

**UNITED STATES BANKRUPTCY COURT
Northern District of Texas**

Mirant Corporation
Case Number: 03-46590-BJH

SUBJECT TO GENERAL AND SPECIFIC NOTES TO THESE SCHEDULES

AMENDED SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, C, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED YES / NO	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - REAL PROPERTY	NO	0	\$0		
B - PERSONAL PROPERTY	NO	0	\$278,223,978		
C - PROPERTY CLAIMED AS EXEMPT	NO	0			
D - CREDITORS HOLDING SECURED CLAIMS	NO	0		\$192,445,007	
E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS	NO	0		\$0	
F - CREDITORS HOLDING UNSECURED NON-PRIORITY CLAIMS	YES	2		\$4,687,958,676	
G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES	NO	0			
H - CODEBTORS	NO	0			
I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)	NO	0			N/A
J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)	NO	0			N/A
Total number of sheets of all Schedules		2			
			Total Assets >	\$278,223,978	
				Total Liabilities >	\$4,880,403,683

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AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the filing of the petition. Do not include claims listed in Schedule D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on the schedules in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Check this box if debtor has no unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C U D	AMOUNT OF CLAIM
See Exhibit F-1 immediately following Schedule F		Unsecured Bond Debt	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$3,652,170,992
See Exhibit F-2 immediately following Exhibit F-1		Undrawn Letters of Credit	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$989,858,352
See Exhibit F-3 immediately following Exhibit F-2		Accounts Payable	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$62,017
See Exhibit F-4 immediately following Exhibit F-3		Intercompany Liabilities	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	\$43,906,677
See Exhibit F-5 immediately following Exhibit F-4		Litigation Claims	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Undetermined
See Exhibit F-6 immediately following Exhibit F-5		Guarantee Agreements	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Undetermined
See Exhibit F-7 immediately following Exhibit F-6		Unsecured Employee Obligations (AMENDED)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$1,960,637
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Total **\$4,687,958,676**

Footnotes

Refer to Schedule G for potential liabilities associated with executory contracts.

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Exhibit F-7

Unsecured Employee Obligations (AMENDED)

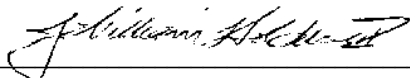
<u>Name</u>	<u>Plan Description</u>	<u>C</u>	<u>U</u>	<u>D</u>	<u>Claim Amount</u>
Booker, Vance N	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,243
Cameron, Robert Bruce	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$4,776
Cleary, Anne Marie	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$38,212
Correll, A. D.	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$187,896
Dahlberg, A. W.	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$205,872
Dorsey, Thomas E	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$44,885
Dunbar, Dave R	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,530
Eizenstat, Stuart	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$72,123
Felton, Susann D.	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$91,121
Fletcher, Thomas S	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$297,634
Fuller, Sheri M	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$189,679
Gallaspy, David T	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$720
Jacobson, James	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$30,871
Koch, Richard J	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,151
Kuester, Frederick D	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,372
Leasure, Craig A	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$96,403
Lesar, David	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$145,116
McCullough, Robert F.	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$3,542
Miller, Douglas L	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$77,809
Ogle, Mark R	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,131
Owen, Steve K	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$437
Pershing, Richard J	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$87,927
Pierce, Pamela S	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$58,739
Pitts, Lynn M	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$4,433
Rawlins, Charles O	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$40,467
Rinehart, Jack J	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$28,094
Robinson, Ray M.	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$60,669
Rush, Barney S	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$129,070
Scott-Morey, Thomas C	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,635
Stone, Mark E	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,958
Thames, Thomas R	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,595
Yelich, Thomas E	Deferred Compensation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$33,526
					\$1,960,637

DECLARATION CONCERNING DEBTOR'S AMENDED SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the Senior Vice President & Treasurer of the Corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, and that it is true and correct to the best of my knowledge, information and belief.

Date: December 3, 2003

Signature: 

J. William Holden III, Senior Vice President & Treasurer

Name and Title

Penalty for making a false statement: Fine of up to \$500,000, or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 and 3571.