Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2011

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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
L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 021

1c Effective date of plan 11/10/2004

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

L-3 COMMUNICATIONS CORPORATION

600 THIRD AVENUE
NEW YORK, NY 10016-1901

13532 N. CENTRAL EXPRESSWAY
M/S 37
DALLAS, TX 75243

2b Employer Identification Number (EIN) 13-3937436

2c Sponsor's telephone number 212-697-1111

2d Business code (see instructions) 334200

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.	09/14/2012	PAT HEMPHILL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

600 THIRD AVENUE
NEW YORK, NY 10016-1901

3b Administrator's EIN
13-3937436

3c Administrator's telephone number
212-697-1111

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	151
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	81
b	Retired or separated participants receiving benefits	**6b**	7
c	Other retired or separated participants entitled to future benefits	**6c**	55
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	143
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	143
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

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

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

A Name of plan
L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 021

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
L-3 COMMUNICATIONS CORPORATION

D Employer Identification Number (EIN)
13-3937436

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	9995244
b Actuarial value	**2b**	9305266

3 Funding target/participant count breakdown:

		(1) Number of participants	(2) Funding Target
a For retired participants and beneficiaries receiving payment	**3a**	5	605624
b For terminated vested participants	**3b**	55	2897060
c For active participants:			
(1) Non-vested benefits	**3c(1)**		878358
(2) Vested benefits	**3c(2)**		7248208
(3) Total active	**3c(3)**	91	8126566
d Total	**3d**	151	11629250

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	6.40 %
6 Target normal cost	**6**	675028

Statement by Enrolled Actuary

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

SIGN HERE

	09/12/2012
Signature of actuary	Date
ELNATAN SULIMANOFF, FSA, MAAA, EA	11-06454
Type or print name of actuary	Most recent enrollment number
SIBSON CONSULTING	212-251-5000
Firm name	Telephone number (including area code)
333 W 34TH STREET NEW YORK, NY 10001-2402	
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	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	1443004	0
10	Interest on line 9 using prior year's actual return of 0.00%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38 from prior year)		0
b	Interest on (a) using prior year's effective rate of 0.00 % except as otherwise provided (see instructions)		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	1441139	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1865	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.00 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	91.40 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and liquidity shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2011	254000		07/05/2012	265000	
07/15/2011	254000		09/04/2012	337000	
10/14/2011	206000				
01/13/2012	238000				
03/15/2012	335000				
04/12/2012	98000				
		Totals ► 18(b)		1987000	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	1860254

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

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

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

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

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

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

a Target normal cost (line 6)	**31a**	675028
b Excess assets, if applicable, but not greater than 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	2325849	382671
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**	1057699

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

36 Additional cash requirement (line 34 minus line 35)	**36**	1057699
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	1860254

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

a Total (excess, if any, of line 37 over line 36)	**38a**	802555
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

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

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

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

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

A Name of plan
L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 021

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
L-3 COMMUNICATIONS CORPORATION

D Employer Identification Number (EIN)
13-3937436

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: L-3 COMM. CORPORATION MASTER TRUST

b Name of sponsor of entity listed in (a): L-3 COMMUNICATIONS CORPORATION

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103 12 IE at end of year (see instructions)
13-3937436-020	M	9315972

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

A Name of plan
L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 021

C Plan sponsor's name as shown on line 2a of Form 5500
L-3 COMMUNICATIONS CORPORATION

D Employer Identification Number (EIN)
13-3937436

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1607224	1273000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	8456233	9315972
(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	10063457	10588972
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	53003	55720
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	53003	55720
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	10010454	10533252

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)	1987000	
(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)		1987000
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)		
(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)		
(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)		

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		
(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)		278891
(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		-5
d Total income. Add all **income** amounts in column (b) and enter total	2d		2265886
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1539610	
(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)		1539610
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)	203478	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		203478
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1743088
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		522798
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [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: PRICEWATERHOUSECOOPERS, LLP (2) EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		20000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ **Yes** ☒ **No**

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection.

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

A Name of plan
L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 021

C Plan sponsor's name as shown on line 2a of Form 5500
L-3 COMMUNICATIONS CORPORATION

D Employer Identification Number (EIN)
13-3937436

Part I Distributions

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

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

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

EIN(s): 13-7074646 _____

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** 9

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate item 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN

Financial Statements as of
and for the Years Ended
December 31, 2011 and 2010

L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN
INDEX TO FINANCIAL STATEMENTS

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Note: Supplemental schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA) have been omitted as the conditions under which they are required are not present.

pwc

Report of Independent Auditors

To the Participants and Administrator of the
L-3 Communications Infrared Products Retirement Plan:

In our opinion, the accompanying Statements of Net Assets Available for Benefits as of December 31, 2011 and 2010 and the related Statements of Changes in Net Assets Available for Benefits for the years then ended and the Statement of Accumulated Plan Benefits as of January 1, 2011 and the related Statement of Changes in Accumulated Plan Benefits for the year then ended, present fairly, in all material respects, information regarding the net assets available for benefits of the L-3 Communications Infrared Products Retirement Plan (the "Plan") at December 31, 2011 and changes therein for the year then ended and its financial status as of January 1, 2011, and changes therein for the year then ended in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements 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 of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

PricewaterhouseCoopers LLP

New York, New York
September 14, 2012

PricewaterhouseCoopers LLP, PricewaterhouseCoopers Center, 300 Madison Avenue, New York, NY 10017
T: (646) 471 3000, F: (813) 286 6000, www.pwc.com/us

L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
AS OF DECEMBER 31, 2011 AND 2010
(Dollars in thousands)

	2011	2010
Assets:		
Investment in Master Trust, at fair value	$ 9,316	$ 8,456
Employer contribution receivable	1,273	1,607
Total assets	10,589	10,063
Liabilities:		
Accrued expenses	56	53
Net assets available for benefits	$ 10,533	$ 10,010

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

L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010
(Dollars in thousands)

	2011	2010
Additions:		
Net investment gain from Master Trust	$ 279	$ 1,079
Employer contributions	1,987	2,399
Total additions	2,266	3,478
Deductions:		
Benefit payments	1,540	3,712
Plan expenses	203	210
Total deductions	1,743	3,922
Net (decrease) increase	523	(444)
Net assets available for benefits, beginning of Year	10,010	10,454
Net assets available for benefits, end of Year	$10,533	$10,010

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

L-3 COMMUNICATIONS INFRARED PRODUCTS RETIREMENT PLAN
STATEMENTS OF ACCUMULATED PLAN BENEFITS AND CHANGES IN ACCUMULATED PLAN BENEFITS
AS OF AND FOR THE YEAR ENDED JANUARY 1, 2011
(Dollars in thousands)

Statement of Accumulated Plan Benefits:	**January 1, 2011**
Actuarial present value of accumulated plan benefits	
Vested benefits:	
Participants currently receiving payments	$ 543
Other participants	9,358
Total vested benefits	9,901
Non-vested benefits	814
Total actuarial present value of accumulated plan benefits	$10,715

Statement of Changes in Accumulated Plan Benefits:	**Year Ended January 1, 2010**
Actuarial present value of accumulated plan benefits as of January 1, 2010	$12,172
Increase (decrease) during the year attributable to:	
Benefits accumulated and actuarial experience	1,103
Increase for interest due to decrease in discount period	913
Benefits paid	(3,712)
Change in actuarial assumptions[(1)]	239
Net decrease	(1,457)
Actuarial present value of accumulated plan benefits as of January 1, 2011	$10,715

(1) For the year ended January 1, 2011, the mortality tables used were changed to the Pension Protection Act ("PPA") mandated mortality tables.

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

1. Plan Description

The following brief description of the L-3 Communications Infrared Products Retirement Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

The Plan was established effective November 10, 2004 in connection with the acquisition of the Infrared Products Business Operations ("IPBO") of Raytheon Company by L-3 Communications Corporation (the "Company"), a wholly owned subsidiary of L-3 Communications Holdings, Inc. On that date, certain participants in certain pension plans ("the Prior Plans") of Raytheon Company became participants in the Plan. Following the acquisition, IPBO was renamed L-3 Communications Infrared Products Division.

The Plan is a non-contributory defined benefit plan. Participation in the Plan commenced after the completion of one year of service and the attainment of age 21. The Plan is subject to the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Plan is frozen with respect to new participants hired on or after January 1, 2007. As such, any employees hired on or after January 1, 2007 are not eligible to participate in the Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared using the accrual basis of accounting.

Investment in Master Trust

Investment assets of the Plan are maintained in the L-3 Communications Corporation Master Trust (the "Master Trust") administered by The Bank of New York Mellon, as Trustee. The Plan participates in the Master Trust along with other defined benefit plans sponsored by the Company (collectively, the "L-3 Participating Plans"). The only investment of the Plan is its interest in the net assets of the Master Trust. The fair value of the Plan's interest in the Master Trust is determined based on the beginning of year value of the Plan's interest in the trust plus actual contributions and allocated investment income (loss) less actual distributions and actual administrative expenses. Assets held in the Master Trust primarily consist of corporate equity securities, commingled trust funds and mutual funds, and corporate bonds. See Note 6 for a description of the valuation methodologies of the assets of the Master Trust.

The Master Trust records investment transactions on the trade-date, dividend income on the ex-dividend date, interest income as earned and determines realized gains and losses on sales of securities based on the average cost method.

Net Investment Gain from Master Trust

The net investment gain from the Master Trust includes interest and dividend income and net appreciation or depreciation in the fair value of investments, which includes gains or losses realized upon disposition of investments and net unrealized appreciation or depreciation of investments. The net investment gain or loss is allocated to the L-3 Participating Plans based upon the relationship of each plan's respective monthly balances in the investment pool to the total investments of the Master Trust, as determined on a monthly basis.

Benefit Payments

Benefit payments are recorded when paid.

Plan Expenses

The administrative expenses of the Plan are paid for by the Plan. Administrative expenses are allocated to the Plan at the direction of the Company based upon the Plan's respective portion of the expense. Investment management fees of the Master Trust are allocated to the L-3 Participating Plans based upon the relationship of each plan's respective monthly balances in the investment pool to the total investments of the Master Trust, as determined on a monthly basis.

Use of Estimates

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

Risks and Uncertainties

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

The investments held in the Master Trust are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks in the near term would materially affect the investments and related allocation

reported in the statements of net assets available for benefits and the statements of changes in net assets available for benefits.

Subsequent Events

The Plan continued to evaluate events after the Statement of Net Assets Available for Benefits date through September 14, 2012, the date the financial statements were available to be issued.

3. Contributions

Generally, the Company's funding policy is to contribute amounts in accordance with the Internal Revenue Code ("IRC") and the minimum funding requirements under ERISA. Contributions required from the Company in 2011 and 2010 to the Plan under the minimum funding requirements of ERISA were $1,056 and $990, respectively. Contributions are calculated using the Projected Unit Credit Actuarial Cost Method. Under this method, the total actuarial liability for participants is the actuarial present value as of the valuation date of all benefits attributed by the pension benefit formula to employee service rendered prior to that date, which assumes the normal cost will increase each year for each employee as he or she approaches retirement age . The yield (interest, dividends and net realized and unrealized gains and losses) on investments of the Plan serves to adjust future contributions that will be required to provide for the defined level of benefits. The funding target is measured on an accrual-to-date basis using mandated mortality tables and interest rates with no salary projection past the end of the year.

4. Plan Benefits

Participants are entitled to receive monthly pension benefits beginning at the normal retirement age of 65 equal to 1.8% of the number of years of benefit service that are not in excess of twenty; plus 1.2% of the number of years of benefit service that are in excess of twenty years times the Participant's Final Average Earnings less the Participant's estimated Primary Social Security benefit. Final Average Earnings is the participant's average monthly rate of compensation earned by the Participant using the period of the 60 consecutive months out of the last 120 months that provide the highest average. Estimated Primary Social Security Benefit is an estimate of the unreduced amount a Participant will receive from Social Security at normal retirement age. Unless otherwise elected, monthly payments are made to the participant over the participant's remaining life.

The Plan permits early retirement at ages 55 to 64 for participants with at least 10 years of vesting service. The benefit may begin at the date of early retirement and is reduced by 7% for each year by which commencement of benefits precedes the retiree's 60th birthday. Benefits commencing at age 60 or older are not reduced.

The following table presents the various grandfathered benefit provisions of the Plan. These benefit provisions are consistent with the benefit provisions of the Prior Plans and have been grandfathered to those employees who previously participated in such Prior Plans.

Specific Group Covered	Normal Benefit
Former participants in the Raytheon E-Systems, Inc. Richardson Retirement Plan	1.2% of Average Monthly Compensation ("AMC"), defined as the average of the compensation for the highest consecutive 60 months out of the last 120 months multiplied by years of benefit service up to 10 years plus 1.6% of AMC multiplied by years of benefit service over 10 years, but not less than twelve dollars multiplied by years of benefit service. **Early Retirement** Age 55 with 10 years of service subject to an early retirement reduction.
Former participants in the Raytheon E-Systems, Inc. Waco Retirement Plan	**Normal Benefit** 1% multiplied by Average Monthly Compensation ("AMC"), defined as the average compensation for the highest consecutive 60 months out of the last 180 months, multiplied by years of benefit service up to 35 years plus 0.4% of AMC in excess of 150% of covered compensation multiplied by years of benefit service up to 35 years. **Early Retirement** Age 60 with 10 years of service subject to an early retirement reduction.
Former participants in the Raytheon Company Pension Plan for Salaried Employees	**Normal Benefit** The greater of 1 or 2: 1) 1.8% multiplied by years of service up to 20 years multiplied by the excess of the final AMC for the highest consecutive 60 months out of the last 120 months over social security benefits plus 1.2% multiplied by years of service over 20 years multiplied by the excess of AMC over social security benefits. 2) Four hundred ninety two dollars multiplied by years of service. **Early Retirement** Age 55 with 10 years of service subject to an early retirement reduction.

Specific Group Covered - continued	Normal Benefit - continued
Former participants in the Raytheon TI Systems Employees Pension Plan	The greater of 1, 2 or 3: 1) 1.5% of Average Credited Earnings, defined as the average of the compensation for the highest five consecutive calendar years, multiplied by years of benefit service minus a retirement age factor multiplied by Final Average Compensation, defined as the lessor of (a) average compensation for the 3 year period up to the year of termination or (b) the average of social security wage bases during 35 years up to the participant's social security retirement age, multiplied by years of projected service at normal retirement age multiplied by the ratio of service at termination to projected service at normal retirement age (not to exceed 1). 2) Eighty four dollars multiplied by years of benefit service. 3) Accrued benefit at December 31, 1988 for service before January 1, 1989 plus item 1) above for service after December 31, 1988 **Early Retirement** Age 60 with 5 years of service or age 55 with 20 years of service subject to an early retirement reduction.
Former participants in the E-Systems, Inc. Salaried Participants Retirement Plan	**Normal Benefit** 1.2% multiplied by Average Monthly Compensation ("AMC"), defined as the average of the compensation for the highest consecutive 60 months out of the last 120 months, multiplied by years of benefit service up to 10 years plus 1.6% of AMC over 10 years, not less than twelve dollars multiplied by years of benefit service. **Early Retirement** Age 55 with 10 years of service subject to an early retirement reduction.

The following presents the more significant assumptions underlying the actuarial computations as of January 1, 2011 and 2010.

Mortality basis	2011: RP2000 Annuitant and Non-Annuitant Tables with static projection to 2018 and 2026, respectively. 2010: RP-2000 Combined Healthy Table RP-2000 Disabled Retiree Table
Retirement	Retirement at ages 55 through 67, at varying rates, with 100% by age 67.
Discount rate for the determination of the present value of accumulated plan benefits	2011 and 2010 – 7.5%

The foregoing actuarial assumptions are based upon the assumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be used in determining the actuarial present value of accumulated plan benefits.

5. *Master Trust Investments*

The fair value of the assets and liabilities of the Master Trust at December 31, 2011 and 2010 is presented in the table below. The Plan's percentage interest in the Master Trust was 0.6% at December 31, 2011 and 2010.

	2011	2010
Corporate equity securities	$ 860,292	$ 778,788
Commingled trust funds and mutual funds	524,547	486,329
Corporate bonds	82,858	78,815
Forward contracts	264	35
Accrued income	3,701	3,175
Receivable for unsettled trades	921	808
Payable for unsettled trades	(163)	(2,225)
	$ 1,472,420	$ 1,345,725

The following presents the investment gain of the Master Trust for the years ended December 31, 2011 and 2010.

	2011	2010
Net appreciation of investments	$ 9,565	$ 130,842
Interest	6,674	6,191
Dividends	29,848	21,668
Other	256	123
	$ 46,343	$ 158,824

The following presents the net appreciation (depreciation) in fair value of the Master Trust's investments, including realized gains and losses, and the unrealized appreciation and depreciation of investments for the years ended December 31, 2011 and 2010.

	2011	2010
Corporate equity securities	$ 15,978	$ 104,585
Commingled trust funds and mutual funds	(3,523)	20,585
Corporate bonds	(3,087)	5,045
Forward contracts	246	627
Other	(49)	—
	$ 9,565	$ 130,842

6. *Fair Value Measurements*

The Plan adopted the standards for fair value measurements. The provisions of the standards are applicable to all of the Plan's assets and liabilities that are measured and recorded at fair value. The standards establish a framework for measuring fair value and expand related disclosures. The standards define fair value as the price that would be received for an asset or the exit price that would be paid to transfer a liability in the principal or most advantageous market in an orderly transaction between market participants. It establishes a fair value hierarchy that gives the highest priority to observable inputs and the lowest priority to unobservable inputs. The three levels of the fair value hierarchy are described below.

Level 1: Quoted market prices available in active markets for identical assets or liabilities as of the reporting date. The Plan's Level 1 assets include equity securities, certain mutual funds and U.S. Treasury bonds, all of which fair value is derived from quoted market prices.

Level 2: Pricing inputs other than quoted prices in active markets included in Level 1, which are either directly or indirectly observable as of the reporting date. The fair value is determined using a valuation model based on observable market inputs. The Plan's Level 2 assets include commingled trust funds, certain mutual funds, corporate bonds, government securities and forward contracts.

Level 3: Pricing inputs that are generally unobservable inputs and not corroborated by market data. The Plan has no Level 3 assets.

The table below reports by level, within the fair value hierarchy, the assets held in the Master Trust at fair value as of December 31, 2011 and 2010, including a description of the valuation methodologies. As required by the standards, each asset is classified based on the lowest level of input that is significant to the fair value measurement.

	Fair Value Measured at December 31, 2011				Fair Value Measured at December 31, 2010			
Asset Category	**Level 1**	**Level 2**	**Level 3**	**Total**	**Level 1**	**Level 2**	**Level 3**	**Total**
Equity securities[1]:								
U.S. Equity	717,777	—	—	717,777	647,658	—	—	647,658
International Equity	65,732	101,520	—	167,252	50,563	114,632	—	165,195
Fixed Income — Investment Grade	188,868[2]	188,388[3]	—	377,256	155,351[2]	155,040[3]	—	310,391
Fixed Income — High Yield[4]	—	87,023	—	87,023	—	82,477	—	82,477
Real Estate Investment Trusts[5]	101,176	—	—	101,176	78,876	—	—	78,876
Other[6]	—	21,936	—	21,936	—	61,128	—	61,128
Total	$ 1,073,553	$ 398,867	$ —	$1,472,420	$ 932,448	$413,277	$ —	$ 1,345,725

(1) Equity securities consist of investments in common stock of U.S. and foreign companies. The fair value of equity securities is based on quoted market prices available in active markets at the close of a trading day, primarily the New York Stock Exchange (NYSE), National Association of Securities Dealers Automated Quotations (NASDAQ), and various foreign exchanges. The Level 2 investment balance is derived from a pooled equity fund offered by a registered investment company, which fair value is based on net asset value (NAV). NAV is calculated by the fund manager based on the fair value of the fund's holdings, primarily equity securities traded in active markets, determined as of the end of each month. Withdrawals are permitted monthly based on NAV.

(2) Approximately 50% in both 2011 and in 2010 of plan assets invested in fixed income — investment grade securities consist of a mutual fund offered by a registered investment company. The mutual fund invests in investment grade fixed income securities, mortgaged-backed securities, U.S. treasury and agency bonds and corporate bonds. This fund is classified by the Company as a Level 1 measurement within the fair value hierarchy as the mutual fund trades on an active market and daily, quoted prices are available.

(3) The remaining 50% in both 2011 and in 2010 of plan assets invested in fixed income — investment grade securities is derived from pooled bond funds offered by registered investment companies. As these funds do not trade in an active market, the fair value is based on NAVs calculated by fund managers based on yields currently available on comparable bonds of issuers with similar credit ratings, quoted prices of similar bonds in an active market, or cash flows based on observable inputs.

(4) Fixed income — high yield consists of investments in corporate high-yield bonds from various industries. The fair values of these investments are based on yields currently available on comparable bonds of issuers with similar credit ratings, quoted prices of similar bonds in an active market, or cash flows based on observable inputs.

(5) Real Estate Investment Trusts (REITs) consist of securities that trade on the major exchanges and invest directly in real estate, either through properties or mortgages.

(6) Other consists of short term investments maintained in a commingled trust or pooled fund, which primarily invests in short term, high quality money market securities such as government obligations, commercial paper, time deposits and certificates of deposit, which are classified as Level 2.

7. *Accounting Standards Issued and Not Yet Implemented*

In May 2011, the FASB issued a revised accounting standard for fair value measurement and disclosure. The revisions clarify how to measure fair value and require additional disclosures as follows: 1) transfers between Level 1 and Level 2 of the fair value hierarchy, 2) the valuation process used and the sensitivity of a fair value measurement categorized within Level 3 of the fair value hierarchy to changes in unobservable inputs, and 3) the categorization by level of the fair value hierarchy for items that are not measured at fair value in the Statement of Net Assets Available for Benefits, but for which the fair value of such items is required to be disclosed. The revised accounting standard is effective for the Company beginning after December 15, 2011, and is not expected to have an impact on the Plan's Net Assets Available for Benefits.

8. *Tax Status*

The Internal Revenue Service has determined and informed the Company by a letter dated July 28, 2008, that the Plan is designed in accordance with the applicable sections of the IRC. The Plan has been amended since receiving the determination letter. The Plan administrator and the Plan's counsel believe that the Plan is designed and is currently being operated in compliance with the applicable regulations of the IRC; therefore, no provision for income taxes has been included in the Plan's financial statements.

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 the Internal Revenue Service. The Plan administrator has analyzed the tax positions by the Plan, and has concluded that as of December 31, 2011, there are no uncertain tax 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 audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to the year ended December 31, 2007.

9. Related Party Transactions

Certain plan investments held in the Master Trust are units of a commingled trust fund managed by The Bank of New York Mellon, the Plan's trustee.

10. Termination Priorities

While the Company has not expressed any intention to do so, it is free to discontinue its contributions at any time and to terminate the Plan, subject to the provisions set forth in ERISA.

In the event the Plan terminates, the net assets will be allocated as specified by the Plan in accordance with ERISA, generally to provide the following benefits in the order indicated:

a. Benefits attributable to employee contributions, taking into account those paid out before termination.

b. Benefits attributable to participants who have retired at least three years before the termination date of the Plan or those participants who were eligible to retire and receive pension benefits at least three years before, but who did not elect to retire at that time.

c. Benefits commencing at retirement age to participants who are eligible to receive guaranteed benefits under ERISA.

d. All vested and non-vested benefits.

To the extent the Plan's net assets are not sufficient to fund the accumulated benefits upon Plan termination, ERISA provides that such benefits are payable by the Pension Benefit Guaranty Corporation, up to specified limits.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Line 26 – Schedule of Active Participant Data
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Participants in Active Service by Age and Years of Benefit Service

	Years of Service									
Age	Less than 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over
Under 25	--	--	--	--	--	--	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
25-29	--	1	--	--	--	--	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
30-34	--	--	1	--	--	--	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
35-39	--	2	3	2	--	--	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
40-44	--	2	5	2	1	1	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
45-49	--	1	1	3	1	2	8	--	--	--
	--	--	--	--	--	--	--	--	--	--
50-54	--	2	2	2	--	3	5	7	--	--
	--	--	--	--	--	--	--	--	--	--
55-59	--	2	5	1	--	--	3	7	1	--
	--	--	--	--	--	--	--	--	--	--
60-64	--	1	2	1	--	1	3	--	1	1
	--	--	--	--	--	--	--	--	--	--
65-69	--	--	--	--	--	--	--	1	--	--
	--	--	--	--	--	--	--	--	--	--
70 & Over	--	--	--	--	--	--	--	--	--	--
	--	--	--	--	--	--	--	--	--	--
Total	--	11	19	11	2	7	19	15	2	1
	--	--	--	--	--	--	--	--	--	--

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Actuarial Assumptions and Methodologies (Funding)

Interest:	The interest rates used for the 2011 plan year are the 24-month average corporate bond yields during September, 2010. These discount rates are 3.78% for payments in the first 5 years, 6.31% for payments in years 6 – 20, and 6.57% for payments thereafter, which translates to an effective interest rate of 6.40%. (Prior year 24-month average corporate bond rates were 5.03% for payments in the first 5 years, 6.73% for payments in years 6 – 20, and 6.82% for payments thereafter, which translates to an effective interest rate of 6.74%.) The yield curve used to determine the PBGC variable rate premium is the same as funding.
Mortality rates:	RP2000 combined annuitant and non-annuitant tables with static projection to 2018 and 2026, respectively. This assumption is one of the choices allowed by the regulations that was selected by the plan sponsor. (Prior year mortality table assumption was similar to this year, except with one less year of projection.)
Salary Increases:	4.00%.
Election of lump-sum option:	75% of RTIS participants are assumed to elect payment in the form of a lump sum. As prescribed by proposed regulations, lump sums are valued based on the interest rate implied by the funding yield curve and the 2011 mandated mortality table for lump-sum conversion.
Sample termination rates:	

Percent Terminating							
Select Period – Years of Service							
Age	**1**	**2**	**3**	**4**	**5**	**Ultimate**	**Disability***
25	24.0%	25.5%	22.7%	20.4%	18.5%	10.2%	0.10%
30	17.0	18.3	16.2	14.6	13.3	7.3	0.11
35	12.8	13.5	12.0	10.8	9.8	5.4	0.12
40	9.8	10.3	9.1	8.2	7.5	4.1	0.18
45	8.0	8.3	7.3	6.6	6.0	3.3	0.28
50	6.5	6.8	6.0	5.4	4.9	2.7	0.48
55	5.3	5.5	4.9	4.4	4.0	2.2	0.87
60	4.5	4.8	4.2	3.8	3.5	1.9	1.38
64	4.5	4.5	4.0	3.6	3.3	1.8	1.88

* No disability decrement for employees in the Raytheon Salaried, Richardson, or Waco Retirement

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

<table>
<tr><td>Retirement (from active status) rates:</td><td>
<table>
<tr><th>Age</th><th>Rates</th></tr>
<tr><td>55</td><td>2.5%</td></tr>
<tr><td>56</td><td>2.5</td></tr>
<tr><td>57</td><td>2.5</td></tr>
<tr><td>58</td><td>5.0</td></tr>
<tr><td>59</td><td>5.0</td></tr>
<tr><td>60</td><td>7.5</td></tr>
<tr><td>61</td><td>5.0</td></tr>
<tr><td>62</td><td>15.0</td></tr>
<tr><td>63</td><td>5.0</td></tr>
<tr><td>64</td><td>5.0</td></tr>
<tr><td>65</td><td>20.0</td></tr>
<tr><td>66</td><td>50.0</td></tr>
<tr><td>67</td><td>100.0</td></tr>
</table>
</td></tr>
<tr><td>Retirement from inactive status:</td><td>Age 65</td></tr>
<tr><td>Percent married:</td><td>70% male, 55% female</td></tr>
<tr><td>Age difference:</td><td>Husbands are three years older than their wives.</td></tr>
<tr><td>Administrative expenses:</td><td>$150,000</td></tr>
<tr><td>Asset method:</td><td>Assets are determined by averaging the market value as of the valuation date and the adjusted market values as of the preceding two years. The resulting value is limited to between 90% to 110% of market value of assets. WRERA provides that the averaging method is to be adjusted for expected earnings. The expected earnings are based on an assumed rate of return of 7.50%, not to exceed the applicable third segment rate of 6.69% in 2009 and 6.82% in 2010.</td></tr>
<tr><td>Funding method:</td><td>Funding method is unit credit actuarial cost method, as prescribed by law. The liability is measured on an accrual-to-date basis using mandated mortality tables and interest rates with no salary projection past the end of the year.</td></tr>
</table>

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Line 22 – Description of Weighted Average Retirement Age
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Age	Rate	Probability of Retiring	Age x Probability
55	2.50%	2.50%	1.38
56	2.50%	2.44%	1.37
57	2.50%	2.38%	1.35
58	5.00%	4.63%	2.69
59	5.00%	4.40%	2.60
60	7.50%	6.27%	3.76
61	5.00%	3.87%	2.36
62	15.00%	11.03%	6.84
63	5.00%	3.12%	1.97
64	5.00%	2.97%	1.90
65	20.00%	11.28%	7.33
66	50.00%	22.56%	14.89
67	100.00%	22.56%	15.11
			63.54

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Line 32 – Schedule of Amortization Bases
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Schedule of Shortfall Amortization Bases as of January 1, 2011

Year Established	Original Base	Present Value of Remaining Installments	Years Remaining	Shortfall Amortization Charge
2011	$2,325,849	$2,325,849	7	$382,671
Total		$2,325,849		**$382,671**

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions

This subsection summarizes the major provisions of the Plan as included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

Applicable Provisions:	
	Effective January 1, 2007, employees hired on or after January 1, 2007 are not eligible to participate in the plan. Prior to January 1, 2007, employees hired after the effective date participate in the Raytheon Salaried provisions. Employees who were eligible participants at the effective date will have their benefits determined in accordance with the terms of the plan stated below that correspond to their participation status in the former Raytheon Company Pension Plan for Salaried Employees. "Effective Date" refers to the acquisition of Raytheon Company on 11/10/2004.
Prior Raytheon Service:	
	Benefits are based on total service, including service under prior plan.
Participation:	
	Employees shall be eligible to participate as of the first date of the month following attainment of age 21 and completion of 1,000 hours of service if such 1,000 hours are completed either during the 12-month period beginning with the employee's employment commencement date, or during any calendar year following his commencement date.

Plan Amendment	Effective Date	Reflected in **2011** Actuarial Valuation
1. The optional joint and survivor annuity was added as a form of payment.	January 1, 2008	Yes
2. The definition of actuarially equivalent single life annuity was modified.	January 1, 2004	Yes
3. Compensation for purposes of Section 415 of the Code was modified.	January 1, 2008	Yes
4. The optional 66 2/3rd% joint and survivor annuity form of payment was eliminated.	October 1, 2009	Yes
5. The provisions defining the benefit formula for E-Systems Richardson employees were clarified.	January 1, 2009	Yes
6. • Compensation was modified to exclude stock based compensation. • Definition of "layoff" with respect to vesting service was modified. • Provision of death benefit for employees who die in military service was modified. • "Differential wage payment" provision modified.	January 1, 2007/2010	Yes

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

Raytheon Salaried -- Normal retirement:	
Age requirement:	65
Amount:	The greater of: 6. 1.8% x years of service up to 20 x excess of Final Average Compensation (FAC) over Social Security benefit + 1.2% x years of service over 20 x excess of FAC over Social Security benefit, or 7. $492 per year of participation service.
Compensation:	Base pay, incentive pay, overtime pay, commission.
Average Compensation:	FAC: Average of highest consecutive 60 months out of last 120 months
Early retirement:	
Age requirement:	Age 55 with 10 years of service
Early retirement reduction:	7% reduction for each year retirement precedes age 60.
Normal form:	
	Life annuity. Actuarially equivalent 50% Joint and Survivor for married participants.
Vesting:	
Age requirement:	None
Service requirement:	5 years of service
Amount:	Regular pension accrued payable at age 65 (reduced pension at 55 with 10 years of service).
Vesting percentage:	100% after 5 years of service
Pre-retirement death benefits:	
	Surviving spouse eligible to receive benefit payable as if participant had terminated on date of death and commenced payment as 50% joint and survivor annuity and then died.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

Benefit credit:	
	From date of participation
Disability:	
	None
Lump sum benefits:	
	Benefits with present value less than $5,000 are automatically cashed out. If the present value is $5,000 or more, but less than $20,000, the participant has the option to receive a lump sum.
Other forms of payment:	
	10 year certain and life annuity 100% joint and survivor annuity 75% joint and survivor annuity Social Security level income annuity
Other forms of payment / early payments (when not eligible for early retirement) adjustments:	
	Joint and *survivor annuities*:

Percentage Payable to Survivor	**Percentage of Pension Otherwise Payable***
100%	80%
75%	85%
50%	90%

* These percentages are modified based on the age difference between the participant and joint annuitant

Summary of Plan Provisions *continued*

Other forms of payment / early payments (when not eligible for early retirement) adjustments: (continued)

10 year *certain and life annuity*:

Age at Commencement of Pension Benefits	Percentage of Pension Otherwise Payable	Age at Commencement of Pension Benefits	Percentage of Pension Otherwise Payable
65 and over	91.0%	60	95.5%
64	92.0%	59	96.0%
63	93.0%	58	96.3%
62	94.0%	57	96.6%
61	95.0%	56	96.9%
		55	97.2%

Early payment adjustments (when not eligible for Early Retirement at termination):

Age at Commencement of Pension Benefits	Percentage of Pension Otherwise Payable	Age at Commencement of Pension Benefits	Percentage of Pension Otherwise Payable
64	93.3%	59	63.3%
63	86.7%	58	60.0%
62	80.0%	57	56.7%
61	73.3%	56	53.3%
60	66.7%	55	50.0%

Summary of Plan Provisions *continued*

Social Security level income annuity:

The greater annuity resulting from the following two calculations:

a) An actuarial equivalent annuity based upon the assumptions described in IRC 417(e) with an August lookback for the applicable yield curve

b) The pre-62 annuity is increased by the participant's expected PIA at 62, less the applicable % of the expected PIA based on the following table:

Age at Commencement of Pension Benefits	Appropriate Factor
61	.08
60	.16
59	.22
58	.28
57	.33
56	.38
55	.42

If the result of the above calculation is less than the expected PIA, the pre-62 annuity is equal to the participant's early retirement benefit divided by the applicable factor above and payment ceases at age 62.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

Raytheon TI Systems -- Normal retirement:	
Age requirement:	65
Amount:	The greater of: (1) 1.5% x years of service x Average Credited Earnings (ACE) offset by Retirement Age Factor x Final Average Compensation (FAC) x years of projected service at NRA (not more than 35) x ratio of service at termination to projected service at NRA (not to exceed 1). (2) $84 x years of service
Compensation:	Base pay, incentive pay, overtime pay, hazard pay, and pre-tax deferrals
Average Compensation:	ACE: Average of highest 5 consecutive calendar years FAC: The lesser of of (a) average compensation for the 3-year period up to the year of termination (not more than the Social Security wage base), or (b) the average of Social Security wage bases during 35 years up to participant's Social Security Retirement Age.
Age Factor	For employees born before 1938: 0.75%; from 1938 to 1954: 0.70%; after 1954: 0.65%.
Early retirement:	
Age requirement:	60 with 5 years of service or age 55 with 20 years of service
Early retirement reduction:	1/3% reduction for each of the first 60 months prior to age 65; 7/24% reduction for each of the next 60 months. Different factors apply to offset.
Normal form:	
	Life annuity. Actuarially equivalent 50% Joint and Survivor for married participants.
Vesting:	
Age requirement:	None
Service requirement:	5 years of service
Amount:	Regular pension accrued payable at age 65 (reduced pension at 60).
Vesting percentage:	100% after 5 years of service
Pre-retirement death benefits:	
	Surviving spouse eligible to receive benefit payable as if participant had terminated on date of death and commenced payment as 50% joint and survivor annuity and then died.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

Benefit credit:	
	Equal to participants service (without age requirement of prior TI plan)
Disability:	
Service requirement:	Disabled employees are eligible for an annuity deferred to Normal Retirement Age computed based on compensation at the time of disability and service projected to Normal Retirement Age.
Lump sum benefits:	
	Benefits with present value less than $1,000 are automatically cashed out. If the present value is over $1,000 and less than $5,000, the participant has the option to receive a lump sum or defer the payment to a date no later than their Normal Retirement Age. If the present value is $5,000 or more, the participant has the option to receive a lump sum. Lump sums are valued based on interest rates prescribed by §417(e) and the mandated mortality table.
Other forms of payment:	
	10 year certain and life annuity 100% joint and survivor annuity 75% joint and survivor annuity
Other forms of payment / early payments (when not eligible for early retirement adjustments):	
	Benefits paid under an optional form of payment and/or paid prior to Normal Retirement when not eligible for Early Retirement shall equal the Actuarial Equivalent of the normal form of benefit, determined on the basis of the UP-1984 Mortality Table without setback for calculations based upon the mortality of the employee and with a three-year set back for any beneficiaries or other contingent payees and the interest rate which would be used during the first month of the Plan Year by the Pension Benefit Guaranty Corporation for purposes of determining the single sum value of the lump-sum distribution on Plan termination.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

E-Systems Salaried & E-Systems Richardson/Waco -- Normal retirement:	
Age requirement:	65 with 5 years of service
Amount:*	1.2% x Average Monthly Compensation (AMC) x years of benefit service up to 10 + 1.6% x AMC x years of benefit service over 10, not less than $12 times years of benefit service.
Compensation:	Base pay, incentive pay, overtime pay, commission, shift differentials, pre-tax deferrals
Average Compensation*:	AMC: Average of highest 60 consecutive calendar months out of last 120 months.
Early retirement:	
Age requirement:	55 with 10 years of service
Early retirement reduction:	Age 60: 100% Age 59: 99% Age 58: 96% Age 57: 91% Age 56: 84% Age 55: 75%
Normal form:	
	5-Year Certain and Life. Actuarially equivalent 50% Joint and Survivor for married participants.
Vesting:	
Age requirement:	None
Service requirement:	5 years of service
Amount:	Regular pension accrued payable at age 65 (reduced pension at 55 with 10 years of service).
Vesting percentage:	100% after 5 years of service
Pre-retirement death benefits:	
	Surviving spouse eligible to receive benefit payable as if participant had terminated on date of death and commenced payment as 50% joint and survivor annuity and then died.

* For E-Systems Richardson / Waco employees, these provisions apply to service earned after 1996. A different set of provisions applies to pre-1997 service.

Attachment to 2011 Schedule SB of Form 5500
Schedule SB, Part V – Summary of Plan Provisions
L-3 Communications Infrared Products Retirement Plan
EIN 13-3937436 PN 021

Summary of Plan Provisions *continued*

Benefit credit:	
	From date of hire
Disability:	
Service requirement:	Disabled employees with 10 or more years of service are eligible for an annuity deferred to Normal Retirement Age computed based on compensation at the time of disability and service projected to Normal Retirement Age.
Lump sum benefits:	
	Benefits with present value less than $1,000 are automatically cashed out. If the present value is $1,000 or more, but less than $5,000, the participant can defer the lump sum to a date not later than Normal Retirement Age. If the present value is $5,000 or more, but less than $20,000, the participant has the option to receive a lump sum.
Other forms of payment:	
	10 year certain and life annuity 100% joint and survivor annuity 75% joint and survivor annuity
Other forms of payment / early payments (when not eligible for early retirement adjustments):	
	E-Systems Salaried benefits paid under an optional form of payment and/or paid prior to Normal Retirement when not eligible for Early Retirement shall equal the Actuarial Equivalent of the normal form of benefit, determined on the basis of a 7% interest rate and the 1971 Group Annuity Mortality Table, projected by Scale D to 1975, using a unisex rate that is 50% male and 50% female. E-Systems Richardson/Waco benefits paid under an optional form of payment and/or paid prior to Normal Retirement when not eligible for Early Retirement shall equal the Actuarial Equivalent of the normal form of benefit, determined on the basis of a 9% interest rate and the 1983 Group Annuity Mortality Table, using a unisex rate that is 70% male and 30% female.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2011

This Form is Open to Public Inspection

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

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

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

A Name of plan
L-3 Communications Infrared Products Retirement Plan

B Three-digit plan number (PN) ▶ 021

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
L-3 Communications Corporation

D Employer Identification Number (EIN)
13-3937436

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

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

Part I Basic Information

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

2 Assets:

a	Market value	2a	9995244
b	Actuarial value	2b	9305266

3 Funding target/participant count breakdown:

			(1) Number of participants	(2) Funding Target
a	For retired participants and beneficiaries receiving payment	3a	5	605624
b	For terminated vested participants	3b	55	2897060
c	For active participants:			
	(1) Non-vested benefits	3c(1)		878358
	(2) Vested benefits	3c(2)		7248208
	(3) Total active	3c(3)	91	8126566
d	Total	3d	151	11629250

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

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

5	Effective interest rate	5	6.40%
6	Target normal cost	6	675028

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

ELNATAN SULIMANOFF ES

Signature of actuary

9/12/2012

Date

ELNATAN SULIMANOFF, FSA, MAAA, EA

Type or print name of actuary

1106454

Most recent enrollment number

SIBSON CONSULTING

Firm name

212-251-5000

Telephone number (including area code)

333 W 34TH STREET

NEW YORK NY 10001-2402

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	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	1443004	0
10	Interest on line 9 using prior year's actual return of 0.00%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38 from prior year)		0
	b Interest on (a) using prior year's effective rate of 0% except as otherwise provided (see instructions)		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	1441139	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1865	0

Part III Funding percentages

14	Funding target attainment percentage	14	80.00%
15	Adjusted funding target attainment percentage	15	80.00%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	91.40%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and liquidity shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2011	254000				
07/15/2011	254000				
10/14/2011	206000				
01/13/2012	238000				
03/15/2012	335000				
04/12/2012	98000				
07/05/2012	265000				
09/04/2012	337000				
			Totals ▶ 18(b)	1987000	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	1860254

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

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

b Applicable month (enter code)	21b	4
22 Weighted average retirement age	22	64

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

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment		☐ Yes ☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment		☒ Yes ☐ No
27 If the plan is eligible for (and is using) alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of unpaid minimum required contributions for prior years

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

Part VIII Minimum required contribution for current year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	31a	675028
b Excess assets, if applicable, but not greater than 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2325849	382671
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	1057699

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

36 Additional cash requirement (line 34 minus line 35)	36	1057699
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1860254
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	802555
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

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

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

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

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

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