2017	247,059,241	(27,757,320)	13,295,754	232,597,675
January 1, 2018	254,883,443			254,883,443
Average adjusted market value				243,855,677
90% of market value corridor				229,395,099
110% of market value corridor				280,371,787
Actuarial Value of Assets				**243,855,677**

2018 Funding Calculations After Reflecting Plan Spinoff

Determination dates	Market value[1]	Net cash flow[2]	Expected earnings[3]	Adjusted market value[4]
January 1, 2016	270,590,134	(223,902,582)	30,333,358	77,020,910
January 1, 2017	247,059,241	(194,822,323)	13,295,754	65,532,672
January 1, 2018	87,818,440			87,818,440
Average adjusted market value				76,790,674
90% of market value corridor				79,036,596
110% of market value corridor				96,600,284
Original Plan Actuarial Value of Assets				**79,036,596**
Spinoff Plan Actuarial Value of Assets				**167,065,003**

Treasury Regulation 1.430(g)-1(c)(2)(ii)(c) requires that assets spun off from a plan in a spinoff described in Treasury Regulation 1.414(1)-1(b)(4) be treated as an amount paid from plan assets, and analogous to a benefit payment for the original plan and a contribution to the spun off plan. Accordingly, the January 1, 2018 actuarial value of assets for the Spinoff Plan was set equal to the market value for the Spinoff Plan. The actuarial value for the Original Plan was determined by removing the market value of assets related to the Spinoff Plan from the total actuarial value of assets determined prior to the spin off.

[1] Market value, including receivable employer contributions, at the determination date for both plans combined.

[2] Net contributions, transfers, benefits, and expenses from the determination date to the valuation date. Net transfers reflect the $167,065,003 asset transfer associated with the spinoff forming the new Spinoff Plan.

[3] Expected earnings from the determination date (or date of transaction for net cash flow items) to the valuation date based on 6.65% for the 2016 plan year and 5.70% for the 2017 plan year.

[4] Adjusted market value of assets at the valuation date.

Schedule SB, line 25 — Change in Method

Foster Wheeler Inc. Pension Plan for Certain Employees
(EIN / PN: 22-3800664 / 006)

Request for IRS approval for the change in funding method resulting from a January 1, 2018 spinoff of the Foster Wheeler Inc. Pension Plan for Certain Employees (Spinoff Plan) EIN / PN: 22-3800664 / 006 from the Foster Wheeler Inc. Salaried Employees Pension Plan (Original Plan)

Exhibit III - Development of Credit Balance Allocation

Credit Balance Development Without Regard to Plan Spinoff

	Carryover balance	Prefunding balance
Balance as of January 1, 2017	$ 0	$ 20,290,828
Portion applied in prior year	0	(8,486,754)
Interest at prior year investment return of 15.27%	0	1,802,482
Amount remaining as of January 1, 2018	**$ 0**	**$ 13,606,556**
Prior year excess contributions		
Discounted contributions allocated toward minimum required		$ 0
Minimum funding requirement (after applied credits)		0
Interest-adjusted excess contributions = discounted contributions minus minimum funding requirement (after applied credits)		$ 0
Interest to end of plan year on excess contributions not attributed to credit balance use at prior year effective interest rate of 5.73%		0
Interest to end of plan year on excess contributions attributed to credit balance use at prior year investment return of 15.27%		0
Total available to add to prefunding balance		$ 0
Portion added to prefunding balance		0
Reduction in balances due to election or deemed election effective January 1, 2018		**$ 0**
Balance as of January 1, 2018		**$ 13,606,556**
Credit balance available to offset minimum		**$ 13,606,556**

Allocation of Credit Balance

	Allocated results	
	Original Plan	Spinoff Plan
Market value of assets	$ 87,818,440	$ 167,065,003
Market value of assets minus credit balance[1]	83,128,488	158,148,399
Credit balance	**$** 4,689,952	**$** 8,916,604

[1] Allocated in accordance with 414(l) rules based on ERISA 4044 priority categories

Schedule SB, line 25 — Change in Method

Foster Wheeler Inc. Pension Plan for Certain Employees
(EIN / PN: 22-3800664 / 006)

Request for IRS approval for the change in funding method resulting from a January 1, 2018 spinoff of the Foster Wheeler Inc. Pension Plan for Certain Employees (Spinoff Plan) EIN / PN: 22-3800664 / 006 from the Foster Wheeler Inc. Salaried Employees Pension Plan (Original Plan)

Exhibit III - Development of Shortfall Amortization Charges

Allocation of Shortfall		**Allocated results**		
		Original Plan	**Spinoff Plan**	**Total**
Funding target (FT)		89,755,352	182,449,831	272,205,183
Actuarial value of assets (AVA) minus carryover (COB) and prefunding (PFB) balances		(74,346,644)	(158,148,399)	(232,495,043)
Funding shortfall amount, not less than $0		**15,408,708**	**24,301,432**	**39,710,140**
Allocated percentage of bases and amortizations		38.80%	61.20%	
Allocation of Remaining Installments	**Year Established**			
	2016	1,067,470	1,683,531	2,751,001
	2017	952,905	1,502,848	2,455,753
Outstanding shortfall balances				
	2016	4,949,592	7,806,112	12,755,704
	2017	5,146,792	8,117,123	13,263,915
	2018	5,312,324	8,378,197	13,690,521
		15,408,708	**24,301,432**	39,710,140
New base amortization	2018	867,236	1,367,739	